

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

MARLON I. BROWN, DPA ACTING DIRECTOR

October 26, 2023

Daniel Phillips Covenant Enabling Res of MI Inc. 862 Forest Park Road Muskegon, MI 49441

RE: License #:	AS610089224
	Joseph's House
	866 Forest Park Road
	Muskegon, MI 49441-4631

Dear Mr. Phillips:

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, and verification that corrections have been made, 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. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

Elizabeth Elliott

Elizabeth Elliott, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 (616) 901-0585

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

I. IDENTIFYING INFORMATION

License #:	AS610089224
Licensee Name:	Covenant Enabling Res of MI Inc.
Licensee Address:	862 Forest Park Road
	Muskegon, MI 49441
Licence Telephone #	
Licensee Telephone #:	(616) 550-1643
Licensee/Licensee Designee:	Daniel Phillips, Designee
Administrator:	Daniel Phillips, Administrator
Name of Facility:	Joseph's House
Facility Address:	866 Forest Park Road
	Muskegon, MI 49441-4631
Facility Telephone #:	(231) 780-9084
Original Issuance Date:	05/09/2001
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	10/24/2023
Date of Bureau of Fire Services Inspection if app	licable: 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 0 Role: N/A	1 6
 Medication pass / simulated pass observed? At the time of the inspection, resident medication Medication(s) and medication record(s) revise 	ations were not being administered.
 Resident funds and associated documents r Yes No I If no, explain. Meal preparation / service observed? Yes [
• Fire drills reviewed? Yes 🛛 No 🗌 If no, e	xplain.
• Fire safety equipment and practices observe	ed? Yes 🛛 No 🗌 If no, explain.
 E-scores reviewed? (Special Certification Or If no, explain. Water temperatures checked? Yes X No [.,
● Incident report follow-up? Yes ⊠ No □ If	no, explain.
 Corrective action plan compliance verified? 205(6), 318(5), 401(2), 507(5) repeat violation inspection report. N/A 	ons from the 10/13/2021 renewal
Number of excluded employees followed-up	
• 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:

of a fire shall be assessed using methods described in append f of the 1985 life safety code of the national fire protection association. Appendix f of the 1985 life safety code of the national fire protection association is adopted by reference as part of these rules. A copy of the adopted appendix f is available from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost. A copy of appendix f may also be obtained from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for copy of appendix f. A price quote for copying of these pages	R 330.1803	Facility environment; fire safety.
may be obtained from the national fire protection association.		 association. Appendix f of the 1985 life safety code of the national fire protection association is adopted by reference as part of these rules. A copy of the adopted appendix f is available from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost. A copy of appendix f may also be obtained from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a

Finding: 2 residents that are no longer living in the facility, MF&GP are still included in the E scores and a new resident, JBG has not been added to the E score documentation.

Conclusion: Home manager, Ms. Stoltzfus Stoltzfus stated she will immediately update the homes E scores to include the new resident and remove the two residents who no longer reside in the facility.

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.
	(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

Finding: Staff BS does not have an annual review of health form included in her employee file.

*Repeat violation from 10/13/2021 renewal inspection.

Conclusion: I provided Ms. Stoltzfus with an annual review of health form, and she will have staff sign it next time staff works.

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.

Finding: Resident JBG does not have a HCA on file for department review.

Conclusion: There is a note on the HCA for JG that stated the HCA was provided to the doctor on 08/29/2023 however, the form is still not completed and, in the file, as of the date of this inspection, 10/24/2023.

R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(8) A copy of the signed resident care agreement shall be provided to the resident or the resident's designated representative. A copy of the resident care agreement shall be maintained in the resident's record.

Finding: Resident JBG's resident care agreement is signed only by Ms. Stoltzfus S. and there are no other signatures on the form.

Conclusion: Ms. Stoltzfus will get the RCA signed by the resident or the resident's designated representative.

R 400.14310	Resident health care.	
	(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.	
e e	Finding: Resident JBG was admitted to the facility on 08/31/2023 and there is no weight record included in his file.	
Conclusion: Ms. Stoltzfus stated a weight record will be added to JBG's file immediately.		
R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.	
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.	
Finding: Upon review of the fire drills conducted for 2023, three quarters (January, February, March, April, May, June, July, August, and September) are void of a sleeping hour drill.		
*Repeat violation from 10/13/2021 renewal inspection.		
Conclusion: Ms. Stoltzfus will incorporate a sleeping hour drill into each quarter fire drills.		
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: The water temperature tested at 129.4-degree Fahrenheit and 130.1degree Fahrenheit.

*Repeat violation from 10/13/2021 renewal inspection.

Conclusion: Ms. Stoltzfus will turn the water temperature down so it is within the temperature of 105 degrees Fahrenheit to 120 degrees Fahrenheit.

R 400.14403	Maintenance of premises.
	(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

Finding: In resident SC and RV's shared bathroom, there is no grab bar in the shower/bathing area.

Conclusion: Ms. Stoltzfus stated she will have a grab bar added to the shower area in SC/RV's shared bathroom.

R 400.14507	Means of egress generally.
	(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

Finding: The door leading out of the facility and into the front foyer area is not equipped with non-locking against egress hardware.

The main front door of the facility leading to the outside is not equipped with non-locking against egress hardware but instead has a deadbolt that does not unlock when the knob is twisted.

Both doors are part of a required means of egress.

*Repeat violation from the 10/13/2023 renewal inspection.

Conclusion: Ms. Stoltzfus stated she will have maintenance change the doors to non-locking against egress hardware. I informed Ms. Stoltzfus this was cited in the previous renewal inspection.

IV. RECOMMENDATION

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

Elizabeth Elliott

10/26/2023

Elizabeth Elliott Licensing Consultant Date