



STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ORLENE HAWKS  
DIRECTOR

June 28, 2021

Paula Mangus  
Masonville Place  
150 N. Shore Drive  
Coldwater, MI 49036

RE: License #:	AH120378302 Masonville Place 150 N. Shore Drive Coldwater, MI 49036
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Dear Ms. Mangus:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 feel free to contact the local office at (517) 284-9730.

Sincerely,

Kimberly Horst, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
Lansing, MI 48909

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH120378302
<b>Licensee Name:</b>	Masonville AID OPCO LLC
<b>Licensee Address:</b>	Ste 3700 330 N. Wabash Chicago, IL 60611
<b>Licensee Telephone #:</b>	(312) 725-7000
<b>Authorized Representative:</b>	Paula Mangus
<b>Administrator:</b>	Tricia Weissmann
<b>Name of Facility:</b>	Masonville Place
<b>Facility Address:</b>	150 N. Shore Drive Coldwater, MI 49036
<b>Facility Telephone #:</b>	(517) 278-6805
<b>Original Issuance Date:</b>	12/14/2016
<b>Capacity:</b>	89
<b>Program Type:</b>	AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 6/28/21

Date of Bureau of Fire Services Inspection if applicable: 5/13/21

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference:

No. of staff interviewed and/or observed 10

No. of residents interviewed and/or observed 7

No. of others interviewed 0 Role N/A

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. Resident funds not kept in trust
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Disaster plans reviewed and staff interviewed.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:
- Number of excluded employees followed up? N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
<b>R 325.1921</b>	<b>Governing bodies, administrators, and supervisors.</b>
	(1) <b>The owner, operator, and governing body of a home shall do all of the following:</b> (b) <b>Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</b>
<b>For Reference: R 325.1901</b>	<b>Definitions.</b>
	(16) <b>"Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.</b>
<p>Upon my inspection, Resident A had halo bedside assistive devices attached to her bed. Resident A had a physician order for the devices and the devices were in Resident A's service plan.</p> <p>The Halo devices were on both sides of the bed and were firmly attached to the bed. However, the distance between the slats of the device was large enough to allow the resident's head/leg or arm from becoming accidentally entrapped between the slats. The facility failed to protect Resident A from harm as Resident A could become entrapped in the devices.</p>	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	(5) <b>A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.</b>
Review of Resident A's service plan revealed it was last updated on 3/11/20 which is over a year since the last review.	
<b>R 325.1932</b>	<b>Resident medications.</b>

	<b>(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.</b>
<p>Review of Resident B's medication administration record (MAR) revealed Resident B was prescribed Acetaminophen tab 325mg with instruction to administer two tablets by mouth every six hours as needed for pain. In addition, Resident B was prescribed Acetaminophen w/ Cod Tab #3 with instruction to administer one tablet by mouth two times a day for pain. Also, Resident B was prescribed Morphine Oral Conc 20mg/ml with instruction to administer 0.25ml by mouth every four hours as needed for pain. There is no instruction for staff to know whether to administer one over the other or if both can be given at the same time. The lack of instruction places residents at an unnecessary risk of harm due to administration based on what the staff feel is appropriate verses what the physician intended.</p>	
<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.</b>
<p>Review of Resident B's MAR revealed Resident B was Haloperidol Tab 0.5mg with instruction to administer one tablet by mouth every four hours as needed for agitation. Review of Resident B's service plan revealed the service plan omits information regarding aggression. The service plan neglects how Resident B exhibits these behaviors and what behaviors require the administration of the medication.</p>	
<b>R 325.1932</b>	<b>Resident medications.</b>
	<p><b>(3) If a home or the home's administrator or direct care staff member supervises the taking of medication by a resident, then the home shall comply with all of the following provisions:</b></p> <p><b>(b) Complete an individual medication log that contains all of the following information:</b></p> <p><b>(v) The initials of the person who administered the medication, which shall be entered at the time the medication is given.</b></p> <p><b>(vi) A resident's refusal to accept prescribed medication or procedures.</b></p>
<p>Review of Resident C's MAR revealed Resident C was prescribed Loratadine Tab 10mg with instruction to administer one tablet by mouth one time a day. The MAR revealed Resident C did not receive this medication on 6/6, 6/18, 6/20, 6/21, and</p>	

6/28. There was no explanation as to the reasoning why Resident C did not receive this medication.	
<b>R 325.1935</b>	<b>Bedding, linens, and clothing.</b>
	<b>(2) The home shall assure the availability of clean linens, towels, and washcloths. The supply shall be sufficient to meet the needs of the residents in the home. Individually designated space for individual towels and washcloths shall be provided.</b>
Inspection of the facility revealed there was no availability of clean linens including towels and washcloths for the residents. Ms. Weissmann reported the facility will provide these items to the residents but there is no additional supply of these items.	

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

\_\_\_\_\_ Date  
Licensing Consultant