





**MICHIGAN VETERANS' FACILITY AUTHORITY**

**BOARD OF DIRECTORS MEETING**

September 24, 2024

10:00 a.m.

**PROPOSED MINUTES**

A meeting of the Michigan Veterans Facility Authority (MVFA) Board of Directors was called to order at 10:01 a.m. by Chair David Henry. The meeting was conducted at Michigan Veteran Homes at Chesterfield located at 47901 Sugarbush Rd., Chesterfield Twp., MI 48047.

**1. Pledge of Allegiance**

**2. Attendance Roll Call**

Chair Henry called for a roll call of members present.

The following MVFA Board of Directors were present: David Henry, Leon Bauer, David Rutledge, Brad Slagle, Shawn Turner, Barry Walter.

Michigan Veteran Homes (MVH) Executive Leadership Team: Anne Zerbe, Beth Simonton-Kramer, Ryan Engle, Melissa Velie, Jennifer Manning, Jason Geissler, Don McGehee.

Virtual Guests: Brian Love, Ken Robbins, Steve Rolston, Mike Hassan, Mark Wolf, Steffany Muirhead, Ron Oja, Carly MacDonald, et. al.

**3. Adoption of Agenda**

Turner motioned, seconded by Slagle, to accept the meeting agenda dated September 24, 2024. The motion was passed.

**4. Approval of Proposed Minutes**

Slagle motioned, seconded by Walter to adopt the minutes from the July 23, 2024, meeting. The motion was passed.

**5. Public Comment**

There was no public comment at this time.

**6. Executive Director's Report**

- 1) Zerbe reported that a meeting has been scheduled with the Marquette County Road Commission and the engineers next week regarding the relocation of Venture Drive. The Home is in the final stages of design. Feedback and lessons learned from the other two projects has proven to be helpful in this design. The Board discussed the VA priority list, the timeline for construction, and ways to incorporate public spaces into the new site.
- 2) Board Appointment Updates – Ryan Engle

- We still have one vacant seat on the board. Names have been provided to the Governor by the Speaker for consideration.
- 3) Update on MVHCT – Jennifer Manning, Administrator
    - Census is at 126 with capacity of 128. There is one more admission scheduled which leaves one room for movement if needed.
    - The VA Survey was in August, later than expected, with one area of concern. A POC was submitted and pending approval. All competencies, audits, and education documentation should be ready for submission for certification by the end of October.
    - The Annual Volunteer Appreciation dinner is being held this week.
    - The Chair asked if there are any challenges that have arisen now that the Home has been operating for two years. The Board recognized that the Chesterfield home has been operating three years now and has attentive staff and content members.
  - 4) Update on MVHDJJ – Ron Oja, Administrator
    - The census is currently at 104, with 10 admissions in process.
    - The VA Survey was later than expected, so the corrective action plan is still being developed. Most life safety issues have been completed, and the Sharing Agreement with VA Mental Health Services is still outstanding.
  - 5) Update on MVHGR – Carly MacDonald, Administrator
    - Preparation has begun for the CMS Survey which is expected any time now (slightly early this year). The census is 121 with one more admitting this week. There are 4 more admissions scheduled for next month. Two rooms are offline due to the straight-line wind damage that occurred over a year ago. The work is expected to start within the next few months.
    - The addition project has been approved for the pharmacy, business office services, and laundry services which are still housed in the old building.
    - Mock Survey starts next week to prepare for the VA Survey in December. CMS Survey is expected in March or April of 2025.
  - 6) Update of Operations – Steve Rolston, Chief Operations Officer
    - All Operational Items were reported above by the Administrators.

## 7. Committee Updates

### 1) Executive Committee - David Henry

Chair Henry stated that the Board sent a letter to the Governor's office regarding the wage pass thru. A copy is included in the board packet. There has been no response to the letter to date.

- i. Henry moved that the Board appoint Jason Bos to fill the vacant seat on the Appeals Board. Walter seconded the motion. The motion was passed.
  - ii. It was moved by Slagle to adopt the policy allowing an abbreviated evaluation process for the Executive Directory every other year with two corrections. The motion was seconded by Rutledge. The motion was passed.
- 2) Budget and Finance – Brad Slagle
- i. Slagle stated that the 2024 projections have improved since the last meeting. The projected deficit at the end of the year is just under \$6.5 million. FY25 budget has been passed and signed by the Governor. FY26 is being submitted to the DMVA this month. Notable about that budget is that it contains a request for funds for the demolition of the old Grand Rapids buildings understanding that if any funds are left in 2025, they will be used first for that effort. The Board discussed the timing of the demolition and the timing of the construction of the addition at Grand Rapids.
  - ii. The Charitable Funds Report indicates that for the year to date, the Homes have received over \$600,000 in donations with a balance of \$300,000 in the Charitable Funds. There is also an anticipated new donation at the MVHDJJ of \$600,000. The Board discussed how donations are solicited and the nature of charitable giving to the Homes.

3) Quality and Compliance Committee – Leon Bauer

The committee continues to meet on Teams and is creating a report that will focus on quality of care.

The board discussed the Abuse and Neglect Reports which are in the packets. Legislative Reports will be added to the agenda going forward.

4) Advocacy and Outreach Committee - Barry Walter

This committee discussed holding a legislative event in March or April. The Board discussed possibilities for public donor recognition.

Slagle stated that he and Ron Oja attended the Upper Peninsula State Fair.

The Board discussed the winter NASVH conference and highlighted that Steve Rolston is the Midwest Regional Director and Ryan Engle was elected Second Vice President and will become President in two years. Michigan will have a great influence in a group of 169 other state veteran homes.

## 8. **New Business**

- 1) The Board discussed that the November Board meeting may be cancelled if there are no critical action items on the agenda.
- 2) A motion to accept the MVFA Board Meeting schedule for 2025 as presented was made by Rutledge and seconded by Slagle. The motion was passed.

**9. Public Comment**

- 1) A member of the MVHCT discussed a need for flags for veteran memorial services. The member also expressed his appreciation for the Home, the community, and Jennifer Manning. He reminded the Board to use the men and women who live in this home for advocacy – they are their greatest asset. The member ended by thanking the board for their advocacy and support.
- 2) Ryan stated there are opportunities for the Board members to participate in the Veterans Day events and others being held in the coming weeks and months at each of the homes.

**10. Board Comment**

- 1) Walters thanked the board members for their input and the Chesterfield member for his attendance and comments.
- 2) Slagle expressed his appreciation for the administrators who have the toughest job second only to the DONs.
- 3) Turner thanked the board and stated that he is happy to be there.
- 4) Bauer stated he is very impressed with the way the homes are run evident by the results of each home's performance.
- 5) Love commented that in the eleven months he has served the MVAA, he has seen only consistent strong and thoughtful leadership from MVH leadership and staff and appreciates them along with what the board is doing.
- 6) Robbins shared his amazement with the success of Chesterfield. He congratulated all involved with that success.

**11. Motion**

Rutledge motioned to adjourn the meeting, seconded by Turner. The motion was passed.

**12. Adjournment**

The meeting was adjourned at 11:36 A.M.

*Braley Slagle For: Mary Anne Shannon*  
MaryAnne Shannon  
MVFA Board Secretary



STATE OF MICHIGAN  
OFFICE OF THE GOVERNOR  
LANSING

GRETCHEN WHITMER  
GOVERNOR

GARLIN GILCHRIST II  
LT. GOVERNOR

December 23, 2024

Major General Paul Rogers  
The Adjutant General  
Michigan Department of Military and Veterans Affairs  
P.O. Box 30634  
Lansing, Michigan 48909

Dear Major General Rogers:

Pursuant to Public Act 560 of 2016, MCL 36.105, please be advised of the following appointment to office:

**Michigan Veterans' Facility Authority Board of Directors**

Nancy Susick, of xxxxxxxxxxxxxxxxxxxxxx, Rochester, Michigan 48306, Oakland County, succeeding Henry Boutros, whose term has expired, appointed as a nominee of the Speaker of the House of Representatives with professional knowledge, skill, or experience in long-term care, health care licensure or finance, or medicine, for a term commencing December 23, 2024, and expiring April 15, 2027.

Respectfully,

Gretchen Whitmer  
Governor

## MVFA Board of Director Attendance Report: 2024

NAME	REPRESENTED BODY	YR. OF INITIAL APPT.	YR. TERM EXPIRES (04-15- )	ATTENDANCE					
				02-20	03-19	05-21	07-23	09-24	11-19
Bauer, L	Amer Leg	2023	2025	P	P	P	E	P	Canceled
Henry, D	Senate	2017	2025	P	E	P	P	P	Canceled
Love, B	Gen. Rogers	2023	n/a	E	E	A	A	V	Canceled
Robbins, K	House	2020	2025	P	P	P	P	V	Canceled
Rutledge, D	Amer. Leg	2017	2027	P	P	E	P	P	Canceled
Shannon, M	Amer. Leg	2019	2026	P	P	P	P	E	Canceled
Slagle, B	UP Rep	2019	2028	P	P	P	P	P	Canceled
Turner, S	Senate	2022	2025	N/A	N/A	P	E	P	Canceled
Walter, B	VFW	2022	2026	P	P	P	P	P	Canceled

Attendance key: P=present V=virtual E=excused A=absent

Reviewed and accepted by:

\_\_\_\_\_  
MaryAnne Shannon, Secretary

\_\_\_\_\_  
Date Reviewed



Jan 8, 2025

MVH Budget & Financial Oversight Committee

Report to Board of Directors -

The subcommittee met on Jan 8, 2025, with Chair Robbins, Board member Brad Slagle; staffers: Erica Bobrowski, Jackie Huhn, Beth Simonton-Kramer, Anne Zerbe, Steve Rolston and DMVA CFO Rachel Breeden.

1. Fiscal Year 2024 Update:

- MVFA closed the fiscal year in SIGMA but are awaiting outstanding legislative requests.
- FY 2024 Charitable Support Fund reflects a balance of \$3,119,678, an increase of \$403,675 from the prior fiscal year.

