STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

August 5, 2020

Kimberly O'Neal
Spectrum Community Services
332 First St
Manistee, MI 49660

RE: License #: AS630397220
Investigation #: 2020A0602034
Davisburg Home

Dear Mrs. O'Neal:

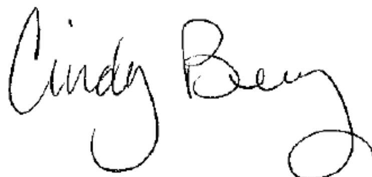
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,



Cindy Berry, Licensing Consultant
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4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 860-4475

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS630397220
Investigation #:	2020A0602034
Complaint Receipt Date:	06/02/2020
Investigation Initiation Date:	06/03/2020
Report Due Date:	08/01/2020
Licensee Name:	Spectrum Community Services
Licensee Address:	28303 Joy Rd. Westland, MI 48185
Licensee Telephone #:	(734) 458-8729
Administrator:	Kimberly O'Neal
Licensee Designee:	Kimberly O'Neal
Name of Facility:	Davisburg Home
Facility Address:	11914 Davisburg Road Davisburg, MI 48350
Facility Telephone #:	(734) 458-8729
Original Issuance Date:	06/06/2019
License Status:	REGULAR
Effective Date:	12/06/2019
Expiration Date:	12/05/2021
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A moved from the Davisburg Home to the Groveland Home. It was discovered she had not received the correct dosage of her prescribed medication, Lexapro.	Yes

III. METHODOLOGY

06/02/2020	Special Investigation Intake 2020A0602034
06/03/2020	Special Investigation Initiated - Telephone Call made to the Office of Recipient Rights worker, Sondra Knisely.
06/12/2020	Contact - Telephone call made Spoke with the assigned Office of Recipient Rights worker, Sondra Knisely.
06/17/2020	Contact – Telephone call made Interviewed the home manager of Groveland Home, Sandy Bradley.
07/23/2020	Contact – Document received Received emailed documents from Ms. Knisely.
07/30/2020	Exit Conference Held with the licensee designee, Kimberly O'Neal by telephone.
07/30/2020	Contact – Telephone call made Call made to staff member Cassandra Jackson – no answer.

ALLEGATION:

Resident A moved from the Davisburg Home to the Groveland Home. It was discovered she had not received the correct dosage of her prescribed medication, Lexapro.

INVESTIGATION:

On 6/2/2020, a complaint was received and assigned for investigation alleging that Resident A moved from the Davisburg Home to the Groveland Home. It was discovered she had not received the correct dosage of her prescribed medication, Lexapro.

On 6/12/2020, I spoke with the assigned Office of Recipient Rights worker, Sondra Knisely by telephone. Ms. Knisely stated she has not interviewed staff member, Cassandra Jackson as she has not been able to reach her. She agreed to provide the documents relevant to the investigation.

On 6/17/2020, I interviewed Sandy Bradley who is the home manager for the Groveland Home (Resident A's new residence). Ms. Bradley stated Resident A moved into the Groveland Home on 5/18/2020. When she arrived her medications and paperwork was very unorganized. After sorting through her medication, Ms. Bradley observed multiple blister packs of unused Lexapro 20 mg. The pharmacy was contacted to determine what prescription they had on file for this medication. Ms. Bradley was informed that the pharmacy continued to send the medication because it was not discontinued. Ms. Bradley reviewed Resident A's medication logs and all prescriptions in her resident file. She observed a prescription for Lexapro 20 mg daily and one for 10 mg daily. Apparently when Resident A was seen by the psychiatrist in January 2020, an increase of Lexapro 10 mg was prescribed in addition to the 20 mg she was already receiving. After reviewing Resident A's medication logs, Ms. Bradley noticed that staff member, Cassandra Jackson discontinued Resident A's 20 mg of Lexapro and was only administering the 10 mg. The prescribing physician was contacted and instructed staff to administer 20 mg in the am for seven days and then increase to 30 mg daily thereafter.

On 7/23/2020, I received and reviewed Resident A's medication logs dated 12/1/2019 through 5/31/2020, appointment information record dated 1/28/2020 (signed by staff member K. Jackson), prescriptions dated 1/28/2020 for Lexapro 20 mg (daily in the morning), Lexapro 10 mg (daily in the morning), Latuda 60 mg (half tablet twice daily) and prescription dated 5/26/2020 for Lexapro 20 mg for seven days then increase to 30 mg thereafter. According to the medication logs dated 12/1/2019 through 1/28/2020, Resident A was receiving 20 mg of Lexapro once daily at 8 am. On 1/29/2020 through 5/26/2020 it was handwritten on the medication log that Lexapro 20 mg was discontinued, and 10 mg daily was administered at 8 am. The appointment information record documents that Resident A was seen by the doctor on 1/28/2020 and her Lexapro was increased by 10 mg (from 20 mg to 30 mg) as was her Latuda from 40 mg to 60 mg. The prescription for Lexapro documents 20 mg tablet daily and 10 mg tablet daily. The Lexapro prescription indicates 60 mg daily (half tablet at 4 pm and half tablet at 8 pm).

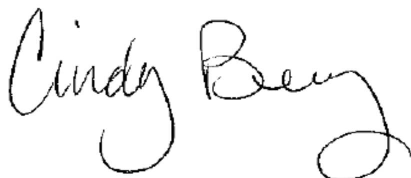
On 7/30/2020, I conducted an exit conference with the licensee designee, Kimberly O'Neal by telephone. Ms. O'Neal was informed of the investigative findings and recommendation of the investigation. She stated she was aware of the medication error and interviewed the staff member who was responsible for the error (Cassandra Jackson). Ms. Jackson stated after reviewing Resident A's prescriptions, she was able to see that the prescription for Lexapro was an increase and not a decrease. According to Ms. O'Neal, Ms. Jackson had no explanation for the error and resigned.

APPLICABLE RULE	
R 400.14312	**Resident medications.**
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
ANALYSIS:	Based on the information obtained during the investigation, I determined that Resident A’s Lexapro 20 mg was not administered as pursuant to the label instructions. Lexapro 20 mg continued to be delivered by the pharmacy and was documented on Resident A’s medication logs but was not administered.
CONCLUSION:	**VIOLATION ESTABLISHED**

APPLICABLE RULE	
R 400.14312	**Resident medications.**
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.
ANALYSIS:	Based on the information obtained during the investigation, I determined that on 1/28/2020 Resident A’s physician increased her daily Lexapro by 10 mg (from 20 mg to 30 mg). Ms. Jackson decreased Resident A’s Lexapro from 20 mg to 10 mg without instructions from a physician to do so.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



8/5/2020

Cindy Berry
Licensing Consultant

Date

Approved By:

08/07/2020

Denise Y. Nunn
Area Manager

Date