



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 15, 2023

Tawnya Ebels
Prevailing Grace, LLC
292 E Falmouth Rd
Falmouth, MI 49632

RE: License #: AM570388583
Investigation #: 2023A0870028
Quiet Creek AFC

Dear Ms. Ebels:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (231) 922-5309.

Sincerely,

A handwritten signature in dark ink, appearing to read "Bruce A. Messer". The signature is fluid and cursive, with the first name "Bruce" being the most prominent.

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AM570388583
Investigation #:	2023A0870028
Complaint Receipt Date:	05/08/2023
Investigation Initiation Date:	05/08/2023
Report Due Date:	07/07/2023
Licensee Name:	Prevailing Grace, LLC
Licensee Address:	292 E Falmouth Rd Falmouth, MI 49632
Licensee Telephone #:	(231) 826-0020
Administrator:	Tawnya Ebels
Licensee Designee:	Tawnya Ebels
Name of Facility:	Quiet Creek AFC
Facility Address:	292 E Falmouth Rd Falmouth, MI 49632
Facility Telephone #:	(231) 826-0020
Original Issuance Date:	01/02/2018
License Status:	REGULAR
Effective Date:	07/02/2022
Expiration Date:	07/01/2024
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED AGED

II. ALLEGATION(S)

	Violation Established?
Resident A was given medication, which was prescribed to Resident B, because Resident A had run out of the medication prescribed for him.	Yes
Staff allowed Resident A's guardian to dispense prescription medication to Resident A.	Yes

III. METHODOLOGY

05/08/2023	Special Investigation Intake 2023A0870028
05/08/2023	APS Referral This referral came from the Michigan Department of Health and Human Services, Protective Services Centralized Intake unit, who declined to investigate the allegations.
05/08/2023	Special Investigation Initiated - Telephone Telephone interview with Jennifer Maue, Resident A's guardian.
05/09/2023	Inspection Completed On-site Interview with Licensee Designee Tawnya Ebel.
05/09/2023	Inspection Completed-BCAL Sub. Compliance
05/09/2023	Exit Conference Completed with Licensee Designee Tawnya Ebel.

ALLEGATION:

- **Resident A was given medication, which was prescribed to Resident B, because Resident A had run out of the medication prescribed for him.**
- **Staff allowed Resident A's guardian to dispense prescription medication to Resident A.**

INVESTIGATION: On May 8, 2023, I conducted a telephone interview with Jennifer Maue. Ms. Maue stated she is the court appointed public guardian for both Resident A and Resident B. She noted that on March 20, 2023, she went to the Quiet Creek AFC home to pick up Resident A for an appointment. Ms. Maue stated that upon

their return to the facility, Resident A needed a “treatment” of his albuterol medication. She stated she informed a staff member, who then went to obtain a vial of albuterol, handed it to Ms. Maue and Ms. Maue stated she give Resident A the albuterol treatment. Ms. Maue stated she does not know the name of the staff member with whom she spoke with and who provided her with the vial of albuterol.

Ms. Maue further noted that on “a Saturday in early April,” exact date unknown, she was at the facility when Resident A began coughing. She stated she asked a staff member if Resident A could have an albuterol treatment. Ms. Maue stated the staff member went to the medication cart and returned shortly afterwards, stating that she did not see any albuterol prescribed to Resident A in the medication cart. Ms. Maue noted that she then asked another staff member if she could use a vial of albuterol prescribed to Resident B. She noted that this staff member went and obtained a vial of albuterol, prescribed to Resident B, and give it to her. Ms. Maue stated she, Ms. Maue, then dispensed the prescription albuterol to Resident A. Ms. Maue noted that “this was not the first time that they ran out of albuterol for (Resident A).” Ms. Maue stated she does not know the names of the two staff members she spoke with on that date. It is also noted that Resident B resides in another licensed AFC home, Quiet Creek East AFC, which is joined to this facility via a hallway.

On May 9, 2023, I conducted a special investigation at the Quiet Creek AFC home. I met with Licensee Designee Tawnya Ebel and informed her of the above allegations. Ms. Ebel stated she had been made aware of both issues, as they had occurred over a month ago. She stated she has implemented new staff policies and procedures concerning refilling and dispensing resident medications and provided in service training for all her staff members of both Quiet Creek AFC and Quiet Creek East AFC. Ms. Ebel explained that she had spoken with her staff and confirmed that facility staff did allow Ms. Maue to dispense prescription medication, albuterol, to Resident A. She also confirmed that staff did use a vial of albuterol which was prescribed to Resident B. Ms. Ebel reiterated that the new policies and procedures, which address the issues noted in this investigation, should prevent a recurrence of these rule violations. She confirmed that Resident A’s physician has not provided any written authorization for Ms. Maue to dispense medications to Resident A.

APPLICABLE RULE	
R 400.14312	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.
ANALYSIS:	Resident A was provided with the prescription medication albuterol, which was prescribed for Resident B.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14312	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.
ANALYSIS:	The facility staff allowed Ms. Maue, on more than one occasion, to dispense prescription medication to Resident A without written authorization to do so from Resident A’s physician.
CONCLUSION:	VIOLATION ESTABLISHED

On May 9, 2023, I conducted an exit conference with Licensee Designee Tawnya Ebel. I explained my findings as noted above. Ms. Ebel stated she understood the findings, that she had no additional information to provide concerning this investigation, and she had no further questions pertaining to this investigation. She further stated she would submit a corrective action plan outlining the new policies that she has put into place and provide documentation of staff training on these new policies.

IV. RECOMMENDATION

I recommend, contingent upon the submission of an acceptable corrective action plan, the status of the license remain unchanged.



May 15, 2023

Bruce A. Messer
Licensing Consultant

Date

Approved By:



May 15, 2023

Jerry Hendrick
Area Manager

Date