2. Fiscal Year 2025 Update:

- Legislative activity, including FY 2024 supplemental appropriations approval, impacts FY 2025 projected outcome.
- FY 2025 projections include:
  - 4.2% increase in Veterans Affairs rates
  - 4.2% increase in Medicaid rates
- Charitable Support Fund for FY 2025, as of November 30, 2024, reflects a balance of \$3,159,121, an increase of \$39,443 from last year.

3. Financial Reports/Audit Update:

- Michigan Veterans' Facility Authority financial audit (512-0101-25) is on-going.
  - The audit timeline was developed to allow for the release of an opinion by January 17, 2025.
  - Continuing to work through audits requests.

4. VA State Home Construction Grant for new Marquette Home: The 2024 VA conditional grant was awarded in late December.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/16/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
F000	INITIAL COMMENTS  DJ Jacobetti Home for Veterans was surveyed for a Recertification survey on 10/16/2024. Census = 61	F000		
F812 SS=F	Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2)  483.60(i) Food safety requirements. The facility must -  483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility.  483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety.  This REQUIREMENT is not met as evidenced by:  Based on observation, interview and record review, the facility failed to store, prepare, distribute, and serve food in accordance with professional standards for food service safety. This deficient practice has the potential to result in food borne illness among any and all 61	F812	Element 1: Utensils were rewashed and sanitized according to procedure. Kitchen Staff B was immediately educated on ware washing procedure. Although no members were identified in the citation, all members have the potential to be affected by the deficient practice. Element 2: All members have the potential to be affected by this deficient practice. The facility has determined the root cause to be that the employee, while being directly observed, got nervous and lost track of the full minute sanitation time. Element 3: Ware washing procedure was reviewed and deemed appropriate. Dietary staff were educated on ware washing procedures with emphasis on the sanitation time being at least or longer that 1 minute. Element 4: The kitchen will be audited twice daily for 14 days, then daily for 14 days, then weekly for 1 month for following the Ware washing procedure. Results will be brought to the QAPI committee and reviewed until substantial compliance is achieved. The Administrator is responsible for compliance. Compliance date is 11/15/2024.	11/15/24

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

10/31/2024

Any Deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of the survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

This form is a printed electronic version of the CMS 2567L. It contains all the information found on the standard document in much the same form. This electronic form once printed and signed by the facility administrator and appropriately posted will satisfy the CMS requirement to post survey information found on the CMS 2567L.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/16/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
F812	<p>Continued From page 1 residents of the facility. Findings include:</p> <p>On 10/14/24 at approximately 12:05 PM, Kitchen Staff (KS) "B" was observed cleaning cook ware at the three compartment sink. KS "B" was observed to wash utensils (food whip; spatulas; stirring spoons, sheet pans) and other food contact surfaces in the wash compartment, then rinsed in the center rinse compartment. KS "B" then quickly dipped each of the objects into the sanitizing solution of the third compartment for less than two seconds, then placed on the flanking drain board to the left of the sink. An interview was conducted at this time with KS "B" who was asked "Do you know what you are doing wrong here?" KS "B" replied "No". When asked what type of sanitizing chemical was being used in the sanitizing solution, KS "B" replied "Quat." When asked to define the amount of time a food utensil should be soaked in the "Quat" solution, KS "B" stated "A minute?". The question was responded to in the affirmative. At this time KS "B" made no attempt to take the items from the draining board and replace them into the sanitizing solution for the required time.</p> <p>A review of the label on the sanitizing solution affirmed the minimum contact time for proper sanitizing of food contact surfaces was 60 seconds.</p> <p>At approximately 12:15 PM Kitchen Manager (KM) "A" entered the area. The above observation and interview was shared with KM "A". KM "A" stated "She knows better than that."</p> <p>A review of the FDA Food Code 2017 was conducted and it states:</p> <p>4-501.114 Manual and Mechanical</p>	F812		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/15/2025  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/16/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
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F812	Continued From page 2 Warewashing Equipment, Chemical Sanitization -Temperature, pH, Concentration, and Hardness. A chemical SANITIZER used in a SANITIZING solution for a manual or mechanical operation at contact times specified under 4-703.11(C) shall meet the criteria specified under 7-204.11 Sanitizers, Criteria, shall be used in accordance with the EPA-registered label use instructions, P and shall be used as follows: (C) A quaternary ammonium compound solution shall: (1) Have a minimum temperature of 24C (75F), P (2) Have a concentration as specified under 7-204.11 and as indicated by the manufacturer's use directions included in the labeling,	F812		

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NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST</b> <b>MARQUETTE, MI 49855</b>	
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F000	INITIAL COMMENTS  Request to Accept Evidence of Deficiency Correction in Lieu of a Revisit Accepted. Facility is in compliance with 42 CFR Part 483, Requirements for Long Term Care Facilities.	F000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

12/17/2024

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CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/15/2025  
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OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/15/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
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E000	Initial Comments  On October 15, 2024, an Emergency Preparedness Survey was conducted by the Michigan Department of Licensing and Regulatory Affairs, Bureau of Survey and Certification. At the survey DJ Jacobetti Home for Veterans in Marquette was found in substantial compliance with the requirements for participation in Medicare/Medicaid at 42 CFR 483.73, Emergency Preparedness.	E000		

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NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
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K000	<p><b>INITIAL COMMENTS</b></p> <p>On October 15, 2024, a Life Safety Recertification Survey was conducted by the Michigan Department of Licensing and Regulatory Affairs, Bureau of Survey and Certification. At the survey, DJ Jacobetti Home for Veterans was found not in substantial compliance with the requirements for participation in Medicare/Medicaid at 42 CFR 483.90(a), Life Safety from Fire and the applicable provisions of the 2012 Edition of the National Fire Protection Agency (NFPA) 101, Life Safety Code and the 2012 Edition of NFPA 99, Health Care Facilities Code.</p> <p>The facility was constructed in three phases. The original building constructed in 1954, of Type I(332) construction walks out to the ground floor and has 3 floors above. The second phase was built in 1964, of Type I(332) construction with a ground floor walkout and has 2 floors above. The third phase was built in 1988, of Type II(222) construction with open parking below and two stories above. The building is fully sprinklered and has supervised smoke detection in the corridors and spaces open to the corridors.</p> <p>The facility has 81 certified beds. At the time of the survey the census was 61.</p>	K000		
K100 SS=F	<p>General Requirements - Other CFR(s): NFPA 101</p> <p>General Requirements - Other List in the REMARKS section any LSC Section 18.1 and 19.1 General Requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the</p>	K100	In accordance with NFPA 101, paperwork will be submitted by the installing contractor to the Bureau of Fire Services for review for the addition of new smoke detectors and heat sensors. No sprinkler changes were made during the renovation project. For Future renovations, the facility will ensure any changes to the fire	11/22/24

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11/01/2024

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
K100	Continued From page 1 applicable Life Safety Code or NFPA standard citation, should be included on Form CMS-2567.  This STANDARD is not met as evidenced by:  Based on observation, record review and interview, the facility failed to provide evidence that plans were submitted to the Michigan Bureau of Fire Services for the work the facility completed for the elevator project, as required by 18.1 and 19.1. This deficient practice could affect all of the occupants in the event of a fire.  Findings Include:  On October 15, 2024 at between the hours of 9:00 AM and 1:45 PM, Interview with the Facilities Director (FD) revealed two facility elevators were rehabbed and remodeled over the last year. The FD revealed in addition to the elevator work, fire detection and fire suppression additions were made to the existing fire protection systems. The FD was asked if a Bureau of Fire Services permit was obtained for the fire alarm and sprinkler system additions. The FD responded their elevator contractor had pulled a permit for the work, including the fire alarm and sprinkler system additions. No documentation, including a permit number, was provided by the exit of this survey to indicate plans were submitted to the Bureau of Fire Services.	K100	detecting system be sent to the Bureau of Fire Services for proper review and documentation. Installation contractor has submitted plans to Plan Review and have obtained Plan Review #PR2024BFS-005352. The facility will make any adjustments required by Plan review.	
K222 SS=E	Egress Doors CFR(s): NFPA 101  Egress Doors Doors in a required means of egress shall not be equipped with a latch or a lock that requires the use of a tool or key from the egress side unless using one of the following special locking arrangements:	K222	On October 15, 2024, the 1 North Stairwell exit door did not function as required by NFPA 101, 7.2.1.6.1.1 (3). Adjustments were made to the door to ensure proper function of the magnetic lock, Adjustments were completed October 16, 2024. Facility inspects delayed egress doors on a monthly basis and logs findings into the TELS Workorder System. The	11/15/24

