



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 31, 2023

Rebecca Lopez
Residential Opportunities, Inc.
1100 South Rose Street
Kalamazoo, MI 49001

RE: License #: AM390382556
E & F Douglas Group Living
1428 N. 30th Street
Galesburg, MI 49053

Dear Rebecca Lopez:

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 and specialized certification for the mentally ill and developmentally disabled, 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,

A handwritten signature in black ink that reads "Cathy Cushman". The script is cursive and fluid, with the first name "Cathy" and last name "Cushman" clearly legible.

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 615-5190

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

I. IDENTIFYING INFORMATION

License #:	AM390382556
Licensee Name:	Residential Opportunities, Inc.
Licensee Address:	1100 South Rose Street Kalamazoo, MI 49001
Licensee Telephone #:	(269) 343-3731
Licensee Designee:	Rebecca Lopez
Administrator:	Vicki Richardson
Name of Facility:	E & F Douglas Group Living
Facility Address:	1428 N. 30th Street Galesburg, MI 49053
Facility Telephone #:	(269) 343-9720
Original Issuance Date:	03/25/2019
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection: 08/25/2023

Date of Bureau of Fire Services Inspection if applicable: 02/09/2023 - temporary approval

Date of Health Authority Inspection if applicable: 05/10/2023

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 8

No. of others interviewed [redacted] Role: [redacted]

- 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.
- 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 400.14205 **Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

FINDING: Upon review of employee files, I determined the Administrator, Vicki Richardson, hadn't had a tuberculosis test since 10/02/2019, which is not every three years, as required.

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.

FINDING: I reviewed Resident A's, B's, C's, and D's resident files, all of which had assessment plans completed, but there was no demonstration all the required persons (e.g. the licensee, resident and/or resident's representative, and the responsible agency) participated in the development of the assessment plans.

Signatures of the licensee, resident and/or resident's representative and responsible agency, demonstrate all required persons have participated in the development of the written assessment plan. If the responsible agency refuses to sign the resident's written assessment plan, this should be noted on the assessment plan.

R 400.14401 **Environmental health.**

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water

temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

FINDING: Multiple water faucets were registering over 120 degrees Fahrenheit.

Water tested in the half bathroom, on the main level across from cleaning closet, was 125 degrees.

Water tested in resident bedroom #2 was 130 degrees.

Water tested in resident bedroom #4 was 140 degrees.

Water tested in resident bedroom #5 bathroom was 138 degrees.

Water tested in resident bedroom #7 was 137 degrees.

[REPEAT VIOLATION ESTABLISHED, RENEWAL DATED 09/08/2021, CAP DATED 09/17/2021]

R 400.14402 Food service.

(2) All food shall be protected from contamination while being stored, prepared, or served and during transportation to a facility.

FINDING: Food items in the facility's pantry were observed directly on the floor; however, these items were removed off the floor during the inspection.

Containers of food are to be stored off the floor, on clean racks, dollies, or other clean surfaces, in such a manner as to be protected from splash and other contamination.

[REPEAT VIOLATION ESTABLISHED, SIR #2021A0581047, DATED 09/22/2021, CAP DATED 09/29/2021]

R 400.14403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

FINDING: The facility's eavestroughs were completely covered in leaves and tree debris with sections overhanging the eavestroughs. The Administrator, Vicki Richardson, stated there were gutter guards on the eavestroughs; however, despite there being gutter guards, the eavestroughs should still be cleared of leaves and debris to prevent damage to the roof and to allow water to enter the eavestroughs.

[REPEAT VIOLATION ESTABLISHED, SIR #2021A0581047, DATED 09/22/2021, CAP DATED 09/29/2021]

R 400.14403 Maintenance of premises.

(10) Scatter or throw rugs on hard finished floors shall have a nonskid backing.

FINDING: There were rugs in resident bedroom #4 and #5 with non slip backing; however, both rugs were removed during the inspection.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, and final approval from the Bureau of Fire Services, renewal of the license and special certification is recommended.



08/31/2023

Cathy Cushman
Licensing Consultant

Date