



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 23, 2024

White Oaks, A Randall Residence
300 White Oak Road
Lawton, MI 49065

RE: License #: AL800315839
White Oaks Assisted Living - II
300 White Oak Road
Lawton, MI 49065

Dear Licensee Designee:

Attached is the Special Investigation Report for the above referenced facility. Due to the severity of the violations, disciplinary action against your license is recommended. You will be notified in writing of the department's action and your options for resolution of this matter.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in blue ink that reads "KDuda".

Kristy Duda, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #: AL800315839

Licensee Name: White Oaks, A Randall Residence

Licensee Address: 300 White Oak Road
Lawton, MI 49065

Licensee Telephone #: (269) 624-4811

Licensee Designee/Administrator: Kathleen Sparrow-Dinzik

Name of Facility: White Oaks Assisted Living - II

Facility Address: 300 White Oak Road
Lawton, MI 49065

Facility Telephone #: (269) 624-4811

Original Issuance Date: 04/01/2013

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/28/2024

Date of Bureau of Fire Services Inspection if applicable: 07/24/2023 – A Rating

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 5

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: Licensee Designee

- 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.
The water was measured to be 129 degrees.
- Incident report follow-up? Yes No If no, explain.
Incident reports reviewed to ensure the home is using the correct form as a result of SIR 2023A1031048.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: 9/18/23 - 301(4), 301(7), 301(9), 301(10), 311(3), 312(4b), 312(4f) 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:	
MCL 400.734b	Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions;
	(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.
The home reported they did not complete workforce background clearances for any of their employees under license AL800315839. All employees under this home were checked under AL800315841. Staff must be cleared and affiliated with the home that they are working at.	
R 400.15204	Direct care staff; qualifications and training.

	(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas: (e) Resident rights.
Three out of six employee files (Rodina Eckholm, Mary Shinaburger, and Valerie Mead) reviewed did not have verification that Resident Rights training was completed.	
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.
One out of six employee files (Rodina Eckholm) reviewed did not have an annual health form available for review.	
R 400.15310	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.
Resident B was missing weight records for December of 2023 and Resident C did not have any weight records documented prior to September 2023.	
R 400.15312	Resident medications.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
Resident D was prescribed PRN Hyoscyamin on 4/11/23, however, the home never had the medication available. Resident D had PRN Tylenol 500mg and PRN Tylenol 650mg listed on their medication administration record (MAR) but the medication was not in the medication cart. The last documented administration of Tylenol to Resident D was on 5/29/23. The above-mentioned medications were reported to be Hospice ordered.	

Resident E had PRN Haldol listed on their MAR, but the medication was not in the medication cart. The last documented dose was given on 3/10/24 and the home reported the medication was reordered on 3/18/24.

Resident F had PRN Guaifensin listed on their MAR, but the medication was not in the medication cart. While the medication was prescribed in October 2023, each month thereafter had no administrations recorded. The MAR also indicated the medication was suspended on 3/15/24 and that the medication was “on hand”.

REPEAT VIOLATION ESTABLISHED
Reference Special Investigation Report #2023A1031043 dated 8/11/23,
Corrective Action Plan dated 9/18/23.

R 400.15401	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.
The water temperature was measured to be 98 degrees in bedrooms #104, #106, #111, #115, and #117.	
R 400.15407	Bathrooms.
	(1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.
Rooms 101, 103, 108, and 116 did not have working ventilation fans or windows in the bathrooms.	

On 5/23/24, an exit conference was conducted with Ms. Sparrow-Dinzik and Scott Peters. They reported they did not agree with the recommendation of refusal to renew the license and will be appealing the decision.

IV. RECOMMENDATION

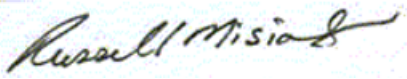
The home was issued a provisional license on 9/21/23. Due to the continued administrative rule violations, I recommend refusal to renew the license.



5/2/24

Date

Licensing Consultant



5/2/24

Date

Russell Misiak
Area Manager