

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

May 11, 2025

Theo Omo Thurston Woods Village Inc. 307 N. Franks Ave. Sturgis, MI 49091

RE: License #: AL120418793

The Meadows 300 Vista Dr.

Coldwater, MI 49036

Dear Ms. Omo:

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) 335-5985.

Sincerely, Whole Khoberry, LMSW

Nile Khabeiry, 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 #: AL120418793

Licensee Name: Thurston Woods Village Inc.

Licensee Address: 307 N. Franks Ave.

Sturgis, MI 49091

Licensee Telephone #: (269) 651-7841

Licensee/Licensee Designee: Theo Omo

Administrator: Tim Stoll

Name of Facility: The Meadows

Facility Address: 300 Vista Dr.

Coldwater, MI 49036

Facility Telephone #: (269) 651-7841

Original Issuance Date: 12/16/2024

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED

AGED

ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 5/7/25
Date of Bureau of Fire Services Inspection if applicable: 10/18/24
Date of Health Authority Inspection if applicable: 10/16/24
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 1 Role: HR
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. Funds not held by facility 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. No incident reports filed
 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 400.15204 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:
 - (a) Reporting requirements.
 - (b) First aid.
 - (c) Cardiopulmonary resuscitation.
 - (d) Personal care, supervision and protection.
 - (e) Resident rights.
 - (f) Safety and fire protection.
 - (g) Prevention and containment of communicable diseases.

FINDINGS: Staff files did not contain training records.

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.

(2) A licensee shall have, on file with the department, 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 the licensee and administrator. The statement shall be signed within 6 months before the issuance of a temporary license and at any other time requested by the department.

FINDINGS: Staff files did contain proof of a physical.

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.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken

as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

FINDINGS: Staff files did not contain proof of TB tests.

R 400.15208

Direct care staff and employee records.

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
 - (d) Verification of the age requirement.
 - (e) Verification of experience, education, training.
 - (f) Verification of reference checks.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

FINDINGS: Resident files did not contain a current Health Care Appraisal.

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.

FINDINGS: Resident files reviewed were not completed upon admission and were not dated by the designated representative.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party.

FINDINGS: Resident files reviewed were not completed upon admission and were not signed by the designated representative.

R 400.15312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

FINDINGS: Prescription medication for two residents not in the facility, and one medication was being kept in resident bedroom.

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.

FINDINGS: The facility conducted one fire drill in 5 months.

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.

FINDINGS: Fire extinguishers were overdue to be checked or replaced.

IV. RECOMMENDATION

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

Who Khaberry, LMSW 5/11/25 Nile Khabeiry Date Licensing Consultant