

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

February 23, 2023

Autumn Taylor Pleasant Pines LLC 55871 Frank Jones Road Mendon, MI 49072

RE: License #: AS750395484

Pleasant Pines

55871 Frank Jones Road Mendon, MI 49072

Dear Ms. Taylor:

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,

Nile Khabeiry, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503

We Khaberry, LMSW

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

I. IDENTIFYING INFORMATION

License #: AS750395484

Licensee Name: Pleasant Pines LLC

Licensee Address: 55871 Frank Jones Road

Mendon, MI 49072

Licensee Telephone #: (269) 496-9667

Licensee/Licensee Designee: Autumn Taylor

Administrator: Autumn Taylor

Name of Facility: Pleasant Pines

Facility Address: 55871 Frank Jones Road

Mendon, MI 49072

Facility Telephone #: (269) 496-9667

Original Issuance Date: 10/09/2018

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 2/23/23			
Date of Bureau of Fire Services Inspection if applicable: N/A			
Date of Health Authority Inspection if applicable: N/A			
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed O Role:			
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. Inspection did not occur during meal time 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: 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 400.14208 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:

(e) Verification of experience, education, and training.

FINDINGS: Employee 2 and Employee 3's file did not have verification of training.

R 400.14208 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:

(f)Verification of reference checks.

FINDINGS: Employee 2 and Employee 3's file did not have verification of reference checks.

R 400.14209 Home records; generally.

(1) A licensee shall keep, maintain, and make available for department review, all the following home records:

(e) A resident register.

FINDINGS: The home did not have a resident register.

R 400.14315 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.

FINDINGS: No Resident Funds Part I in Resident B's file.

R 400.14402 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.

FINDINGS: No thermometer in the freezer.

R 400.14403 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.

FINDINGS: Kitchen floor in need of repair, tiles in bedroom # 3 missing, no light switch cover in bedroom # 3.

R 400.2245 Fire extinguishers.

A minimum of one 5-pound multi-purpose fire extinguisher or equivalent shall be provided for use in a family home on each occupied floor and in the basement.

FINDINGS: Fire extinguisher in basement needs to be replaced.

IV. RECOMMENDATION

Contingent upon receipt of an	acceptable corrective	e action plan, re	enewal of the license
is recommended.			

Whole Khoberry, LMSW 2/23/23

Date

Licensing Consultant