State of Michigan
John Engler, Governor

Department Consumer & Industry Services
Kathleen M. Wilbur, Director

Bureau of Regulatory Services
Division of Child Welfare Licensing
965 W. Milham
Portage, MI 49024
(616) 324-6430

December 13, 1999

Mr. Sidney L. Weaver, Director
Park Place Residential Care Center
1027 Park Place
Kalamazoo, MI 49001

Park Place Residential Care Center
CA 39104

Dear Mr. Weaver:

This is to advise you that your facility's corrective action plan, dated December 6, 1999, regarding the recently completed Renewal Approval Report, is approved.

Thank you again for the cooperation extended by you and your staff during the Renewal evaluation. If you have questions and/or if I can be of assistance to you and your staff, please do not hesitate in calling me.

Sincerely,

Kenneth L. Phelps, ACSW
Child Welfare Licensing Consultant

cc: Ms. Julie Jenkins
File

Memo

Date: December 6, 1999

TO: Kenneth L. Phelps, ACSW
Child Welfare Licensing Consultant
CONSUMER INDUSTRY SERVICES

FROM: Sidney L. Weaver, Director
PARK PLACE RESIDENTIAL CARE CENTER

SUBJECT: Licensing Report - Park Place RCC - CA39104

The following is a response to your "VI FINDINGS" from the "Renewal Approval Study Report" dated 11/16/99, i.e., the Corrective Action to address the following non-compliances:

1. **A.1. - Rule 113**

   Additional references have been obtained as required - future employee appointments will not be made until all paperwork is completed.

2. **A.2. - Rule 114**

   Documentation for all Staff is completed. The Director will review all Staff files annually for TB documentation.

3. **A.3. - Rule 128**

   Untimely Staff shortages throughout the year created problems in getting training hours scheduled. For F.Y. 99/00, all Staff will receive appropriate training regardless of shortages and/or overtime considerations to get the hours completed.

4. **A.4. - Rule 336**

   The House Director will be responsible to see the ITP's are completed in a timely fashion.

5. A.5. - Rule 337

As discussed in our phone conversation on or about 11/22/99, the UTP had been completed at the time of the on-site visit.

6. Rule 407 - Facility and Premises Maintenance

A plan is underway to attend to some of the maintenance and remodeling needs of our facility, i.e., replacing wallpaper in the kitchen area, painting, floor replacement, replacing kitchen cupboards, etc. Some of these items are substantial in cost and in the next two months, we will be contacting Irene Henry in State Office to once again start the process of getting some bids for some of the major work. Non-skid surface additions have been made in the bath and shower area.

7. Rule 420 - Food Service Facilities, Equipment, and Procedures

Additional food storage containers have been purchased for the kitchen area and labeled appropriately. Basement storage of food is appropriate and in compliance.

8. Rule 506 - Fire Drills and Telephone

Relative to the Fire Safety Inspection and Rule 506, we will improve upon our "A" rating by having the House Manager schedule quarterly drills for each shift and have this properly recorded in our Fire Safety Log. This also includes periodic inspection of fire extinguishers, smoke alarms, batteries.

If you have any questions or need clarification in regard to any of these responses, please feel free to contact me at any time at (616) 337-3618.

SLW/dms

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Portage, MI 49024
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November 16, 1999

Mr. Sidney Weaver, Director
Park Place Residential Care Center
1027 Park Place
Kalamazoo, MI 49001

RE: Park Place RCC
CA 39104

Dear Mr. Weaver:

Attached is the Approval Study Report from the recent evaluation of your facility. The purpose of the evaluation was to determine compliance with the requirements of Act No. 116 of the Public Acts of 1973, as amended, and the Administrative Rules for Child Caring Institutions.

Please refer to the Approval Study Report for the cited rule noncompliances. You are required to submit a written corrective action plan to me. The plan needs to:

- Be submitted within 30 days of receipt of this letter.
- Specify how and when each noncompliance will be corrected.
- Specify who is directly responsible for implementing corrective action for each specified noncompliance.
- Indicate the organization's plan to assure continuing compliance with each specified noncompliance, once compliance is achieved.
- Be signed and dated.

Based on the commitment by the agency's administration to correct the cited noncompliances, a regular approval is being issued. The terms of the approval are:

Effective Dates: 11/16/99 through 11/15/01

Program	Setting	Sex	Capacity	Age Range From	Age Range Thru	Behavior Management
Treatment	Open	Female	11	12	17	NO

If there are any questions regarding the report or this correspondence, please contact me.

Sincerely,

Kenneth L. Phelps, ACSW
Child Welfare Licensing Consultant

cc: Ms. Julie Jenkins

RENEWAL APPROVAL STUDY REPORT

I. IDENTIFYING INFORMATION:

Name of Facility:	Park Place Residential Care Center
Address of Facility	1027 Park Place Kalamazoo, MI 49001
Provider Number:	CA 39104
Name of Administrator:	Sidney Weaver
Status:	Regular
Parent Organization:	Michigan Family Independence Agency
Date of On-Site Visit:	October 19,20 & 21, 1999

II. DESCRIPTION OF PROGRAM:

Park Place Residential Care Center provides an open residential treatment program for up to 11 teenage girls. Program consists of education in local public schools and private tutoring, work experience and counseling focused on adolescent adjustment problems, personal relationships with adults and peers, drug and alcohol issues and independent living skills. Referrals are primarily from the juvenile justice system and primarily from southeastern Michigan. The program has remained consistent over the past 12 months. There has been moderate staff turnover with two new replacement direct care staff hired in 1999.