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ORIGINAL BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/15/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
K222	<p>Continued From page 2</p> <p><b>CLINICAL NEEDS OR SECURITY THREAT LOCKING</b> Where special locking arrangements for the clinical security needs of the patient are used, only one locking device shall be permitted on each door and provisions shall be made for the rapid removal of occupants by: remote control of locks; keying of all locks or keys carried by staff at all times; or other such reliable means available to the staff at all times. 18.2.2.2.5.1, 18.2.2.2.6, 19.2.2.2.5.1, 19.2.2.2.6</p> <p><b>SPECIAL NEEDS LOCKING ARRANGEMENTS</b> Where special locking arrangements for the safety needs of the patient are used, all of the Clinical or Security Locking requirements are being met. In addition, the locks must be electrical locks that fail safely so as to release upon loss of power to the device; the building is protected by a supervised automatic sprinkler system and the locked space is protected by a complete smoke detection system (or is constantly monitored at an attended location within the locked space); and both the sprinkler and detection systems are arranged to unlock the doors upon activation. 18.2.2.2.5.2, 19.2.2.2.5.2, TIA 12-4</p> <p><b>DELAYED-EGRESS LOCKING ARRANGEMENTS</b> Approved, listed delayed-egress locking systems installed in accordance with 7.2.1.6.1 shall be permitted on door assemblies serving low and ordinary hazard contents in buildings protected throughout by an approved, supervised automatic fire detection system or an approved, supervised automatic sprinkler system. 18.2.2.2.4, 19.2.2.2.4</p> <p><b>ACCESS-CONTROLLED EGRESS LOCKING ARRANGEMENTS</b> Access-Controlled Egress Door assemblies installed in accordance with 7.2.1.6.2 shall be</p>	K222	<p>facility will continue to inspect delayed egress doors to ensure proper function. Maintenance staff were reeducated on maintaining egress doors.</p>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ORIGINAL BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/15/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
K222	<p>Continued From page 3 permitted. 18.2.2.2.4, 19.2.2.2.4 <b>ELEVATOR LOBBY EXIT ACCESS LOCKING ARRANGEMENTS</b> Elevator lobby exit access door locking in accordance with 7.2.1.6.3 shall be permitted on door assemblies in buildings protected throughout by an approved, supervised automatic fire detection system and an approved, supervised automatic sprinkler system. 18.2.2.2.4, 19.2.2.2.4</p> <p>This STANDARD is not met as evidenced by:</p> <p>Based on observation and interview, the facility failed to ensure doors in a required means of egress are not equipped with a latch or lock that requires the use of a tool or key from the egress side unless meeting the special locking arrangements for clinical needs in accordance with 18.2.2.2.5.1 and 18.2.2.2.6, special needs locking arrangements in accordance with 18.2.2.2.5.2, delayed egress locking in accordance with 18.2.2.2.4, access-controlled egress doors in accordance with 18.2.2.2.4, or elevator lobby exit access in accordance with 18.2.2.2.4. This deficient practice could affect approximately 30 occupants in the event of a fire or emergency.</p> <p>Findings Include:</p> <p>On October 15, 2024, at approximately 11: 44 AM, observation revealed the 1 North stairwell delayed-egress exit door does not function as required by NFPA 101, 7.2.1.6.1.1 (3). Upon testing the door three times, the delayed-egress function does not work and the only way to exit through the door is enter a code on a keypad. This finding was confirmed by the Facilities</p>	K222		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ORIGINAL BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/15/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
K222	Continued From page 4 Director at the time of observation.	K222		
K351 SS=F	<p>Sprinkler System - Installation CFR(s): NFPA 101</p> <p>Spinkler System - Installation 2012 NEW Buildings are to be protected throughout by an approved automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems. In Type I and II construction, alternative protection measures are permitted to be substituted for sprinkler protection in specific areas where state and local regulations prohibit sprinklers. Listed quick-response or listed residential sprinklers are used throughout smoke compartments with patient sleeping rooms. In hospitals, sprinklers are not required in clothes closets of patient sleeping rooms where the area of the closet does not exceed six square feet and sprinkler coverage covers the closet footprint as required by NFPA 13, Standard for Installation of Sprinkler Systems. 18.3.5.1, 18.3.5.4, 18.3.5.5, 18.3.5.6, 9.7, 9.7.1.1(1), 18.3.5.10</p> <p>This STANDARD is not met as evidenced by:</p> <p>Based on observation and interview, the facility failed to ensure buildings are protected throughout by an approved automatic sprinkler system in accordance with NFPA 13, as required by 18.3.5.1, 18.3.5.4, 18.3.5.5, 18.3.5.6, 18.3.5.10, 9.7 and 9.7.1.1(1). This deficient practice could affect all occupants in the event of a fire.</p> <p>Findings Include:</p>	K351	<p>On October 15, 2024, multiple ceiling tiles were observed to be out of position and not in accordance with NFPA 13.</p> <p>1) Two ceiling tiles were observed to be out of position in the vestibule going out to the smoking area. To prevent further tile movement, the facility has replaced the existing tiles with a heavier weighted fire rated tile to prevent air movement from displacing the tiles.</p> <p>2) One ceiling tile was observed to be out of position on the north side of the chapel. The ceiling tile has since been placed back into the proper position. The facility will continue to monitor contractors to ensure all ceiling tiles are being placed back into their proper position after work has been completed.</p> <p>3) One ceiling tile was observed to be out of position int the vestibule exiting the administrative area. To prevent further tile movement, the facility has replaced the existing tiles with a heavier weighted fire rated tile to prevent air movement from displacing the tiles.</p> <p>4) One ceiling tile was observed to be out of position in the records room. The ceiling tile has since been placed back into the proper position. The facility will continue to monitor contractors to ensure all ceiling tiles are being placed back into their proper position after work has been completed. Maintenance staff were reeducated on maintaining ceiling tiles.</p>	11/15/24

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/15/2025  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ORIGINAL BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/15/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
K351	<p>Continued From page 5</p> <p>1) On October 15, 2024 at approximately 11:14 AM, observation revealed two ceiling tiles missing in the vestibule going out to the smoking area.</p> <p>2) On October 15, 2024 at approximately 11:30 AM, observation revealed a ceiling tile missing on the north side of the chapel.</p> <p>3) On October 15, 2024 at approximately 1:05 PM, observation revealed a ceiling tile missing in the west vestibule exiting the administrative area.</p> <p>4) On October 15, 2024 at approximately 1:07 PM, observation revealed a ceiling tile missing in the records room.</p> <p>These findings were confirmed by the Facilities Director at the time of observation.</p>	K351		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/15/2025  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235724</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ORIGINAL BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>11/21/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DJ JACOBETTI HOME FOR VETERANS</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>425 FISHER ST</b> <b>MARQUETTE, MI 49855</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
K000	INITIAL COMMENTS  On November 21, 2024, a Life Safety Revisit Survey was conducted by the Michigan Department of Licensing and Regulatory Affairs, Bureau of Survey and Certification. At the survey, DJ Jacobetti Home for Veterans was found in substantial compliance with the requirements for participation in Medicare/Medicaid at 42 CFR 483.90(a), Life Safety from Fire and the applicable provisions of the 2012 Edition of the National Fire Protection Agency (NFPA) 101, Life Safety Code and the 2012 Edition of NFPA 99, Health Care Facilities Code.	K000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

12/17/2024

Any Deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of the survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

This form is a printed electronic version of the CMS 2567L. It contains all the information found on the standard document in much the same form. This electronic form once printed and signed by the facility administrator and appropriately posted will satisfy the CMS requirement to post survey information found on the CMS 2567L.

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/16/2024  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>235728</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>10/01/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>MICHIGAN VETERANS HOME OF CHESTERFIELD TOWNSHIP</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>47901 SUGARBUSH RD</b> <b>CHESTERFIELD TOWNSHI, MI 48047</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
F000	<p><b>INITIAL COMMENTS</b></p> <p>Michigan Veterans Home Chesterfield Township was surveyed on 10/01/24 for an abbreviated survey. They were found to be in compliance with 42 CFR Part 483, Requirements for Long Term Care Facilities.</p> <p>Intake numbers: MI00147145.</p> <p>Census: 126</p>	F000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

10/16/2024

Any Deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of the survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

This form is a printed electronic version of the CMS 2567L. It contains all the information found on the standard document in much the same form. This electronic form once printed and signed by the facility administrator and appropriately posted will satisfy the CMS requirement to post survey information found on the CMS 2567L.



DEPARTMENT OF VETERANS AFFAIRS  
Veterans Health Administration  
Washington, DC 20420

October 22, 2024

Jennifer Manning  
Administrator  
Michigan Veteran Homes at Chesterfield Township  
47901 Sugarbush Road  
Chesterfield Township, MI 48047

Subject: Michigan Veteran Homes at Chesterfield Township Onsite 2024 VA Annual Survey, August 20 – 22, 2024

Dear Ms. Manning:

The Department of Veterans Affairs (VA) survey team conducted the 2024 VA Annual Survey of the Michigan Veteran Homes at Chesterfield Township, from August 20 – 22, 2024. There were deficiencies that you were notified of in a letter dated September 9, 2024.

The revised Corrective Action Plan (CAP) you submitted was accepted and Provisional Certification issued on September 26, 2024. Per § 51.30(a), certifications expire 600 calendar days after the date of their issuance.

The signed Attestation of Compliance indicating the Michigan Veteran Homes at Chesterfield Township is back to full compliance with all 38 C.F.R. § 51 regulations has been accepted. The 2024 VA Annual Survey for the Michigan Veteran Homes at Chesterfield Township is thus now considered complete.

If you have any questions, please contact Cicely Robinson, National State Veterans Homes Program Manager for Quality and Oversight, who coordinates survey processes for Pod 1, at [Cicely.Robinson@va.gov](mailto:Cicely.Robinson@va.gov) or 608-867-9422.

Thank you for your continued service to our nation's Veterans.

Sincerely,

Scotte R. Hartronft, M.D., M.B.A., FACP, FACHE  
Executive Director  
Office of Geriatrics & Extended Care

Page 2.

Jennifer Manning

cc: Laura Ruzick  
Network Director, VA Healthcare system Serving Ohio, Indiana, and Michigan

Chris Cauley  
Medical Center Director, VA Detroit Health Care

Dr. Marcos Montagnini  
SVH VISN Liaison, VA Healthcare system Serving Ohio, Indiana, and Michigan



STATE OF MICHIGAN  
**MICHIGAN VETERAN HOMES**  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ANNE ZERBE  
EXECUTIVE DIRECTOR

October 21, 2024

The Honorable Gretchen Whitmer  
Governor of Michigan  
P.O. Box 30013  
Lansing Michigan

Dear Governor Whitmer,

SUBJECT: PA 166 of 2022 – FY24 Monthly Reporting

Attached please find the September 2024 report from the Michigan Veteran Homes at Chesterfield Township, the Michigan Veteran Homes D.J. Jacobetti, and the Michigan Veteran Homes at Grand Rapids, pursuant to Public Act 166 of 2022, SEC.456 (1).

If you have any questions regarding this report, please contact Beth Simonton-Kramer at 616.498.5357.

Sincerely,

A handwritten signature in black ink that reads "Anne Zerbe".

Anne Zerbe  
Executive Director, MVH

Attachment

cc: Senate Committee on Veterans and Emergency Services  
Senate Appropriations Subcommittee on Military, Veterans, State Police  
House Committee on Military, Veterans and Homeland Security  
House Appropriations Subcommittee on Military and Veterans and State Police  
State Budget Office  
House Fiscal Agency  
Michigan Veterans Facility Authority  
Major General Paul D. Rogers, DMVA Director

# MVH Legislative Reporting Abuse & Neglect Report

Month & Year: September 2024

**PA 166 of 2022, Sec. 456 (1).**

All complaints of abusive or neglectful care at the Grand Rapids, D.J. Jacobetti, and Chesterfield Township homes for veterans by a resident member, a resident member’s family or legal guardian, or staff of the veterans’ homes received by a supervisor shall be referred to the director of nursing or his or her designee upon receipt of the complaint. The director of nursing or his or her designee shall report on **not less than a monthly basis**, except that the board of managers or the Michigan veterans’ facility authority may specify a more frequent reporting period to the home administrator, board of managers, Michigan veterans’ facility authority, agency, subcommittees, senate and house fiscal agencies, and state budget office the following information: (a) A description of the process by which resident members and others may file complaints of alleged abuse or neglect at the Grand Rapids, D.J. Jacobetti, and Chesterfield Township homes for veterans. (b) Summary statistics on the number and general nature of complaints of abuse or neglect. (c) Summary statistics on the final disposition of complaints of abuse or neglect received.

