



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

December 4, 2023

Kathleen Hockey
Moore Apt Non-Profit Housing Corp.
5900 Executive Drive
Lansing, MI 48911

RE: License #: AS620301609
The Masters Home
240 N. Webster
White Cloud, MI 49349

Dear Ms. Hockey:

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 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 (616) 356-0183.

Sincerely,



Rebecca Piccard, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 446-5764

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

I. IDENTIFYING INFORMATION

License #: AS620301609

Licensee Name: Moore Apt Non-Profit Housing Corp.

Licensee Address: 5900 Executive Drive
Lansing, MI 48911

Licensee Telephone #: (517) 393-2103

Licensee/Licensee Designee: Kathleen Hockey

Administrator: Nikki Plotts

Name of Facility: The Masters Home

Facility Address: 240 N. Webster
White Cloud, MI 49349

Facility Telephone #: (231) 689-0022

Original Issuance Date: 06/08/2009

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/01/2023

Date of Bureau of Fire Services Inspection if applicable: 12/01/23

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 3

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 400.14312 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 S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

FINDINGS : During an inspection conducted 12/1/2023 I reviewed the resident medications with the Medication Administration Record (MAR). During this time I found that staff had placed resident medications in non-pharmacy issued medication bottles in attempt, according to Administrator Nikki Plotts, to make counting easier. This was done for every resident. The medications were from house bottles which did not require counting and also done for prescribed medication which were inappropriately bought in bulk and not specifically kept for the prescribed resident.

(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

FINDINGS: During a renewal inspection on December 1, 2023, I found numerous medication that were in the designated resident medication baskets that were no longer being used or the medication was listed on the MAR but not found in the basket. It was clear that inventory was not being done with medications on any type of regular schedule or routine.

IV. RECOMMENDATION

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

 December 4, 2023

Rebecca Piccard
Licensing Consultant

Date