III. METHODOLOGY:

The following records were reviewed:

3 of 9 residents files

2 of 2 new personnel files
1 of 4 personnel files

The following closed records were reviewed:

4 of 35 residents files

The following persons were interviewed:

8 of 9 residents
4 of 6 direct care workers
1 of 1 facility administrator

The following documents were reviewed:

Staff Training Logs
Policy manual for residents
Medication Log
Fire Drill Log
Menus

Tour of Facility

VI. FINDINGS:

A. Licensing Noncompliances - Corrective Action Required.

1. Rule 113 - Employee Records.

Employee records shall be maintained for each employee and shall include all of the following information:
(d) Three references which are obtained prior to employment from persons unrelated to the employee

In 1 of 2 new staff personnel records only one documented reference was obtained prior to employment.

Park Place Residential Center is found in noncompliance of Rule 113.

2. Rule 114 - Tuberculosis screening for employees and volunteers.

The licensee shall document that each employee and volunteer who has contact with residents 4 or more hours per week for more than 2 consecutive weeks is free from communicable tuberculosis. Freedom from communicable tuberculosis shall be verified within a 3-year period before employment and shall be verified every 3 years after the last verification

It was found that 2 of 2 new staff did not have documented verification that they were free from communicable tuberculosis. One staff member was employed in February, 1999 the second second employee was hired in September, 1999.

Park Place Residential Center is found in noncompliance of Rule 114.

3. Rule 128 - Initial staff orientation and ongoing staff training.

(3) The licensee shall document that each direct care worker participated in a minimum of 50 clock hours of planned training within the first year of employment and a minimum 25 hours clock hours of training thereafter

It was found that 4 of 4 direct care staff members with more than one year of experience have not obtained 25 clock hours of training during the past year.

Park Place Residential Center is found in noncompliance of Rule 128.

4. Rule 336 - Initial service plan

(1) An initial service plan shall be completed by the social service worker for each resident within 30 days of admission

In 1 of 3 resident files the initial service plan was 60 days late.

Park Place Residential Center is found in noncompliance of Rule 336.

5. Rule 337 - Updated service plan

(1) An updated service plan shall be completed and recorded by the social services worker for each resident at least once every three months following the initial service plan

In 1 of 2 resident files the updated service plan was due in the month of June and as of the date of the evaluation was not completed.

Park Place Residential Center is found in noncompliance of Rule 337.

Environmental Health Inspection:

The facility was inspected on 10/27/99. The following are the findings:

Rule 407 - Facility and premises maintenance

> **(5)Floors, interior walls, and ceilings shall be sound and in good repair and shall be maintained in clean condition.**

The cupboards in the kitchen are in need of replacing or refinishing. The cupboards are no longer easily cleanable. Walls in the dining area and in the kitchen are in need of cleaning and repainting. Wall paper kitchen must be replaced. Floor in kitchen is in need of replacing. Bathroom upstairs shower is in need of repainting due to the excessive mold on floor and ceiling of shower. Tiles in the same shower are in need of replacing where missing.

Floors in shower, bath areas must be equipped with "stickies" or a non-skid surface to prevent slip and fall accidents.

Park Place Residential Center is found in noncompliance of Rule 407.

Rule 420 - Food service facilities, equipment, and procedures.

> **Facilities, equipment, and procedures used in the preparation, storage, and service of food shall comply with the applicable provisions of sections 12901 to 12922 Act No. 368 of the Public Acts of 1978, as amended, being 333.12901 to 333.12922 of the Michigan Compiled Laws. The facilities, equipment, and procedures required shall depend on the amount of food service and the type of food service operation.**

Be sure to use the metal stem thermometer to take temperatures of potentially hazardous foods. Hot foods need to be held a 140 degrees F and above and cold foods must be held at 45 degrees F and below. Cooking temperatures vary depending on the produce. Keep all foods off the floor at least 6" to allow for cleaning and to prevent contamination. All foods must be labeled when not in original package. Label top and sides. Place foods such as sugar, flour, and rice in sealable, labeled containers.

Park Place Residential Center is found in noncompliance of Rule 420.

Park Place Residential Center received a "B" rating.

Fire Safety Inspection

The facility was inspected on October 5, 1999. The following are the findings.

Rule 506 - Fire drills and telephone.

> **(1) There shall be quarterly fire drills for each staff shift. Two drills shall include evacuation unless approved in writing as contraindicated. Drills shall be conducted at different times of day and night where there are 24 hour staff shifts. Records shall be maintained of drills giving date, time, where evacuation was part of the drill, the approximate evacuation time**

Park Place Residential Center is found in noncompliance of Rule 506.

Park Place was given an "A" Rating.

V. RECOMMENDATION:

Based on substantial compliance with the applicable rules and a commitment to correct the cited rule noncompliances, a regular approval is recommended.

Kenneth L. Phelps, ACSW
Child Welfare Consultant

11/16/99
Date