

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 27, 2021

Danielle Penfold Country Gardens 203 N Caseville Road Pigeon, MI 48755

RE: License #: AH320238093

Country Gardens 203 N Caseville Road Pigeon, MI 48755

Dear Ms. Penfold:

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 or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. 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,

Aaron Clum, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 230-2778

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH320238093	
Licensee Name:	Scheurer Community Services	
Licensee Address:	170 N Caseville Rd.	
	Pigeon, MI 48755	
Licensee Telephone #:	(989) 453-7474	
Authorized Representative:	Danielle Penfold	
Administrator:	Carissa Hayes	
Name of Facility:	Country Gardens	
Facility Address:	203 N Caseville Road	
	Pigeon, MI 48755	
Facility Telephone #:	(989) 453-7474	
Original Issuance Date:	04/21/2003	
Capacity:	61	
Program Type:	AGED	

II. METHODS OF INSPECTION

Date of On-site Inspection	on(s): 9/27/21	
Date of Bureau of Fire S	ervices Inspection if applicable: 1	/4/21
Inspection Type:	☐Interview and Observation☐Combination	⊠Worksheet
Date of Exit Conference	: 9/27/21	
No. of staff interviewed a No. of residents interviewed No. of others interviewed	ved and/or observed	5 12
Medication pass / si	mulated pass observed? Yes $oxtimes$	No ☐ If no, explain.
explain. ■ Resident funds and Yes □ No ☑ If no	nedication records(s) reviewed? `associated documents reviewed, explain. The facility does not materice observed? Yes \(\subseteq \) No \(\subseteq \)	for at least one resident? aintain resident funds
• Fire drills reviewed?	Yes ⊠ No ☐ If no, explain.	
Water temperatures	checked? Yes ⊠ No □ If no,	explain.
Corrective action plan	-up? Yes ☐ IR date/s: N// an compliance verified? Yes ☐ employees followed up? 1 N/A ☐	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:		
R 325.1932	Resident medications.	
	(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.	
For Reference: R 325.1901	Definitions	
	(14) "Medication management" means assistance with the administration of a resident's medication as prescribed by a licensed health care professional.	

During the inspection I observed care associate Brooklyn Schultz administering medications to Resident A at approximately 945am. When interviewed, Ms. Schultz indicated that medications are to be administered within one hour before or one hour after the scheduled time indicated on the physician's order. Ms. Shultz further indicates that several of the medications being administered were scheduled for 8am, approximately one hour and forty five minutes after the scheduled time for administration. Based on the findings the facility is not in compliance with this rule.

VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Date
Licensing Consultant