

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

December 26, 2024

Jeana Koerber Residential Opportunities, Inc. 1100 South Rose Street Kalamazoo, MI 49001

> RE: License #: AS390307863 Fair Oaks 3312 Fair Oaks Drive Kalamazoo, MI 49008

Dear Jeana Koerber:

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 (517) 284-9730.

Sincerely,

Corting Cuohman

Cathy Cushman, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (269) 615-5190

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

I. IDENTIFYING INFORMATION

License #:	AS390307863
Licensee Name:	Residential Opportunities, Inc.
Licensee Address:	1100 South Rose Street Kalamazoo, MI 49001
Licensee Telephone #:	(269) 343-3731
Licensee Designee:	Jeana Koerber
Administrator:	JoAnna Hudson
Name of Facility:	Fair Oaks
Facility Address:	3312 Fair Oaks Drive Kalamazoo, MI 49008
Facility Telephone #:	(269) 382-6230
Original Issuance Date:	07/12/2010
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection: 12/26/2024

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed3No. of residents interviewed and/or observed6No. of others interviewedRole:

- Medication pass / simulated pass observed? Yes \boxtimes No \square 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 X If no, explain.
 Inspection did not take place during a meal time; however, an abundance of food was observed in the facility.
- Fire drills reviewed? Yes ⊠ No □ If no, explain.
- Fire safety equipment and practices observed? Yes \boxtimes No \square If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A
 If no, explain.
- Water temperatures checked? Yes \boxtimes No \square 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 400.14401 Environmental health.

(3) All sewage shall be disposed of in a public sewer system or, in the absence thereof, in a manner that is approved by the health authority.

FINDING: Wastewater from the laundry machine was observed coming up from the basement drain near the laundry machines as evidenced by bubbles from the laundry soap.

Wastewater from the laundry machine is considered sewage and therefore, must be discharged into the home's sanitary sewer system. Any evidence of sewage on the ground surface is positive indication that sewage is being disposed of improperly.

R 400.14403 Maintenance of premises.

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

FINDING: Multiple doors and door trim were observed in disrepair from being hit by resident wheelchairs, per the Administrator. The doors and trim had sections of finish missing exposing the wooden material making the doors more susceptible to damage.

Resident closet bi-fold doors were also rusted and in disrepair, particularly on the west side of the facility.

A light switch by the facility's upstairs fire door and near the kitchen was cracked and in need of replacement.

REPEAT VIOLATION SEE 2023 Renewal LSR, dated 12/19/2022, CAP dated 12/28/2022

R 400.14403 Maintenance of premises.

(3) All living, sleeping, hallway, storage, bathroom, and kitchen areas shall be well lighted and ventilated.

FINDING: The facility's medication room was dimly lit.

R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

FINDING: Multiple walls throughout the facility were damaged due to being hit by wheelchairs; particularly near the kitchen.

The west side bathroom had a section of baseboard missing near the stand up shower.

R 400.14510 Heating equipment generally.

(2) A furnace, water heater, heating appliances, pipes, wood-burning stoves and furnaces, and other flame- or heat-producing equipment shall be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and shall be maintained in a safe condition.

FINDING: The baseboard heat vent in the east side bathroom was not attached and in need of repair.

R 400.14511 Flame-producing equipment; enclosures.

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire-resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware. **FINDING:** The facility's basement furnace room has two fire doors; however, during my inspection, both fire doors were observed propped open. The fire door closest to the stairs was not self closing.

REPEAT VIOLATION SEE 2023 Renewal LSR, dated 12/19/2022, CAP dated 12/28/2022 SEE 2021 Renewal LSR, dated 12/21/2020, CAP dated 12/30/2020

R 400.14512 Electrical service.

(1) The electrical service of a home shall be maintained in a safe condition.

FINDING: An extension cord was observed in Resident A's bedroom. This bedroom is on the west side of the facility, to the right of the bathroom.

A piece of duct tape was placed over the light switch outside of Resident A's bedroom.

IV. RECOMMENDATION

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

Carmy Cuohman

12/26/2024

Cathy Cushman Licensing Consultant Date