

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 13, 2021

Rosio Ordish 1975 E Sanilac Rd Carsonville, MI 48419

RE: License #: AM760075230 Investigation #: 2022A0871012

R & R Afc Home

Dear Ms. Ordish:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 contact the local office at (989) 732-8062.

Sincerely,

Kathryn A. Huber, Licensing Consultant Bureau of Community and Health Systems

411 Genesee
P.O. Box 5070
Saginaw, MI 48605
(989) 293-3234

Kathrys Habe

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AM760075230
linus atimatic in the	202240074042
Investigation #:	2022A0871012
Complaint Receipt Date:	11/30/2021
Investigation Initiation Date:	12/02/2021
Papart Dua Data:	01/29/2022
Report Due Date:	01/29/2022
Licensee Name:	Rosario Ordish
Licensee Address:	1975 E Sanilac Rd
	Carsonville, MI 48419
Licensee Telephone #:	(810) 648-2648
	(6.6) 6.6 26.6
Administrator:	Santa Dickendesher
	21/0
Licensee Designee:	N/A
Name of Facility:	R & R Afc Home
	Transfer and the state of the s
Facility Address:	105 S Jackson St
	Sandusky, MI 48471
Facility Telephone #:	(810) 648-3326
Tuenty Telephone #.	(010) 040-0020
Original Issuance Date:	03/12/1997
License Status:	REGULAR
Effective Date:	02/07/2020
Ellocato Bato.	02/01/2020
Expiration Date:	02/06/2022
	10
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

AGED
AGLD

II. ALLEGATION(S)

Violation Established?

Resident A was given Risperdal 0.5 mg/day after it had been	Yes
discontinued by Sanilac County Community Mental Health	
Psychiatrist on 09/27/2021.	

III. METHODOLOGY

11/30/2021	Special Investigation Intake 2022A0871012
12/02/2021	Special Investigation Initiated - On Site Interviewed Licensee Santa Dickendesher, Staff Janet Murray, and Resident A
12/02/2021	Exit Conference With Administrator Santa Dickendesher
12/13/2021	APS Referral Through Central Intake to Sanilac County MDHHS

ALLEGATION:

Resident A was given Risperdal 0.5 mg/day after it had been discontinued by Sanilac County Community Mental Health Psychiatrist on 09/27/2021.

INVESTIGATION:

On December 2, 2021, I conducted an unannounced onsite investigation and interviewed Resident A. Resident A stated she cannot remember what medications she gets but she knows she is getting her meds. Resident A said she gets "a blue and white one at bedtime."

On December 2, 2021, I interviewed Med Coordinator Janet Murray at the unannounced onsite investigation. Ms. Murray indicated Resident A had an appointment on September 27, 2021 and the psychiatrist discontinued her Risperdal. Ms. Murray did discontinue the medication on September 27, 2021 and

the Risperdal was not given to Resident A in October 2021. Ms. Murray provided me with a copy of the discontinued order which was dated September 27, 2021. Ms. Murray also provided me with Resident A's *Medication Administration Records* for September, October, and November 2021. It indicates that Resident A's Risperdal was discontinued on September 27, 2021 and she did not receive it in October. In November, Resident A's *Medication Administration Record* indicates Resident A did receive Risperdal from November 1 through November 12, 2021. Ms. Murray indicated that it was her fault for administering Resident A the discontinued Risperdal but the pharmacy had sent it for November.

On December 2, 2021, I also interviewed Administrator Santa Dickendesher. Administrator Dickendesher indicated Memphis Drugs did not get the paperwork to discontinue Resident A's Risperdal. Administrator Dickendesher stated Sanilac County Community Mental Health never send the d/c order to the pharmacy.

On December 2, 2021, I interviewed Pharmacy Tech April Marentette. Ms. Marentette indicated Memphis Drugs did not receive a d/c order from Sanilac County Community Mental Health regarding Resident A's Risperdal. She also stated it is not unusual that the pharmacy does not receive a d/c order. Ms. Marentette said the pharmacy had a refill order for Resident A's Risperdal and it was refilled on October 28, 2021 and sent to the facility.

On December 2, 2021, I conducted a face-to-face exit interview with Administrator Santa Dickendesher, who has written permission from Licensee Rosio Order to conduct licensing issues. I advised Administrator Dickendesher that this is clearly a rule violation.

APPLICABLE RULE		
R 400.14312	Resident medications.	
	(2) Medication shall be given, taken, or applied pursuant to label instructions.	
ANALYSIS:	Medication Coordinator Janet Murray said she was responsible for administering Resident A the Risperdal after it had been discontinued. Resident A had a d/c order dated 09/27/2021 but the medication was initialed as given from 11/01/2021 through 11/12/2021. I confirm violation of this rule.	
CONCLUSION:	VIOLATION ESTABLISHED	

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the status of this adult foster care medium group home remain unchanged (capacity 1-12).

Kathrys Habe 12/13/2	2021
Kathryn A. Huber	Date
Licensing Consultant	Date
Approved By: 12/13/2	
Mary E Holton	Date
Area Manager	