



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 22, 2024

Rockney Wing, Jr. & Anna Wing
2670 S. Michigan Road
Eaton Rapids, MI 48827

RE: License #: AL330356409
East Oak Residents Home
231 E. Oak Street
Mason, MI 48854

Dear Rockney Wing, Jr. & Anna Wing:

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.

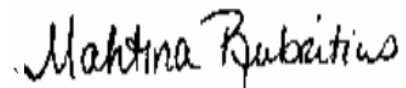
To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance (Physical plant photos for R. 400,15403 (1)) & Copies of the Resident Care Agreements and AFC Assessment Plans for Resident A and Resident B, by April 22, 2024.
- You are to submit a Statement of Correction for R 400.15318 (5) by April 22, 2024.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license 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,

A handwritten signature in black ink that reads "Mahtina Rubritius". The signature is written in a cursive, flowing style.

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa
P.O. Box 30664
Lansing, MI 48909
(517) 262-8604

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

I. IDENTIFYING INFORMATION

License #: AL330356409

Licensee Name: Rockney Wing, Jr. & Anna Wing

Licensee Address: 2670 S. Michigan Road
Eaton Rapids, MI 48827

Licensee Telephone #: (517) 663-4435

Licensee/Licensee Designee: N/A

Administrator: Anna Wing

Name of Facility: East Oak Residents Home

Facility Address: 231 E. Oak Street
Mason, MI 48854

Facility Telephone #: (517) 676-2788

Original Issuance Date: 09/25/2015

Capacity: 17

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/22/2024

Date of Bureau of Fire Services Inspection if applicable: 02/20/2024

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3
No. of residents interviewed and/or observed 17
No. of others interviewed 0 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.
Incident Reports are no longer required to be submitted to LARA.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
R 400. 15203 (1), R 400. 15205 (6), and R 400.15301 (4)(9) 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 400.15205 **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.

There was no documentation that an annual health review had been completed for Employee #1. The last review was completed on 5/29/2020. During the on-site Renewal Inspection, Employee #1 updated and completed the annual health review form.

This is a **REPEAT VIOLATION**: Please see Renewal LSR dated: 03/16/2022

R 400.15301 **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.

The written assessment plan for Resident A was outdated, as it was last reviewed on 09/02/2022.

The written assessment plan for Resident B was outdated, as it was last reviewed on 03/16/2022.

This is a **REPEAT VIOLATION**: Please see Renewal LSR dated: 03/16/2022

R 400.15301 **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.

The resident care agreement for Resident A was outdated, as it was last reviewed on 09/02/2022.

The resident care agreement for Resident B was outdated, as it was last reviewed on 03/16/2022.

This is a **REPEAT VIOLATION**: Please see Renewal LSR dated: 03/16/2022

R 400.15318 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.

While the licensee conducted five fire drills during the 4th quarter of 2023, there were no fire drills conducted during the sleeping hours.

R 400.15403 Maintenance of premises.

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

- The bathroom sink on the second floor had a leak, causing damage to the bathroom flooring and living room ceiling below. The bathroom smelled of urine. The bathroom wall, floor, and the ceiling in the living room, required repairs.
- The flooring in the foyer was uneven and required repair or replacement.

A corrective action plan was requested and approved on 03/22/2024. 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.

IV. RECOMMENDATION

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



03/22/2024

Mahtina Rubritius
Licensing Consultant

Date