**Statement describing the process by which resident members and others may file complaints of alleged abuse at the Homes**

Staff must report any incident or suspicion of abuse, neglect, or misappropriation of property to the Administrator immediately. If the Administrator is unavailable, the report should be made to the Director of Nursing.

Any member, family member, or any other person may file a complaint with the facility’s Administrator or with any other officials in accordance with State law. This includes reporting to the State survey and certification agency concerning any instance or suspicion of member abuse, neglect, involuntary seclusion, or misappropriation of a member’s funds or property by any person.

Type of Report/Investigation	MVH at Chesterfield Twp		MVH DJ Jacobetti		MVH at Grand Rapids	
	Number Reported	Number Substantiated	Number Reported	Number Substantiated	Number Reported	Number Substantiated
Abuse	1	1	0		0	
Member-to-Member Altercation	0		0		0	
Injury - Unknown Origin	0		0		0	
Neglect	1	0	0		0	
Elopement	0		0		0	
Misappropriation	0		0		0	
Mistreatment	0		0		1	0
Exploitation	0		0		0	



STATE OF MICHIGAN  
**MICHIGAN VETERAN HOMES**  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ANNE ZERBE  
EXECUTIVE DIRECTOR

November 15, 2024

The Honorable Gretchen Whitmer  
Governor of Michigan  
P.O. Box 30013  
Lansing Michigan

Dear Governor Whitmer,

SUBJECT: PA 166 of 2020 – FY25 Monthly Reporting

Attached please find the October report from the Michigan Veteran Homes at Chesterfield Township, the Michigan Veteran Homes D.J. Jacobetti, and the Michigan Veteran Homes at Grand Rapids, pursuant to Public Act 166 of 2022, SEC.456 (1).

If you have any questions regarding this report, please contact Beth Simonton-Kramer at 616.498.5357.

Sincerely,

A handwritten signature in black ink that reads "Anne Zerbe".

Anne Zerbe  
Executive Director, MVH

Attachment

cc: Senate Committee on Veterans and Emergency Services  
Senate Appropriations Subcommittee on Military, Veterans, State Police  
House Committee on Military, Veterans and Homeland Security  
House Appropriations Subcommittee on Military and Veterans and State Police  
Major General Paul D. Rogers, DMVA Director

## MVH Legislative Reporting Abuse & Neglect Report

Month & Year: October 2024

**PA 166 of 2022, Sec. 456 (1).**

All complaints of abusive or neglectful care at the Grand Rapids, D.J. Jacobetti, and Chesterfield Township homes for veterans by a resident member, a resident member’s family or legal guardian, or staff of the veterans’ homes received by a supervisor shall be referred to the director of nursing or his or her designee upon receipt of the complaint. The director of nursing or his or her designee shall report on **not less than a monthly basis**, except that the board of managers or the Michigan veterans’ facility authority may specify a more frequent reporting period to the home administrator, board of managers, Michigan veterans’ facility authority, agency, subcommittees, senate and house fiscal agencies, and state budget office the following information: (a) A description of the process by which resident members and others may file complaints of alleged abuse or neglect at the Grand Rapids, D.J. Jacobetti, and Chesterfield Township homes for veterans. (b) Summary statistics on the number and general nature of complaints of abuse or neglect. (c) Summary statistics on the final disposition of complaints of abuse or neglect received.

**Statement describing the process by which resident members and others may file complaints of alleged abuse at the Homes**

Staff must report any incident or suspicion of abuse, neglect, or misappropriation of property to the Administrator immediately. If the Administrator is unavailable, the report should be made to the Director of Nursing.

Any member, family member, or any other person may file a complaint with the facility’s Administrator or with any other officials in accordance with State law. This includes reporting to the State survey and certification agency concerning any instance or suspicion of member abuse, neglect, involuntary seclusion, or misappropriation of a member’s funds or property by any person.

Type of Report/Investigation	MVH at Chesterfield Twp		MVH DJ Jacobetti		MVH at Grand Rapids	
	Number Reported	Number Substantiated	Number Reported	Number Substantiated	Number Reported	Number Substantiated
Abuse	0		0		0	
Member-to-Member Altercation	1	1	0		0	
Injury - Unknown Origin	0		0		0	
Neglect	0		0		0	
Elopement	0		1	1	0	
Misappropriation	0		0		0	
Mistreatment	0		0		0	
Exploitation	0		0		0	



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
**MICHIGAN VETERAN HOMES**  
LANSING

ANNE ZERBE  
EXECUTIVE DIRECTOR

December 16, 2024

The Honorable Gretchen Whitmer  
Governor of Michigan  
PO Box 30013  
Lansing Michigan

Dear Governor Whitmer,

SUBJECT: PA 121 OF 2024 – FY25 Abuse & Neglect Allegation Reporting

Attached please find the November 2024 report from the Michigan Veteran Homes at Chesterfield Township, the Michigan Veteran Homes D.J. Jacobetti, and the Michigan Veteran Homes at Grand Rapids, pursuant to Public Act 121 of 2024, SEC. 504.(1).

If you have any questions regarding this report, please contact Beth Simonton-Kramer at 616.498.5357.

Sincerely,

A handwritten signature in cursive script, appearing to read "Anne Zerbe".

Anne Zerbe  
Executive Director, MVH

Attachments

cc: Senate Committee on Veterans and Emergency Services  
Senate Appropriations Subcommittee on Military, Veterans, State Police  
House Committee on Military, Veterans and Homeland Security  
House Appropriations Subcommittee on Military and Veterans and State Police  
State Budget Office  
House Fiscal Agency  
Michigan Veterans Facility Authority  
Major General Paul D. Rogers, DMVA Director

# MVH Legislative Reporting Abuse & Neglect Report

November 2024

**PA 166 of 2022, Sec. 456 (1).**Sec. 504. (1) The MVFA shall report and investigate all complaints of abuse or neglect at a veterans’ facility in compliance with USDVA and CMS regulations for state veterans’ homes and skilled nursing facilities. The MVFA shall report on a bimonthly basis the following information: (a) A description of the process by which resident members and others may file complaints of alleged abuse or neglect at a veterans’ facility. (b) Summary statistics on the number and general nature of complaints of abuse or neglect. (c) Summary statistics on the final disposition of complaints of abuse or neglect received. (2) The MVFA shall display in high-traffic areas throughout the veterans’ facility the process by which visitors, resident members, and staff of the veterans’ facility may register complaints.

**Statement describing the process by which resident members and others may file complaints of alleged abuse at the Homes**

Staff must report any incident or suspicion of abuse, neglect, or misappropriation of property to the Administrator immediately. If the Administrator is unavailable, the report should be made to the Director of Nursing.

Any member, family member, or any other person may file a complaint with the facility’s Administrator or with any other officials in accordance with State law. This includes reporting to the State survey and certification agency concerning any instance or suspicion of member abuse, neglect, involuntary seclusion, or misappropriation of a member’s funds or property by any person.

Type of Report/Investigation	MVH at Chesterfield Twp		MVH DJ Jacobetti		MVH at Grand Rapids	
	Number Reported	Number Substantiated	Number Reported	Number Substantiated	Number Reported	Number Substantiated
Abuse	0		0		1	0
Member-to-Member Altercation	0		0		0	
Injury - Unknown Origin	0		0		0	
Neglect	0		0		1	0
Elopement	0		0		0	
Misappropriation	0		0		0	
Mistreatment	0		0		0	
Exploitation	0		0		0	



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
**MICHIGAN VETERAN HOMES**  
LANSING

ANNE ZERBE  
EXECUTIVE DIRECTOR

February 7, 2025

The Honorable Gretchen Whitmer  
Governor of Michigan  
PO Box 30013  
Lansing Michigan

Dear Governor Whitmer,

SUBJECT: PA 121 OF 2024 – FY25 Abuse & Neglect Allegation Reporting

Attached please find the bi-monthly reports including December 2024, and January 2025, from the Michigan Veteran Homes at Chesterfield Township, the Michigan Veteran Homes D.J. Jacobetti, and the Michigan Veteran Homes at Grand Rapids, pursuant to Public Act 121 of 2024, SEC. 504.(1).

If you have any questions regarding this report, please contact Beth Simonton-Kramer at 616.498.5357.

Sincerely,

A handwritten signature in black ink that reads "Anne Zerbe".

Anne Zerbe  
Executive Director, MVH

Attachments

cc: Senate Committee on Veterans and Emergency Services  
Senate Appropriations Subcommittee on Military, Veterans, State Police  
House Committee on Military, Veterans and Homeland Security  
House Appropriations Subcommittee on Military and Veterans and State Police  
State Budget Office  
House Fiscal Agency  
Michigan Veterans Facility Authority  
Major General Paul D. Rogers, DMVA Director

# MVH Legislative Reporting Abuse & Neglect Report

Month/Year December 2024

**PA 121 of 2024, SEC. 504.(1)**

Sec. 504. (1) The MVFA shall report and investigate all complaints of abuse or neglect at a veterans’ facility in compliance with USDVA and CMS regulations for state veterans’ homes and skilled nursing facilities. The MVFA shall report on a bimonthly basis the following information: (a) A description of the process by which resident members and others may file complaints of alleged abuse or neglect at a veterans’ facility. (b) Summary statistics on the number and general nature of complaints of abuse or neglect. (c) Summary statistics on the final disposition of complaints of abuse or neglect received. (2) The MVFA shall display in high-traffic areas throughout the veterans’ facility the process by which visitors, resident members, and staff of the veterans’ facility may register complaints.

