



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 10, 2021

Barbara Freysinger
LifeSpan...A Community Service
PO Box 1978
524 North Jackson Street
Jackson, MI 49201-1978

RE: License #: AS380389411
Hampton Drive
1218 Hampton Drive
Jackson, MI 49203

Dear Ms. Freysinger:

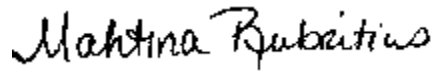
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 licensee or licensee designee and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (313) 456-0380.

Sincerely,



Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd., Ste. #9-100
Detroit, MI 48202
(517) 262-8604

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

I. IDENTIFYING INFORMATION

License #:	AS380389411
Licensee Name:	LifeSpan...A Community Service
Licensee Address:	PO Box 1978 524 North Jackson Street Jackson, MI 49201-1978
Licensee Telephone #:	(517) 784-4426
Licensee/Licensee Designee:	Barbara Freysinger
Administrator:	Lisa Stewart
Name of Facility:	Hampton Drive
Facility Address:	1218 Hampton Drive Jackson, MI 49203
Facility Telephone #:	(517) 917-6876
Original Issuance Date:	02/11/2019
Capacity:	4
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/26/2021 (On-Site Inspection) & 08/31/2021 (Paperwork Review)

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 5

No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
The on-site inspection was not concurrent with the meal times.
- Fire drills reviewed? Yes No If no, explain.
- Fire safety equipment and practices observed? Yes No If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
R 330.1803 (6), R 400. 14407 (3), R 400. 14511 (4), R 400. 14411 (3), R 400. 14301 (4)(6), R 400. 14303 (2) R 400. 14301 (2)(a), R 400. 14206 (1), and
- R 400. 14313 (1)(4). N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 330.1803 Facility environment; fire safety.

(6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 month from the date of the finding to either of the following:

(a) Improve the score to at least the "slow" category.

(b) Bring the home into compliance with the physical plant standards for "Impractical" homes contained in chapter 21 of the 1985 life safety code of the national fire protection association, which are adopted by reference in these rules and which may be obtained from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost, or from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of the chapter 21 standards. A price quote for copying of these pages may be obtained from the national fire protection association.

- Resident A was admitted into the home in December of 2019; however, the E-Scores were not completed until March 2, 2020. Therefore, the evacuation assessments were not conducted within 30 days after the admission.

R 400.14315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

- The Resident Funds Part I form was not fully completed for one resident file reviewed (Resident B).

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(1) A licensee shall have a written emergency procedure and evacuation plan to be followed in case of fire, medical, or severe weather emergencies. The evacuation plan shall be prominently posted in the home. Residents who require special assistance shall be identified in the written procedure.

- Resident B required special assistance during emergency situations; however, this information was not documented in the written emergency plan and procedures.

R 400.14401 Environmental health.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

- The running hot water temperature was 122.2 degrees Fahrenheit. The temperature was adjusted prior to the completion of the on-site inspection. The water temperature was retested, and the temperature was 113.0 degrees Fahrenheit.

R 400.14403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

- There was condensation on the basement floor, causing a hazard for occupants in the home.
- The flexible metal duct on the dryer was not fully attached and it also required repair or replacement.

R 400.14403 Maintenance of premises.

(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

- The bathroom (located in Resident C's bedroom) was not equipped with a handrail in the shower.

R 400.14403 Maintenance of premises.

(8) Stairways shall have sturdy and securely fastened handrails. The handrails shall be not less than 30, nor more than 34, inches above the upper surface of the tread. All exterior and interior stairways and ramps shall have handrails on the open sides. All porches and decks that are 8 inches or more above grade shall also have handrails on the open sides.

- The handrail on the front porch was not securely fastened. Maintenance staff corrected this violation prior to the conclusion of the on-site inspection.

R 400.14511 Flame-producing equipment; enclosures.

(4) Combustible materials shall not be stored in rooms that contain heating equipment, a water heater, an incinerator, or other flame-producing equipment.

- Combustible materials were stored behind the water heater in the basement. The items were removed prior to the completion of the on-site inspection.

THIS IS A REPEAT VIOLATION (8/9/2019- Renewal Inspection)

IV. RECOMMENDATION

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

Mahina Rubritius

9/10/2021

Licensing Consultant

Date