

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

April 17, 2024

Lance Livingston 14221 E M89 Augusta, MI 49012

RE: License #: AF390253659

Stoney Oaks 14221 E M89

Augusta, MI 49012

Dear Lance Livingston:

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 populations, 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,

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 #: AF390253659

Licensee Name: Lance Livingston

Licensee Address: 14221 E M89

Augusta, MI 49012

Licensee Telephone #: (269) 731-4025

Licensee Designee: N/A

Administrator: N/A

Name of Facility: Stoney Oaks

Facility Address: 14221 E M89

Augusta, MI 49012

Facility Telephone #: (269) 731-5819

Original Issuance Date: 03/04/2003

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date	e of On-site Inspection: 04/16/2024		
Date	e of Bureau of Fire Services Inspection if applicable:	N/A	
Date	e of Health Authority Inspection if applicable: 12/18/20	023	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:	1 4	
•	Medication pass / simulated pass observed? Yes \boxtimes	No ☐ If no, explain.	
•	Medication(s) and medication record(s) reviewed? Ye	es 🗵 No 🗌 If no, explain	
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \square No \boxtimes If no, explain. The inspection did not take place during a meal service; however, an abudance of food was observed in the facility. Fire drills reviewed? Yes \boxtimes No \square If no, explain.		
•	Fire safety equipment and practices observed? Yes [⊠ No If no, explain.	
•	E-scores reviewed? (Special Certification Only) Yes If no, explain. Water temperatures checked? Yes No If no, explain.		
•	Incident report follow-up? Yes ⊠ No ☐ If no, expla	in.	
•	Corrective action plan compliance verified? Yes ☐ 0 N/A ☒ Number of excluded employees followed-up?	CAP date/s and rule/s: 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 330.1803 Facility environment; fire safety.

(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3-month period.

FINDING: Fire drills were not being conducted at least once during the daytime, evening, and sleeping hours during every three-month period, as required. Upon review of fire drills, I determined the following:

- All three fire drills during the 1st guarter of 2023 were during sleeping hours.
- Two fire drills were during sleeping hours and one fire drill was during the evening hour for the 2nd quarter of 2023.
- Two fire drills were during sleeping hours and one fire drill was during the evening hour for the 3rd quarter of 2023.
- Two fire drills were during the sleeping hours and one fire drill during the evening hour for the 4th quarter of 2023.
- Two fire drills were during the sleeping hours and one fire drill was during the daytime hour for the first quarter of 2024.

R 400.1426 Maintenance of premises.

(1) The premises shall be maintained in a clean and safe condition.

FINDING: The baseboard heat vent in the 2nd story bathroom was rusty.

The ceiling above the toilet in the basement bathroom was missing drywall due to repairs several months ago. Consequently, the bathroom ceiling needs repair.

R 400.1431 Bedrooms generally.

(3) Interior doorways of bedrooms occupied by residents shall be equipped with a side-hinged, permanently mounted door equipped with positive-latching, non-locking-against-egress hardware.

FINDING: The resident bedroom is the basement had locking against egress hardware on the door leading to the facility's staircase. The licensee stated the door hardware had been recently changed because staff from the Home and Community Based Services program (HCBS) informed him the door needed to have a lock.

While the door may have a lock, interior doorways of bedrooms must still be able to be opened in one movement.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license and specialized certification for the developmentally disabled and mentally ill populations, are recommended.

County Cuchman		
0	04/17/2024	
Cathy Cushman Licensing Consultant		Date