

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 3, 2022

Paul Barber Directors Hall 600 Golden Drive Kalamazoo, MI 49001

> RE: License #: AH390236775 Directors Hall 600 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 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 and an approved BFS safety rating, a regular license will be issued. The current BFS is C and dated 10/26/2021. 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 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 #:	AH390236775
Licensee Name:	Heritage Community of Kalamazoo
Licensee Address:	2400 Portage St.
	Kalamazoo, MI 49001
Liconoco Tolonhono #:	(269) 343-5345
Licensee Telephone #:	(209) 343-3343
Authorized Representative:	Paul Barber
Administrator/Licensee Designee:	Amy Beach
Name of Facility:	Directors Hall
	COO Calden Drive
Facility Address:	600 Golden Drive
	Kalamazoo, MI 49001
Facility Telephone #:	(269) 349-8694
Original Issuance Date:	03/01/1974
Capacity:	93
Due energy True en	
Program Type:	ALZHEIMERS
	AGED

### **II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 08/01/2022

Date of Bureau of Fire Services Inspection if applicable: BFS - C 10/26/2021

Inspection Type:	Interview and Observation Combination	⊠Worksheet
Date of Exit Conference:	08/01/2022	
No. of staff interviewed ar No. of residents interview No. of others interviewed	ed and/or observed	13 32
Medication pass / sin	nulated pass observed? Yes $igtyree$	No 🗌 If no, explain.
<ul> <li>Medication(s) and me explain.</li> </ul>	edication records(s) reviewed?	Yes 🖂 No 🗌 If no,
•	ssociated documents reviewed	for at least one resident?

- Yes  $\Box$  No  $\boxtimes$  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: 2022A1028007 12/16/2021.
- 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 325.1932	Resident medications.
	<ul> <li>(3) If a home or the home's administrator or direct care staff member supervises the taking of medication by a resident, then the home shall comply with all of the following provisions:</li> <li>(a) Be trained in the proper handling and administration of medication.</li> </ul>
ANALYSIS:	Employee A crushed Resident A's medication but Resident A does not have a physician's order for crushed medications.
CONCLUSION:	VIOLATION ESTABLISHED.

R 325.1932	Resident medications.
	(5) A home shall take reasonable precautions to ensure or assure that prescription medication is not used by a person other than the resident for whom the medication is prescribed.
ANALYSIS:	A med cart was found to be unlocked in the med room on floor three. The door to the med room was open and unlocked with medication easily accessible to anyone in the facility. No facility staff were present in or near the med room.
CONCLUSION:	VIOLATION ESTABLISHED.

R 325.1968	Toilet and bathing facilities.	
	(4) A resident toilet room or bathroom shall not be used for storage or housekeeping functions.	
ANALYSIS:	Spa bathrooms on floor two and floor three contained therapy equipment and housekeeping carts.	
CONCLUSION	VIOLATION ESTABLISHED	

R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	Inspection of the kitchen revealed pasta and flax seeds in the dry storage area unlabeled. Ice cream, bags of chicken, garlic, gallons of milk, and condiments were unlabeled in the refrigerator and freezer. It could not be determined if the unlabeled food was safe for human consumption.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.	
	(3) Hazardous and toxic materials shall be stored in a safe manner.	
ANALYSIS:	Spa bathrooms on floor two and floor three contained industrial cleaning materials easily accessible to anyone. This presents 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 and an approved BFS safety rating, renewal of the license is recommended

Julie humano

8/3/2022

Date

Licensing Consultant