**Statement describing the process by which resident members and others may file complaints of alleged abuse at the Homes**

Staff must report any incident or suspicion of abuse, neglect, or misappropriation of property to the Administrator immediately. If the Administrator is unavailable, the report should be made to the Director of Nursing.

Any member, family member, or any other person may file a complaint with the facility’s Administrator or with any other officials in accordance with State law. This includes reporting to the State survey and certification agency concerning any instance or suspicion of member abuse, neglect, involuntary seclusion, or misappropriation of a member’s funds or property by any person.

Type of Report/Investigation	MVH at Chesterfield Twp		MVH DJ Jacobetti		MVH at Grand Rapids	
	Number Reported	Number Substantiated	Number Reported	Number Substantiated	Number Reported	Number Substantiated
Abuse	1	0	0		0	
Member-to-Member Altercation	0		0		0	
Injury - Unknown Origin	0		0		0	
Neglect	0		0		0	
Elopement	0		0		0	
Misappropriation	0		0		0	
Mistreatment	0		0		0	
Exploitation	0		0		0	

# MVH Legislative Reporting Abuse & Neglect Report

Month/Year January 2025

**PA 121 of 2024, SEC. 504.(1)**

Sec. 504. (1) The MVFA shall report and investigate all complaints of abuse or neglect at a veterans’ facility in compliance with USDVA and CMS regulations for state veterans’ homes and skilled nursing facilities. The MVFA shall report on a bimonthly basis the following information: (a) A description of the process by which resident members and others may file complaints of alleged abuse or neglect at a veterans’ facility. (b) Summary statistics on the number and general nature of complaints of abuse or neglect. (c) Summary statistics on the final disposition of complaints of abuse or neglect received. (2) The MVFA shall display in high-traffic areas throughout the veterans’ facility the process by which visitors, resident members, and staff of the veterans’ facility may register complaints.

**Statement describing the process by which resident members and others may file complaints of alleged abuse at the Homes**

Staff must report any incident or suspicion of abuse, neglect, or misappropriation of property to the Administrator immediately. If the Administrator is unavailable, the report should be made to the Director of Nursing.

Any member, family member, or any other person may file a complaint with the facility’s Administrator or with any other officials in accordance with State law. This includes reporting to the State survey and certification agency concerning any instance or suspicion of member abuse, neglect, involuntary seclusion, or misappropriation of a member’s funds or property by any person.

Type of Report/Investigation	MVH at Chesterfield Twp		MVH DJ Jacobetti		MVH at Grand Rapids	
	Number Reported	Number Substantiated	Number Reported	Number Substantiated	Number Reported	Number Substantiated
Abuse	0		0		0	
Member-to-Member Altercation	0		0		0	
Injury - Unknown Origin	0		0		0	
Neglect	2	1	0		0	
Elopement	0		0		0	
Misappropriation	0		0		0	
Mistreatment	0		0		0	
Exploitation	0		0		0	

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**

September 2024 Monthly Census Report

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	126		n/a	196
<b>By Care Setting</b>				
Skilled Nursing	126		93.2%	181
Domiciliary	n/a		n/a	n/a
<b>By War Era of Service</b>				
WWII	3		3.4%	7
KC	12		8.5%	17
VNE	89		60.2%	113
Cold War	12		19.3%	39
GWE	5		2.8%	7
Other	0		0.0%	3
Dependent	5		5.7%	10
<b>By Age</b>				
Under 60	5		7.4%	14
60 - 79	78		64.8%	126
80+	43		27.8%	56
<b>By Gender</b>				
Male	117		92.0%	181
Female	9		8.0%	15

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	3	19	1.6
Deaths	0	47	3.9
Forced Discharges (see memo)	0	0	0.0
Other Discharges	0	12	1.0

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	5	499
Admission Applications Processed	1	33
Admission Applications Approved	3	21
Approved Applicants Admitted	3	13
Approved Applicants on Waitlist or Not Yet Ready for Admission	19	180
Admissions Applications Denied	0	6

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	19	73	57.0%	
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**  
*September 2024 Monthly Census Report*

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	80	17.7%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	41	76.2%	(of total SN census)	\$2,937.65
Dependent	5	6.1%	(of total SN census)	\$2,180.60
<b>TOTAL Skilled Nursing Census</b>	<b>126</b>	<b>93.2%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	4	1	5
60-79	76	2	78
80+	37	6	43
<b>TOTAL</b>	<b>117</b>	<b>9</b>	<b>126</b>
% of Census	Male	Female	Total
Under 60	80.0%	20.0%	4.0%
60-79	97.4%	2.6%	61.9%
80+	86.0%	14.0%	34.1%
<b>TOTAL</b>	<b>92.9%</b>	<b>7.1%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	2	1	3
KC	11	1	12
VNE	88	1	89
Peacetime	11	1	12
Gulf War Era	5	0	5
Other	0	0	0
Dependent	0	5	5
<b>TOTAL</b>	<b>117</b>	<b>9</b>	<b>126</b>
% of Census	Male	Female	Total
WWII	66.7%	33.3%	2.4%
KC	91.7%	8.3%	9.5%
VNE	98.9%	1.1%	70.6%
Cold War	91.7%	8.3%	9.5%
Gulf War	100.0%	0.0%	4.0%
Other			0.0%
Dependent	0.0%	100.0%	4.0%
<b>TOTAL</b>	<b>92.9%</b>	<b>7.1%</b>	<b>n/a</b>

**Michigan Veteran Homes DJ Jacobetti**  
*September 2024 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	<b>103</b>		<i>n/a</i>	
<b>By Care Setting</b>				
Skilled Nursing	101		98.1%	
Domiciliary	2		1.9%	
<b>By War Era of Service</b>				
WWII	5		4.9%	
KC	12		11.7%	
VNE	68		66.0%	
Cold War	13		12.6%	
GWE	1		1.0%	
Other	0		0.0%	
Dependent	4		3.9%	
<b>By Age</b>				
Under 60	2		1.9%	
60 - 79	47		45.6%	
80+	54		52.4%	
<b>By Gender</b>				
Male	97		94.2%	
Female	6		5.8%	

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	0		
Deaths	0		
Forced Discharges ( <i>see memo</i> )	0		
Other Discharges	0		

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	5	
Admission Applications Processed	11	
Admission Applications Approved	7	
Approved Applicants Admitted	4	
Approved Applicants on Waitlist or Not Yet Ready for Admission	85	
Admissions Applications Denied	1	

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	126	85	101	80.2%	
Domiciliary Care	3	0	2	66.7%	

**Michigan Veteran Homes DJ Jacobetti**  
**September 2024 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	40	39.6%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	58	57.4%	(of total SN census)	\$4,069.17
Dependent	3	3.0%	(of total SN census)	\$2,169.10
<b>TOTAL Skilled Nursing Census</b>	<b>101</b>	<b>98.1%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	2	100.0%	(of total Dom census)	\$1,531.50
Dependent	0		(of total Dom census)	\$0.00
<b>Total Domiciliary Census</b>	<b>2</b>	<b>1.9%</b>	(of TOTAL census)	n/a

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	2	0	2
60-79	44	3	47
80+	52	2	54
<b>TOTAL</b>	<b>98</b>	<b>5</b>	<b>103</b>
% of Census	Male	Female	Total
Under 60	100.0%	0.0%	1.9%
60-79	93.6%	6.4%	45.6%
80+	96.3%	3.7%	52.4%
<b>TOTAL</b>	<b>95.1%</b>	<b>4.9%</b>	n/a

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	5	0	5
KC	12	0	12
VNE	67	1	68
Cold War	12	1	13
Gulf War Era	1	0	1
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>97</b>	<b>6</b>	<b>103</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	4.9%
KC	100.0%	0.0%	11.7%
VNE	98.5%	1.5%	66.0%
Cold War	92.3%	7.7%	12.6%
Gulf War	100.0%	0.0%	1.0%
Other			0.0%
Dependent	0.0%	100.0%	3.9%
<b>TOTAL</b>	<b>94.2%</b>	<b>5.8%</b>	n/a

**Michigan Veteran Homes at Grand Rapids**  
**September 2024 Monthly Census Report**

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	122		n/a	196
<b>By Care Setting</b>				
Skilled Nursing	122		93.2%	181
Domiciliary	n/a		n/a	n/a
<b>By War Era of Service</b>				
WWII	1		3.4%	7
KC	8		8.5%	17
VNE	81		60.2%	113
Cold War	20		19.3%	39
GWE	9		2.8%	7
Other	0		0.0%	3
Dependent	3		5.7%	10
<b>By Age</b>				
Under 60	6		7.4%	14
60 - 79	80		64.8%	126
80+	36		27.8%	56
<b>By Gender</b>				
Male	113		92.0%	181
Female	9		8.0%	15

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	3	19	1.6
Deaths	1	47	3.9
Forced Discharges (see memo)	0	0	0.0
Other Discharges	1	12	1.0

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	14	499
Admission Applications Processed	4	33
Admission Applications Approved	4	21
Approved Applicants Admitted	3	13
Approved Applicants on Waitlist or Not Yet Ready for Admission	178	180
Admissions Applications Denied	0	6

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	178	128	38.1%	38.8%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**Michigan Veteran Homes at Grand Rapids**  
**September 2024 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	55	17.7%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	64	76.2%	(of total SN census)	\$2,425.63
Dependent	3	6.1%	(of total SN census)	\$1,519.33
<b>TOTAL Skilled Nursing Census</b>	<b>122</b>	<b>93.2%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	5	1	13
60-79	76	4	114
80+	32	4	49
<b>TOTAL</b>	<b>113</b>	<b>9</b>	<b>122</b>
% of Census	Male	Female	Total
Under 60	100.0%	0.0%	7.4%
60-79	94.7%	5.3%	64.8%
80+	83.7%	16.3%	27.8%
<b>TOTAL</b>	<b>92.0%</b>	<b>8.0%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	1	0	6
KC	8	0	15
VNE	77	4	106
Peacetime	20	0	34
Gulf War	7	2	5
Other	0	0	0
Dependent	0	3	10
<b>TOTAL</b>	<b>113</b>	<b>9</b>	<b>122</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	3.4%
KC	100.0%	0.0%	8.5%
VNE	96.2%	3.8%	60.2%
Cold War	100.0%	0.0%	19.3%
Gulf War	100.0%	0.0%	2.8%
Other			0.0%
Dependent	0.0%	100.0%	5.7%
<b>TOTAL</b>	<b>92.0%</b>	<b>8.0%</b>	<b>n/a</b>

