



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 9, 2022

Meaghan Rinaldi
Emmaus Corp.
2447 N Williamston Rd
Williamston, MI 48895

RE: License #: AL330093906
Haven Of Rest
2447 N Williamston
Williamston, MI 48895

Dear Ms. Rinaldi:

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 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 (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Leslie Herrguth".

Leslie Herrguth, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 256-2181

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

I. IDENTIFYING INFORMATION

License #:	AL330093906
Licensee Name:	Emmaus Corp.
Licensee Address:	2447 N Williamston Rd Williamston, MI 48895
Licensee Telephone #:	(517) 655-8953
Licensee Designee:	Meaghan Rinaldi
Administrator:	Meaghan Rinaldi
Name of Facility:	Haven Of Rest
Facility Address:	2447 N Williamston Williamston, MI 48895
Facility Telephone #:	(517) 655-8953
Original Issuance Date:	03/13/2001
Capacity:	18
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/08/2022

Date of Bureau of Fire Services Inspection if applicable: 02/18/2021

Date of Health Authority Inspection if applicable: 11/23/2021

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 13

No. of others interviewed 1 Role: licensee designee

- 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:
02/11/2020 for rules 201 (14), 208(1)(f), 301 (4), 301 (6), and 315 (3) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A
Variance for rule 315 (3) granted 04/05/2020.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.15205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

Direct care staff member #1 was hired on 02/05/2020 and did not provide a statement signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of staff member #1 until 02/02/22. Direct care staff member #2 was hired on 12/16/2021 and no statement signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff member #2 was available at the onsite inspection on 02/08/2022.

R 400.15205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

Direct care staff member #1 was hired on 02/05/2020 and was not tested for communicable tuberculosis until 02/02/22. Direct

care staff member #2 was hired on 12/16/2021 was not tested for communicable tuberculosis as of the onsite inspection on 02/08/2022.

R 400.15208

Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(d) Verification of the age requirement.

At the time of the onsite inspection, the employee records for direct care staff members #2 and #3 did not contain verification of the age requirement.

R 400.15312

Resident medications.

(2) Medication shall be given, taken, or applied pursuant to label instructions.

Upon reviewing medication administration records for Residents C and E I noted multiple medication errors documented as "missed" medication.

R 400.15316

Resident records.

(1)(a) Identifying information, including, at a minimum, all of the following:

(viii) Funeral provisions and preferences.

At the time of the onsite inspection, Resident A, Resident D, and Resident E did not have funeral provisions and preferences documented in the residents' records.

R 400.15403

Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

At the time of the onsite inspection, the carpeting near the room transitions was frayed in the activity room and will need to be repaired or replaced.

R 400.15407

Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

At the time of the onsite inspection the door knob for the main shower room was not non-locking-against-egress and will need to be replaced.

R 400.15410

Bedroom furnishings.

(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a water bed is not prohibited by this rule.

At the time of the onsite inspection, I noted that Residents B and F did not have beds in their bedrooms because both residents prefer to sleep elsewhere. Beds need to be put in the bedrooms or variance requests with the proper documentation need to be submitted.

IV. RECOMMENDATION

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



02/09/2022

Leslie Herrguth
Licensing Consultant

Date