



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 8, 2021

Rebecca Lopez
Residential Opportunities, Inc.
1100 South Rose Street
Kalamazoo, MI 49001

RE: License #: AM390382556
E & F Douglas Group Living
1428 N. 30th Street
Galesburg, MI 49053

Dear Ms. Lopez:

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, resolution of Special Investigation #2021A0581047, and final approval from the Bureau of Fire Services, a regular license and Special Certification 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 (517) 284-9730.

Sincerely,



Michele Streeter, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 251-9037

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

I. IDENTIFYING INFORMATION

License #: AM390382556

Licensee Name: Residential Opportunities, Inc.

Licensee Address: 1100 South Rose Street
Kalamazoo, MI 49001

Licensee Telephone #: (269) 343-3731

Licensee/Licensee Designee: Rebecca Lopez

Administrator: Vicki Richardson

Name of Facility: E & F Douglas Group Living

Facility Address: 1428 N. 30th Street
Galesburg, MI 49053

Facility Telephone #: (269) 343-9720

Original Issuance Date: 03/25/2019

Capacity: 12

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/05/2021, 09/07/2021

Date of Bureau of Fire Services Inspection if applicable: 05/19/2021

Date of Health Authority Inspection if applicable: 05/27/2021

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 [redacted] 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.
- 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:
CAP dated 10/01/2019: rules 205(5), 208(1)(c), 301(6)(d)(e)(f)(i)(k)(8)(10),312(2),
315(6) 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 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(8) A copy of the signed resident care agreement shall be provided to the resident or the resident's designated representative. A copy of the resident care agreement shall be maintained in the resident's record.

REPEAT FINDING: *A resident care agreement is a contract between the resident or resident's designated representative, the licensee, and the responsible agency, if any, and details the responsibilities of each. Resident care agreements must contain all the required signatures and dates. Resident A, B, C, D and E's written Resident Care Agreements were missing the last page, which contains all required signatures and the date the agreement was signed.*

R 400.14306 Use of assistive devices.

(2) An assistive device shall be specified in a resident's written assessment plan and agreed upon by the resident or the resident's designated representative and the licensee.

(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

FINDING: Resident E utilizes bedrails. The use of bedrails was not indicated in Resident E's written assessment plan. Subsequently, there was no verification Resident E's use of bedrails was agreed upon by Resident E and/or her designated representative and the licensee.

There was no authorization for Resident E's use of bedrails, in writing, by a licensed physician on record in the facility.

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.

FINDING: Water tested from a sink's faucet located in the kitchen, was 81 degrees Fahrenheit.

Water tested from a sink's faucet in a shared bathroom located on the main floor, was 66 degrees Fahrenheit.

Water tested from a sink's faucet in a bathroom located in bedroom #2, was 133 degrees Fahrenheit.

Water tested from a sink's faucet in a bathroom located in bedroom #4, was 138 degrees Fahrenheit.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, resolution of Special Investigation #2021A0581047, and final approval from the Bureau of Fire Services renewal of the license and Special Certification is recommended.



09/08/2021

Michele Streeter
Licensing Consultant

Date