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**

October 2024 Monthly Census Report

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	125	126	n/a	125
<b>By Care Setting</b>				
Skilled Nursing	125	126	100.0%	125
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	2	3	1.6%	2
KC	12	12	9.6%	12
VNE	89	89	71.2%	89
Cold War	12	12	9.6%	12
GWE	5	5	4.0%	5
Other	0	0	0.0%	0
Dependent	5	5	4.0%	5
<b>By Age</b>				
Under 60	5	5	4.0%	5
60 - 79	78	78	62.4%	78
80+	42	43	33.6%	42
<b>By Gender</b>				
Male	117	117	93.6%	117
Female	8	9	6.4%	8

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	1	30	1
Deaths	2	26	2
Forced Discharges (see memo)	0	0	0
Other Discharges	0	7	0

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	13	111
Admission Applications Processed	17	92
Admission Applications Approved	0	30
Approved Applicants Admitted	1	30
Approved Applicants on Waitlist or Not Yet Ready for Admission	18	225
Admissions Applications Denied	0	3

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	18	125	97.7%	57.0%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**  
*October 2024 Monthly Census Report*

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	79	63.2%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	41	32.8%	(of total SN census)	\$2,952.64
Dependent	5	4.0%	(of total SN census)	\$2,600.00
<b>TOTAL Skilled Nursing Census</b>	<b>125</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	4	1	5
60-79	76	2	78
80+	37	5	42
<b>TOTAL</b>	<b>117</b>	<b>8</b>	<b>125</b>
% of Census	Male	Female	Total
Under 60	80.0%	20.0%	4.0%
60-79	97.4%	2.6%	62.4%
80+	88.1%	11.9%	33.6%
<b>TOTAL</b>	<b>93.6%</b>	<b>6.4%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	2	0	2
KC	11	1	12
VNE	88	1	89
Peacetime	11	1	12
Gulf War	5	0	5
Other	0	0	0
Dependent	0	5	5
<b>TOTAL</b>	<b>117</b>	<b>8</b>	<b>125</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	1.6%
KC	91.7%	8.3%	9.6%
VNE	98.9%	1.1%	71.2%
Cold War	91.7%	8.3%	9.6%
Gulf War	100.0%	0.0%	4.0%
Other			0.0%
Dependent	0.0%	100.0%	4.0%
<b>TOTAL</b>	<b>93.6%</b>	<b>6.4%</b>	<b>n/a</b>

**Michigan Veteran Homes DJ Jacobetti**  
*October 2024 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	<b>109</b>	103	n/a	109
<b>By Care Setting</b>				
Skilled Nursing	107	101	98.2%	107
Domiciliary	2	2	1.8%	2
<b>By War Era of Service</b>				
WWII	5	5	4.6%	5
KC	13	12	11.9%	13
VNE	73	68	67.0%	73
Cold War	14	13	12.8%	14
GWE	1	1	0.9%	1
Other	0	0	0.0%	0
Dependent	3	4	2.8%	3
<b>By Age</b>				
Under 60	2	2	1.8%	2
60 - 79	50	47	45.9%	50
80+	57	54	52.3%	57
<b>By Gender</b>				
Male	104	97	95.4%	104
Female	5	6	4.6%	5

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	8	50	8
Deaths	2	33	2
Forced Discharges (see memo)	0	0	0
Other Discharges	0	10	0

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	28	195
Admission Applications Processed	11	109
Admission Applications Approved	11	74
Approved Applicants Admitted	8	54
Approved Applicants on Waitlist or Not Yet Ready for Admission	86	1000
Admissions Applications Denied	0	7

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	126	86	107	84.9%	80.2%
Domiciliary Care	3	0	2	66.7%	66.7%

**Michigan Veteran Homes DJ Jacobetti**  
**October 2024 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	44	41.1%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	60	56.1%	(of total SN census)	\$4,087.05
Dependent	3	2.8%	(of total SN census)	\$2,049.48
<b>TOTAL Skilled Nursing Census</b>	<b>107</b>	<b>98.2%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	2	100.0%	(of total Dom census)	\$1,531.50
Dependent	0		(of total Dom census)	
<b>Total Domiciliary Census</b>	<b>2</b>	<b>1.8%</b>	(of TOTAL census)	n/a

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	2	0	2
60-79	47	3	50
80+	55	2	57
<b>TOTAL</b>	<b>104</b>	<b>5</b>	<b>109</b>
% of Census	Male	Female	Total
Under 60	100.0%	0.0%	1.8%
60-79	94.0%	6.0%	45.9%
80+	96.5%	3.5%	52.3%
<b>TOTAL</b>	<b>95.4%</b>	<b>4.6%</b>	n/a

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	5	0	5
KC	13	0	13
VNE	72	1	73
Peacetime	13	1	14
Gulf War	1	0	1
Other	0	0	0
Dependent	0	3	3
<b>TOTAL</b>	<b>104</b>	<b>5</b>	<b>109</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	4.6%
KC	100.0%	0.0%	11.9%
VNE	98.6%	1.4%	67.0%
Cold War	92.9%	7.1%	12.8%
Gulf War	100.0%	0.0%	0.9%
Other			0.0%
Dependent	0.0%	100.0%	2.8%
<b>TOTAL</b>	<b>95.4%</b>	<b>4.6%</b>	n/a

**Michigan Veteran Homes at Grand Rapids**  
*October 2024 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	122	122	n/a	122
<b>By Care Setting</b>				
Skilled Nursing	122	122	100.0%	122
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	1	1	0.8%	1
KC	8	8	6.6%	8
VNE	80	81	65.6%	80
Cold War	20	20	16.4%	20
GWE	9	9	7.4%	9
Other	0	0	0.0%	0
Dependent	4	3	3.3%	4
<b>By Age</b>				
Under 60	6	6	4.9%	6
60 - 79	80	80	65.6%	80
80+	36	36	29.5%	36
<b>By Gender</b>				
Male	113	113	92.6%	113
Female	9	9	7.4%	9

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	3	32	3
Deaths	3	37	3
Forced Discharges (see memo)	0	0	0
Other Discharges	0	4	0

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	14	363
Admission Applications Processed	6	76
Admission Applications Approved	6	75
Approved Applicants Admitted	3	32
Approved Applicants on Waitlist or Not Yet Ready for Admission	174	1964
Admissions Applications Denied	6	20

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	174	122	95.3%	38.1%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**Michigan Veteran Homes at Grand Rapids**  
**October 2024 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	54	44.3%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	64	52.5%	(of total SN census)	\$2,592.35
Dependent	4	3.3%	(of total SN census)	\$1,371.00
<b>TOTAL Skilled Nursing Census</b>	<b>122</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	5	1	6
60-79	76	4	80
80+	32	4	36
<b>TOTAL</b>	<b>113</b>	<b>9</b>	<b>122</b>
% of Census	Male	Female	Total
Under 60	83.3%	16.7%	4.9%
60-79	95.0%	5.0%	65.6%
80+	88.9%	11.1%	29.5%
<b>TOTAL</b>	<b>92.6%</b>	<b>7.4%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	1	0	1
KC	8	0	8
VNE	77	3	80
Peacetime	20	0	20
Gulf War	7	2	9
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>113</b>	<b>9</b>	<b>122</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	0.8%
KC	100.0%	0.0%	6.6%
VNE	96.3%	3.8%	65.6%
Cold War	100.0%	0.0%	16.4%
Gulf War	77.8%	22.2%	7.4%
Other			0.0%
Dependent	0.0%	100.0%	3.3%
<b>TOTAL</b>	<b>92.6%</b>	<b>7.4%</b>	<b>n/a</b>

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**

November 2024 Monthly Census Report

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	124	125	n/a	125
<b>By Care Setting</b>				
Skilled Nursing	124	125	100.0%	125
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	2	2	1.6%	2
KC	11	12	8.9%	12
VNE	90	89	72.6%	90
Cold War	11	12	8.9%	12
GWE	5	5	4.0%	5
Other	0	0	0.0%	0
Dependent	5	5	4.0%	5
<b>By Age</b>				
Under 60	5	5	4.0%	5
60 - 79	77	78	62.1%	78
80+	42	42	33.9%	42
<b>By Gender</b>				
Male	116	117	93.5%	117
Female	8	8	6.5%	8

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	1	30	1
Deaths	1	26	1.5
Forced Discharges (see memo)	0	0	0
Other Discharges	1	7	0.5

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	4	111
Admission Applications Processed	2	92
Admission Applications Approved	1	30
Approved Applicants Admitted	1	30
Approved Applicants on Waitlist or Not Yet Ready for Admission	18	225
Admissions Applications Denied	0	3

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	18	124	96.9%	97.7%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**  
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Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	78	62.9%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	41	33.1%	(of total SN census)	\$2,946.11
Dependent	5	4.0%	(of total SN census)	\$2,670.00
<b>TOTAL Skilled Nursing Census</b>	<b>124</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	4	1	5
60-79	75	2	77
80+	37	5	42
<b>TOTAL</b>	<b>116</b>	<b>8</b>	<b>124</b>
% of Census	Male	Female	Total
Under 60	80.0%	20.0%	4.0%
60-79	97.4%	2.6%	62.1%
80+	88.1%	11.9%	33.9%
<b>TOTAL</b>	<b>93.5%</b>	<b>6.5%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	2	0	2
KC	10	1	11
VNE	89	1	90
Peacetime	10	1	11
Gulf War	5	0	5
Other	0	0	0
Dependent	0	5	5
<b>TOTAL</b>	<b>116</b>	<b>8</b>	<b>124</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	1.6%
KC	90.9%	9.1%	8.9%
VNE	98.9%	1.1%	72.6%
Cold War	90.9%	9.1%	8.9%
Gulf War	100.0%	0.0%	4.0%
Other			0.0%
Dependent	0.0%	100.0%	4.0%
<b>TOTAL</b>	<b>93.5%</b>	<b>6.5%</b>	<b>n/a</b>

