

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

June 29, 2023

Paula Barnes Central State Community Services, Inc. Suite 201 2603 W Wackerly Rd Midland, MI 48640

RE: License #: AS500403212

Gruber Home

6545 Twenty-Four Mile Shelby Twp., MI 48047

Dear Paula Barnes:

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 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 (248) 975-5053.

Sincerely,

J. Reed

LaShonda Reed, Licensing Consultant

Bureau of Community and Health Systems Cadillac Place, Ste 9-100 Detroit, MI 48202 (586) 676-2877

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

I. IDENTIFYING INFORMATION

License #: AS500403212

Licensee Name: Central State Community Services, Inc.

Licensee Address: Suite 201

2603 W Wackerly Rd Midland, MI 48640

Licensee Telephone #: (989) 631-6691

Licensee/Licensee Designee: Paula Barnes

Administrator: Eva Hemphill

Name of Facility: Gruber Home

Facility Address: 6545 Twenty-Four Mile

Shelby Twp., MI 48047

Facility Telephone #: (586) 781-3494

Original Issuance Date: 01/20/2021

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	06/29/20)23	
Date	e of Bureau of Fire Services Inspection if appl	icable:	N/A	
Date	e of Environmental/Health Inspection if applica	able:	N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Administ	trator	2 2	
	I observed medications.			
•	Resident funds and associated documents reviewed for at least one resident? Yes No I f no, explain. Meal preparation / service observed? Yes No I f no, explain. I observed adequate food supply. Fire drills reviewed? Yes No I f no, explain.			
•	Fire safety equipment and practices observe	d? Yes [⊠ No lf 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. There were no incident reports that required follow-up. Corrective action plan compliance verified? Yes CAP date/s and rule/s: 12/17/2021;R 400.14402(6) 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 400.14204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

(b) First aid.

Direct care staff Zahria Green did not have evidence of the completion of First aid training.

R 400.14204 Direct care staff; qualifications and training.

- (3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all the following areas:
 - (c) Cardiopulmonary resuscitation.

Direct care staff Zahria Green did not have evidence of the completion of Cardiopulmonary resuscitation 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.

Direct care staff Lawanda Richardson did not have verification of two reference checks in the employee record.

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's

designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Resident A and Resident B did not have a *Health Care Appraisal* completed in 2021 and 2022.

R 400.14301

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.

Resident A and Resident B did not have an Assessment Plan completed in 2022.

R 400.14301

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.

Resident A and Resident B did not have a *Resident Care Agreement* completed in 2022.

R 400.14407 Bathrooms.

(1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.

I observed that bathroom number two did not have ventilation or a window.

IV. RECOMMENDATION

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

J. Reed	06/29/2023
LaShonda Reed	Date
Licensing Consultant	