

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

MARLON I. BROWN, DPA ACTING DIRECTOR

September 15, 2023

Timothy and Jessica Adams Braintree Management, Inc. 7280 Belding Rd. NE Rockford, MI 49341

> RE: License #: AL340338193 Harrison House AFC 532 Harrison Avenue Belding, MI 48809

Dear Timothy and Jessica Adams:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance by 10/1/2023.
 - Please submit fire drill records if they are found and verification of behavior intervention training scheduled for 9/21/2023.
 - o Send pictures of bedroom windows with screens.
 - Complete annual training for Licensee designee ongoing each year.
 - Send picture verifying Acetamin is in the medication cart for Resident C.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license and special certification is renewed. It is valid only at your present address and is nontransferable. 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,

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Jennifer Browning, Licensing Consultant Bureau of Community and Health Systems Browningj1@michigan.gov - (989) 444-9614

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

I. IDENTIFYING INFORMATION

License #:	AL340338193
Licensee Name:	Braintree Management, Inc.
Licensee Address:	7280 Belding Rd. NE Rockford, MI 49341
Licensee Telephone #:	(616) 874-1573
Licensee Designee:	Timothy Adams
Administrator:	Jessica Adams
Name of Facility:	Harrison House AFC
Facility Address:	532 Harrison Avenue Belding, MI 48809
Facility Telephone #:	(616) 244-3443
Original Issuance Date:	04/02/2013
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED
Certified Programs:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	09/13/2023	
Date of Bureau of Fire Services Inspection if ap	plicable: 4/3/2023	
Date of Health Authority Inspection if applicable	: Not applicable.	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:	4 19	
Medication pass / simulated pass observed	? Yes 🖂 No 🗌 If no, explain.	
Medication(s) and medication record(s) rev	iewed? 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. 		
● 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 I If no, explain. 		
● Incident report follow-up? Yes ⊠ No □ If no, explain.		
 Corrective action plan compliance verified? N/A Number of excluded employees followed-u 		
• 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 400.15203 Licensee and administrator training requirements.

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision(a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

Licensee designee Timothy Adams did not complete 16 hours of training for 2022.

R 400.15209 Home records; generally.

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

There were no fire drills found except for the months of August and September 2023.

R 400.15301 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 an initial medical clearance within the 90 day period before the resident's admission to the home. Resident A and Resident B did not have a Health Care Appraisal in their resident record.

R 400.15307 Resident behavior interventions generally.

(3) A licensee and direct care staff who are responsible for implementing the resident's written assessment plan shall be trained in the applicable behavior intervention techniques.

Direct care staff member B. Burns and J. Withey did not complete a behavior intervention training.

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.

Resident C's PRN Acetamin tab 500 mg was not present at the facility at the time of inspection.

R 400.15401 Environmental health.

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

There were several bedrooms which did not have screens placed in the windows.

A corrective action plan was requested and approved on 09/13/2023. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license and special certification.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license and special certification is recommended.

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Jennifer Browning Licensing Consultant

_____09/15/2023_____ Date