**Michigan Veteran Homes DJ Jacobetti**  
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Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	<b>104</b>	109	<i>n/a</i>	107
<b>By Care Setting</b>				
Skilled Nursing	102	107	98.1%	105
Domiciliary	2	2	1.9%	2
<b>By War Era of Service</b>				
WWII	5	5	4.8%	5
KC	11	13	10.6%	12
VNE	71	73	68.3%	72
Cold War	13	14	12.5%	14
GWE	1	1	1.0%	1
Other	0	0	0.0%	0
Dependent	3	3	2.9%	3
<b>By Age</b>				
Under 60	2	2	2.0%	2
60 - 79	46	50	45.1%	48
80+	54	57	52.9%	56
<b>By Gender</b>				
Male	99	104	95.2%	102
Female	5	5	4.8%	5

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	1	50	4.5
Deaths	6	33	4
Forced Discharges ( <i>see memo</i> )	0	0	0
Other Discharges	1	10	0.5

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	8	195
Admission Applications Processed	3	109
Admission Applications Approved	2	74
Approved Applicants Admitted	1	54
Approved Applicants on Waitlist or Not Yet Ready for Admission	87	1000
Admissions Applications Denied	0	7

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	126	87	102	81.0%	84.9%
Domiciliary Care	3	0	2	66.7%	66.7%

**Michigan Veteran Homes DJ Jacobetti**  
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<b>Detailed Census Data - By Care Setting</b>				
<b>Skilled Nursing Census</b>	<b>Total Census</b>	<b>%</b>		<b>Average I &amp; A</b>
70-100% or Adjudicated	40	39.2%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	59	57.8%	(of total SN census)	\$3,845.49
Dependent	3	2.9%	(of total SN census)	\$2,058.09
<b>TOTAL Skilled Nursing Census</b>	<b>102</b>	<b>98.1%</b>	(of TOTAL census)	n/a
<b>Domiciliary Census</b>	<b>Total Census</b>	<b>%</b>		<b>Average I &amp; A</b>
Veteran	2	100.0%	(of total Dom census)	\$1,531.50
Dependent	0		(of total Dom census)	\$0.00
<b>Total Domiciliary Census</b>	<b>2</b>	<b>1.9%</b>	(of TOTAL census)	n/a

<b>Detailed Census Data - Age &amp; Gender</b>			
<b>Census by Age &amp; Gender</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
Under 60	2	0	2
60-79	43	3	46
80+	52	2	54
<b>TOTAL</b>	<b>97</b>	<b>5</b>	<b>102</b>
<b>% of Census</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
Under 60	100.0%	0.0%	2.0%
60-79	93.5%	6.5%	45.1%
80+	96.3%	3.7%	52.9%
<b>TOTAL</b>	<b>95.1%</b>	<b>4.9%</b>	n/a

<b>Detailed Census Data - Era of Service &amp; Gender</b>			
<b>Census by EOS &amp; Gender</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
WWII	5	0	5
KC	11	0	11
VNE	70	1	71
Peacetime	12	1	13
Gulf War	1	0	1
Other	0	0	0
Dependent	0	3	3
<b>TOTAL</b>	<b>99</b>	<b>5</b>	<b>104</b>
<b>% of Census</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
WWII	100.0%	0.0%	4.8%
KC	100.0%	0.0%	10.6%
VNE	98.6%	1.4%	68.3%
Cold War	92.3%	7.7%	12.5%
Gulf War	100.0%	0.0%	1.0%
Other			0.0%
Dependent	0.0%	100.0%	2.9%
<b>TOTAL</b>	<b>95.2%</b>	<b>4.8%</b>	n/a

**Michigan Veteran Homes at Grand Rapids**  
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Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	121	122	n/a	122
<b>By Care Setting</b>				
Skilled Nursing	121	122	100.0%	122
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	1	1	0.8%	1
KC	10	8	8.3%	9
VNE	77	80	63.6%	79
Cold War	20	20	16.5%	20
GWE	9	9	7.4%	9
Other	0	0	0.0%	0
Dependent	4	4	3.3%	4
<b>By Age</b>				
Under 60	6	6	5.0%	6
60 - 79	77	80	63.6%	79
80+	38	36	31.4%	37
<b>By Gender</b>				
Male	112	113	92.6%	113
Female	9	9	7.4%	9

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	2	32	2.5
Deaths	3	37	3
Forced Discharges (see memo)	0	0	0
Other Discharges	1	4	0.5

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	20	363
Admission Applications Processed	2	76
Admission Applications Approved	2	75
Approved Applicants Admitted	2	32
Approved Applicants on Waitlist or Not Yet Ready for Admission	176	1964
Admissions Applications Denied	0	20

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	176	121	94.5%	95.3%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**Michigan Veteran Homes at Grand Rapids**  
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Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	55	45.5%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	62	51.2%	(of total SN census)	\$2,404.11
Dependent	4	3.3%	(of total SN census)	\$1,364.75
<b>TOTAL Skilled Nursing Census</b>	<b>121</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	5	1	6
60-79	73	4	77
80+	34	4	38
<b>TOTAL</b>	<b>112</b>	<b>9</b>	<b>121</b>
% of Census	Male	Female	Total
Under 60	83.3%	16.7%	5.0%
60-79	94.8%	5.2%	63.6%
80+	89.5%	10.5%	31.4%
<b>TOTAL</b>	<b>92.6%</b>	<b>7.4%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	1	0	1
KC	10	0	10
VNE	74	3	77
Peacetime	20	0	20
Gulf War	7	2	9
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>112</b>	<b>9</b>	<b>121</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	0.8%
KC	100.0%	0.0%	8.3%
VNE	96.1%	3.9%	63.6%
Cold War	100.0%	0.0%	16.5%
Gulf War	77.8%	22.2%	7.4%
Other			0.0%
Dependent	0.0%	100.0%	3.3%
<b>TOTAL</b>	<b>92.6%</b>	<b>7.4%</b>	<b>n/a</b>

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**

*December 2024 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	121	124	n/a	123
<b>By Care Setting</b>				
Skilled Nursing	121	124	100.0%	123
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	2	2	1.7%	2
KC	11	11	9.1%	11
VNE	88	90	72.7%	89
Peacetime	11	11	9.1%	11
Gulf War	5	5	4.1%	5
Other	0	0	0.0%	0
Dependent	4	5	3.3%	5
<b>By Age</b>				
Under 60	4	5	3.3%	5
60 - 79	76	77	62.8%	77
80+	41	42	33.9%	42
<b>By Gender</b>				
Male	114	116	94.2%	116
Female	7	8	5.8%	8

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	2	30	1.3
Deaths	5	26	2.7
Forced Discharges (see memo)	0	0	0.0
Other Discharges	0	7	0.3

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	10	111
Admission Applications Processed	0	92
Admission Applications Approved	2	30
Approved Applicants Admitted	2	30
Approved Applicants on Waitlist or Not Yet Ready for Admission	17	225
Admissions Applications Denied	0	3

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	17	121	94.5%	96.9%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**  
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Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	76	62.8%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	41	33.9%	(of total SN census)	\$2,970.99
Dependent	4	3.3%	(of total SN census)	\$2,670.00
<b>TOTAL Skilled Nursing Census</b>	<b>121</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census				
Domiciliary Census	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	3	1	4
60-79	74	2	76
80+	37	4	41
<b>TOTAL</b>	<b>114</b>	<b>7</b>	<b>121</b>
% of Census			
Census by Age & Gender	Male	Female	Total
Under 60	75.0%	25.0%	3.3%
60-79	97.4%	2.6%	62.8%
80+	90.2%	9.8%	33.9%
<b>TOTAL</b>	<b>94.2%</b>	<b>5.8%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	2	0	2
KC	10	1	11
VNE	87	1	88
Peacetime	10	1	11
Gulf War Era	5	0	5
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>114</b>	<b>7</b>	<b>121</b>
% of Census			
Census by EOS & Gender	Male	Female	Total
WWII	100.0%	0.0%	1.7%
KC	90.9%	9.1%	9.1%
VNE	98.9%	1.1%	72.7%
Cold War	90.9%	9.1%	9.1%
Gulf War	100.0%	0.0%	4.1%
Other			0.0%
Dependent	0.0%	100.0%	3.3%
<b>TOTAL</b>	<b>94.2%</b>	<b>5.8%</b>	<b>n/a</b>

**Michigan Veteran Homes DJ Jacobetti**  
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Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	<b>106</b>	104	<i>n/a</i>	106
<b>By Care Setting</b>				
<i>Skilled Nursing</i>	104	102	98.1%	104
<i>Domiciliary</i>	2	2	1.9%	2
<b>By War Era of Service</b>				
<i>WWII</i>	5	5	4.7%	5
<i>KC</i>	10	11	9.4%	11
<i>VNE</i>	74	71	69.8%	73
<i>Cold War</i>	13	13	12.3%	13
<i>GWE</i>	1	1	0.9%	1
<i>Other</i>	0	0	0.0%	0
<i>Dependent</i>	3	3	2.8%	3
<b>By Age</b>				
<i>Under 60</i>	2	2	1.9%	2
<i>60 - 79</i>	52	46	49.1%	49
<i>80+</i>	52	54	49.1%	54
<b>By Gender</b>				
<i>Male</i>	101	99	95.3%	101
<i>Female</i>	5	5	4.7%	5

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
<b>Admissions</b>	6	50	5.0
<b>Deaths</b>	1	33	3.0
<b>Forced Discharges</b> ( <i>see memo</i> )	0	0	0.0
<b>Other Discharges</b>	0	10	0.3

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
<b>Financial Reassessments Performed</b>	5	195
<b>Admission Applications Processed</b>	14	109
<b>Admission Applications Approved</b>	6	74
<i>Approved Applicants Admitted</i>	6	54
<i>Approved Applicants on Waitlist or Not Yet Ready for Admission</i>	91	1000
<b>Admissions Applications Denied</b>	1	7

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
<b>Skilled Nursing</b>	126	91	104	82.5%	81.0%
<b>Domiciliary Care</b>	3	0	2	66.7%	66.7%

