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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

November 20, 2024

Dustin Burritt Grand Vista Living, LLC 295 Leonard Drive Coldwater, MI 49036

RE: License #: AL130363312

Grand Vista Of Marshall 208 Winston Drive Marshall, MI 49068

Dear Mr. Burritt:

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 verification of completion of the required corrections below.

Upon receiving documentation of completed corrections, I recommend issuance of a regular license to this AFC adult large group home. 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) 356-0100.

Sincerely,

Kevin L. Sellers
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Kevin Sellers, Licensing Consultant
Department of Licensing and Regulatory Affairs
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(517) 230-3704
SellersK1@michigan.gov

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

#### I. IDENTIFYING INFORMATION

**License #:** AL130363312

Licensee Name: Grand Vista Living, LLC

**Licensee Address:** 295 Leonard Drive

Coldwater, MI 49036

**Licensee Telephone #:** (517) 227-4055

Licensee Designee: Dustin Burritt

Administrator: Dustin Burritt

Name of Facility: Grand Vista Of Marshall

Facility Address: 208 Winston Drive

Marshall, MI 49068

**Facility Telephone #:** (517) 227-4055

Original Issuance Date: 06/15/2016

Capacity: 20

Program Type: AGED

# **II. METHODS OF INSPECTION**

Date	e of On-site Inspection(s):	11/19/2	024	
Date	e of Bureau of Fire Services Inspection if appl	icable:	07/24/2024	
Date	e of Health Authority Inspection if applicable:		N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Licensee	e	4 11	
•	Medication pass / simulated pass observed?	Yes 🗵	│ No	
•	Medication(s) and medication record(s) revie	wed? Y	′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 $\boxtimes$ No $\square$ If no, explain.			
•	Fire drills reviewed? Yes ⊠ No ☐ If no, ex	kplain.		
•	Fire safety equipment and practices observe	d? Yes	⊠ No □ If no, explain.	
•	E-scores reviewed? (Special Certification On If no, explain.  Water temperatures checked? Yes ⊠ No □	• /		
•	Incident report follow-up? Yes ⊠ No ☐ If i	no, expl	ain.	
•	Corrective action plan compliance verified? CAP on 11/19/24 205(3), 205(4), 316(1)(i) ar Number of excluded employees followed-up?	nd 31 <del>6</del> (1		
•	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.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

At the time of the onsite inspection, while reviewing employee files. Direct care workers (DCW) Kelly Winfrey and Jordan Clemens files did not have an updated annual (yearly) physical health review form. The last completed physical health review forms for DCWs Winfrey and Clemens was done in 2023.

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.

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

At the time of the onsite inspection, while reviewing employee files. Direct care workers (DCW) Kelly Winfrey and Jordan Clemens files did not have an updated (every three years) communicable tuberculosis (TB) test completed. The last completed TB testing for both DCWs were over three years ago.

### R 400.15316 Resident records.

- (1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:
- (i) Resident funds and valuables record and resident refund agreement.

At the time of the onsite inspection, while reviewing resident record files. Resident Funds Part II form for Resident A was not completed since the residents admissions on 9/3/24.

R 400.15316 Resident records.

(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:

(g) Weight record.

At the time of the onsite inspection, while reviewing resident files. Resident Weight Record form for A has not been completed since the residents admissions on 9/3/24. Residents are required to be weighed monthly and documented on their Resident Weight Record located in each resident record file.

#### IV. RECOMMENDATION

An acceptable written corrective action plan was requested and approved on 11/19/24. Verification of completion of the corrective action plan must still occur by submitting documents of the above violations. However, I recommend renewal of a regular licensee to this AFC adult large group home (capacity 20).

Kevin L. Sellers	11/20/24
Licensing Consultant	 Date