



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 29, 2021

Paul Barber
Heritage Community of Kalamazoo
2400 Portage St.
Kalamazoo, MI 49001

RE: License #: AH390237411
Amber Way
300 Golden Drive
Kalamazoo, MI 49001

Dear Mr. Barber:

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 by 12/14/21 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. 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 (616)356-0100.

Sincerely,
Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
Cell (616) 204-4300

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

I. IDENTIFYING INFORMATION

License #:	AH390237411
Licensee Name:	Heritage Community of Kalamazoo
Licensee Address:	2400 Portage St. Kalamazoo, MI 49001
Licensee Telephone #:	(269) 343-5345
Authorized Representative:	Paul Barber
Administrator/Licensee Designee:	Ashley Lubbers
Name of Facility:	Amber Way
Facility Address:	300 Golden Drive Kalamazoo, MI 49001
Facility Telephone #:	(269) 383-6822
Original Issuance Date:	06/06/2001
Capacity:	22
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/24/2021

Date of Bureau of Fire Services Inspection if applicable: BFS – A 12/1/2021

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 11/24/2021

No. of staff interviewed and/or observed 8

No. of residents interviewed and/or observed 17

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. The home does not hold resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- 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: N/A
- Number of excluded employees followed up? 0 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1922	Admission and retention of residents.
	(7) An individual admitted to the resident in the home shall have evidence of tuberculosis screening on record in the home which consists of an intradermal skin test, chest x-ray, or other methods recommended by the local health authority performed within 12 months before admission.
ANALYSIS:	<p>Review of six resident tuberculosis screenings revealed two residents did not have an appropriate tuberculosis screening completed within 12 months before admission.</p> <p>Resident A was admitted to the home 6/18/2020 and a tuberculosis screen was not completed until 7/14/2020.</p> <p>Resident B was admitted to the home 1/23/2020 and had a prior tuberculosis screen from 1/15/2016. However, the tuberculosis screening must be within 12 months before admission.</p>
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1954	Meal and food records.
	The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.
ANALYSIS:	<p>Inspection of the home revealed no record of any meal census kept for the preceding 3-month period.</p>
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1975	Laundry and linen requirements.
	(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following: (a) A separate soiled linen storage room. (b) A separate clean linen storage room.
ANALYSIS:	Inspection of the home revealed person protection equipment (PPE), walkers, and wheelchair footrests stored in the same laundry area as soiled and clean linens. A laundry area is intended for the cleaning of linens only and the mixing of items is not consistent with infection control methods.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
ANALYSIS:	Inspection of the home revealed hazardous and toxic materials such as hair spray, shampoo, conditioner, nail polish remover, nail polish spray, and industrial cleaning solutions were found in the common area and in the unlocked spa room in the home. These items were easily accessible to anyone in the home and present a potential risk of ingestion and harm to residents in the home with impaired cognition and function.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Julie Mirano

11/29/2021

Licensing Consultant Date

