



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 28, 2022

Judith Maki
423 Mccallum Road
Montgomery, MI 49255

RE: License #: AL300077696
The Haven
423 Mccallum Road
Montgomery, MI 49255

Dear Ms. Maki:

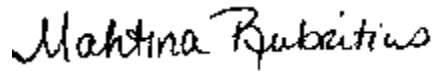
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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 (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "Mahtina Rubritius". The script is cursive and fluid.

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd., Ste. #9-100
Detroit, MI 48202
(517) 262-8604

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

I. IDENTIFYING INFORMATION

License #:	AL300077696
Licensee Name:	Judith Maki
Licensee Address:	423 Mccallum Road Montgomery, MI 49255
Licensee Telephone #:	(269) 381-2175
Licensee/Licensee Designee:	N/A
Administrator:	Judith Maki
Name of Facility:	The Haven
Facility Address:	423 Mccallum Road Montgomery, MI 49255
Facility Telephone #:	(517) 296-4455
Original Issuance Date:	09/17/1998
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/18/2022

Date of Bureau of Fire Services Inspection if applicable: 09/22/2021

Date of Health Authority Inspection if applicable: 02/22/2022

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 9

No. of others interviewed 0 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:
R 400.15301 (9), R 400. 15315 (3), R 400. 15318 (5) and R 400. 15401 (1) 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 400.15203

Licensee and administrator training requirements.

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

- The licensee did not complete the 16-hours of annual training, as required, in 2021.

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.

- Employee #1 reported that he had recently been tested for communicable tuberculosis; however, there was no record available for review, to demonstrate compliance.

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.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be

maintained by the home and shall be available for department review.

- The annual health review was outdated for Employee #1. Employee #1 updated this information during the on-site inspection.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

- The *AFC Assessment Plan* for Resident A had not been reviewed annually, as required. The assessment plan was last reviewed in 2020.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

- The *Resident Care Agreement* for Resident A was outdated; it had not been reviewed annually, as required.
- **THIS IS A REPEAT VIOLATION** (Please see Renewal Licensing Study Report dated August 7, 2020).

R 400.15315

Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

- The *Resident Funds Part II* form was not fully completed for Resident A.

R 400.15318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

- The licensee documented that emergency and evacuation drills were conducted during each of the shifts; however, the actual times and duration of the drills were not documented.

R 400.15401 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.

- The hot water temperature was 126 degrees Fahrenheit at the kitchen faucet.

R 400.15402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

- The refrigerator and freezer were not equipped with thermometers.

R 400.15403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

- There were cobwebs observed in resident bedrooms.
- Several resident bedrooms also required dusting.
- The ceiling in Resident B's bedroom required repair.

R 400.15403 Maintenance of premises.

(12) Sidewalks, fire escape routes, and entrances shall be kept reasonably free of hazards, such as ice, snow, and debris.

- There was a large bag observed on the steps of the fire escape route.

R 400.15403 Maintenance of premises.

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

- The second fire exit stairwell required repair, as the ceiling was missing tiles, the ceiling was sagging, and there was evidence of damage. The general conditions of the stairwell were not in good repair.

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.

- The paint was peeling in the hallways on the second floor.

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.

- The first-floor bathroom door was equipped with locking against egress hardware.

IV. RECOMMENDATION

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

Mahina Rubaitius

03/28/2022

Licensing Consultant

Date