

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 9, 2022

Melissa Doss CMHB Of CEI Counties Suite 115 812 E Jolly Road Lansing, MI 48910

RE: License #: AL330015396

M.A.C. House 634 M.A.C.

East Lansing, MI 48823

Dear Ms. Doss:

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 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,

Leslie Herrguth, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street

P.O. Box 30664 Lansing, MI 48909 (517) 256-2181

Leslie Hengich

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

I. IDENTIFYING INFORMATION

License #: AL330015396

Licensee Name: CMHB Of CEI Counties

Licensee Address: Suite 115

812 E Jolly Road Lansing, MI 48910

Licensee Telephone #: (517) 346-8200

Licensee Designee: Melissa Doss

Administrator: Melissa Doss

Name of Facility: M.A.C. House

Facility Address: 634 M.A.C.

East Lansing, MI 48823

Facility Telephone #: (517) 337-9340

Original Issuance Date: 05/23/1994

Capacity: 16

Program Type: MENTALLY ILL

AGED

Certified Programs: MENTALLY ILL

II. METHODS OF INSPECTION

Dat	e of On-site Inspection(03/08/2022	
Date of Bureau of Fire Services Inspection if applicable:		06/17/2021	
Date of Environmental/Health Inspection if applicable:			Not applicable
Inspection Type:		☐ Interview and Observation☐ Combination	⊠ Worksheet □ Full Fire Safety
No. of staff interviewed and/or observed 2 No. of residents interviewed and/or observed 10 No. of others interviewed 2 Role: administrator/home mgr.			10
•	Medication pass / simu	ılated 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 \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \square No \boxtimes If no, explain. Worksheet inspection; not required. Fire drills reviewed? Yes \boxtimes No \square If no, explain.		
•	Fire safety equipment and practices observed? Yes \boxtimes No \square If no, explain.		
•	E-scores reviewed? (Special Certification Only) Yes No N/A In If no, explain. Water temperatures checked? Yes No If no, explain.		
•	Incident report follow-up? Yes ⊠ No □ If no, explain.		
•	03/05/20 for rules 208(. ,	CAP date/s and rule/s: N/A ⊠
•		lease explain) No	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.15312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

During the onsite inspection I learned that residents who need to take medication while away from home take the medication with them in small envelopes provided by facility staff members rather than leaving the medication in the original pharmacy – supplied container.

R 400.15312 Resident medications.

(3) Unless a resident's physician specifically states otherwise in writing, the giving, taking, or applying of prescription medications shall be supervised by the licensee, administrator, or direct care staff.

During the onsite inspection I learned that residents who need to take their medication while away from home take the medications with them and self – administer the medication rather than being supervised by the licensee, administrator, or direct care staff.

R 400.15316 Resident records.

- (1)(a) Identifying information, including, at a minimum, all of the following:
 - (viii) Funeral provisions and preferences.

Five of five resident records reviewed at the onsite inspection did not contain the residents' funeral provisions and preferences.

IV. RECOMMENDATION

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

03/09/2022

Leslie Herrguth

Date

Licensing Consultant

Leslie Hengrith