**Michigan Veteran Homes DJ Jacobetti**  
**December 2024 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%	Average I & A	
70-100% or Adjudicated	44	42.3%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	57	54.8%	(of total SN census)	\$3,686.66
Dependent	3	2.9%	(of total SN census)	\$2,058.09
<b>TOTAL Skilled Nursing Census</b>	<b>104</b>	<b>98.1%</b>	(of TOTAL census)	n/a
Domiciliary Census	Total Census	%	Average I & A	
Veteran	2	100.0%	(of total Dom census)	\$1,531.50
Dependent	0		(of total Dom census)	NA
<b>Total Domiciliary Census</b>	<b>2</b>	<b>1.9%</b>	(of TOTAL census)	n/a

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	2	0	2
60-79	49	3	52
80+	50	2	52
<b>TOTAL</b>	<b>101</b>	<b>5</b>	<b>106</b>
% of Census	Male	Female	Total
Under 60	100.0%	0.0%	1.9%
60-79	94.2%	5.8%	49.1%
80+	96.2%	3.8%	49.1%
<b>TOTAL</b>	<b>95.3%</b>	<b>4.7%</b>	n/a

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	5	0	5
KC	10	0	10
VNE	73	1	74
Peacetime	12	1	13
Gulf War	1	0	1
Other	0	0	0
Dependent	0	3	3
<b>TOTAL</b>	<b>101</b>	<b>5</b>	<b>106</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	4.7%
KC	100.0%	0.0%	9.4%
VNE	98.6%	1.4%	69.8%
Cold War	92.3%	7.7%	12.3%
Gulf War	100.0%	0.0%	0.9%
Other			0.0%
Dependent	0.0%	100.0%	2.8%
<b>TOTAL</b>	<b>95.3%</b>	<b>4.7%</b>	n/a

**Michigan Veteran Homes at Grand Rapids**  
*December 2024 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	117	121	n/a	120
<b>By Care Setting</b>				
Skilled Nursing	117	121	100.0%	120
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	1	1	0.9%	1
KC	9	10	7.7%	9
VNE	76	77	65.0%	78
Peacetime	19	20	16.2%	20
Gulf War	8	9	6.8%	9
Other	0	0	0.0%	0
Dependent	4	4	3.4%	4
<b>By Age</b>				
Under 60	6	6	5.1%	6
60 - 79	74	77	63.2%	77
80+	37	38	31.6%	37
<b>By Gender</b>				
Male	109	112	93.2%	111
Female	8	9	6.8%	9

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	1	32	2.0
Deaths	5	37	3.7
Forced Discharges (see memo)	0	0	0.0
Other Discharges	0	4	0.3

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	68	363
Admission Applications Processed	2	76
Admission Applications Approved	2	75
Approved Applicants Admitted	1	32
Approved Applicants on Waitlist or Not Yet Ready for Admission	171	1964
Admissions Applications Denied	6	20

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	171	117	91.4%	94.5%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**Michigan Veteran Homes at Grand Rapids**  
**December 2024 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%	Average I & A	
70-100% or Adjudicated	55	47.0%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	58	49.6%	(of total SN census)	\$2,403.49
Dependent	4	3.4%	(of total SN census)	\$1,364.75
<b>TOTAL Skilled Nursing Census</b>	<b>117</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census				
Total Census	%	Average I & A		
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	5	1	6
60-79	71	3	74
80+	33	4	37
<b>TOTAL</b>	<b>109</b>	<b>8</b>	<b>117</b>
% of Census	Male	Female	Total
Under 60	83.3%	16.7%	5.1%
60-79	95.9%	4.1%	63.2%
80+	89.2%	10.8%	31.6%
<b>TOTAL</b>	<b>93.2%</b>	<b>6.8%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	1	0	1
KC	9	0	9
VNE	74	2	76
Peacetime	19	0	19
Gulf War Era	6	2	8
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>109</b>	<b>8</b>	<b>117</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	0.9%
KC	100.0%	0.0%	7.7%
VNE	97.4%	2.6%	65.0%
Cold War	100.0%	0.0%	16.2%
Gulf War	75.0%	25.0%	6.8%
Other			0.0%
Dependent	0.0%	100.0%	3.4%
<b>TOTAL</b>	<b>93.2%</b>	<b>6.8%</b>	<b>n/a</b>

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**

*January 2025 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	123	121	n/a	123
<b>By Care Setting</b>				
Skilled Nursing	123	121	100.0%	123
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	3	2	2.4%	2
KC	10	11	8.1%	11
VNE	90	88	73.2%	89
Peacetime	11	11	8.9%	11
Gulf War	5	5	4.1%	5
Other	0	0	0.0%	0
Dependent	4	4	3.3%	5
<b>By Age</b>				
Under 60	4	4	3.3%	5
60 - 79	80	76	65.0%	78
80+	39	41	31.7%	41
<b>By Gender</b>				
Male	115	114	93.5%	116
Female	8	7	6.5%	8

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	5	33	2.3
Deaths	3	29	2.8
Forced Discharges (see memo)	0	0	0.0
Other Discharges	0	6	0.3

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	35	119
Admission Applications Processed	10	89
Admission Applications Approved	6	31
Approved Applicants Admitted	5	33
Approved Applicants on Waitlist or Not Yet Ready for Admission	17	223
Admissions Applications Denied	1	4

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	17	123	96.1%	94.5%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**MICHIGAN VETERAN HOMES AT CHESTERFIELD TOWNSHIP**  
*January 2025 Monthly Census Report*

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	80	65.0%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	39	31.7%	(of total SN census)	\$2,950.38
Dependent	4	3.3%	(of total SN census)	\$2,775.50
<b>TOTAL Skilled Nursing Census</b>	<b>123</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census				
	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	3	1	4
60-79	78	2	80
80+	35	4	39
<b>TOTAL</b>	<b>116</b>	<b>7</b>	<b>123</b>
% of Census	Male	Female	Total
Under 60	75.0%	25.0%	3.3%
60-79	97.5%	2.5%	65.0%
80+	89.7%	10.3%	31.7%
<b>TOTAL</b>	<b>94.3%</b>	<b>5.7%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	2	1	3
KC	9	1	10
VNE	89	1	90
Peacetime	10	1	11
Gulf War Era	5	0	5
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>115</b>	<b>8</b>	<b>123</b>
% of Census	Male	Female	Total
WWII	66.7%	33.3%	2.4%
KC	90.0%	10.0%	8.1%
VNE	98.9%	1.1%	73.2%
Cold War	90.9%	9.1%	8.9%
Gulf War	100.0%	0.0%	4.1%
Other			0.0%
Dependent	0.0%	100.0%	3.3%
<b>TOTAL</b>	<b>93.5%</b>	<b>6.5%</b>	<b>n/a</b>

**Michigan Veteran Homes DJ Jacobetti**  
*January 2025 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	<b>108</b>	106	<i>n/a</i>	107
<b>By Care Setting</b>				
<i>Skilled Nursing</i>	106	104	98.1%	105
<i>Domiciliary</i>	2	2	1.9%	2
<b>By War Era of Service</b>				
<i>WWII</i>	5	5	4.6%	5
<i>KC</i>	10	10	9.3%	11
<i>VNE</i>	73	74	67.6%	73
<i>Peacetime</i>	16	13	14.8%	14
<i>Gulf War</i>	1	1	0.9%	1
<i>Other</i>	0	0	0.0%	0
<i>Dependent</i>	3	3	2.8%	3
<b>By Age</b>				
<i>Under 60</i>	2	2	1.9%	2
<i>60 - 79</i>	53	52	49.1%	50
<i>80+</i>	53	52	49.1%	54
<b>By Gender</b>				
<i>Male</i>	103	101	95.4%	102
<i>Female</i>	5	5	4.6%	5

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
<b>Admissions</b>	8	53	5.8
<b>Deaths</b>	5	34	3.5
<b>Forced Discharges</b> ( <i>see memo</i> )	0	0	0.0
<b>Other Discharges</b>	1	11	0.5

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
<b>Financial Reassessments Performed</b>	93	201
<b>Admission Applications Processed</b>	12	113
<b>Admission Applications Approved</b>	10	77
<i>Approved Applicants Admitted</i>	8	56
<i>Approved Applicants on Waitlist or Not Yet Ready for Admission</i>	96	1020
<b>Admissions Applications Denied</b>	0	6

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
<b>Skilled Nursing</b>	126	96	106	84.1%	82.5%
<b>Domiciliary Care</b>	3	0	2	66.7%	66.7%

**Michigan Veteran Homes DJ Jacobetti**  
**January 2025 Monthly Census Report**

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	45	42.5%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	58	54.7%	(of total SN census)	\$3,856.70
Dependent	3	2.8%	(of total SN census)	\$2,058.09
<b>TOTAL Skilled Nursing Census</b>	<b>106</b>	<b>98.1%</b>	(of TOTAL census)	n/a
Domiciliary Census				
	Total Census	%		Average I & A
Veteran	2	100.0%	(of total Dom census)	\$1,570.00
Dependent	0		(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>2</b>	<b>1.9%</b>	(of TOTAL census)	n/a

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	2	0	2
60-79	50	3	53
80+	51	2	53
<b>TOTAL</b>	<b>103</b>	<b>5</b>	<b>108</b>
% of Census	Male	Female	Total
Under 60	100.0%	0.0%	1.9%
60-79	94.3%	5.7%	49.1%
80+	96.2%	3.8%	49.1%
<b>TOTAL</b>	<b>95.4%</b>	<b>4.6%</b>	n/a

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	5	0	5
KC	10	0	10
VNE	72	1	73
Peacetime	15	1	16
Gulf War Era	1	0	1
Other	0	0	0
Dependent	0	3	3
<b>TOTAL</b>	<b>103</b>	<b>5</b>	<b>108</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	4.6%
KC	100.0%	0.0%	9.3%
VNE	98.6%	1.4%	67.6%
Peacetime	93.8%	6.3%	14.8%
Gulf War	100.0%	0.0%	0.9%
Other			0.0%
Dependent	0.0%	100.0%	2.8%
<b>TOTAL</b>	<b>95.4%</b>	<b>4.6%</b>	n/a

**Michigan Veteran Homes at Grand Rapids**  
*January 2025 Monthly Census Report*

Facility Census Data				
	Facility Census on Last Day of:		% of EOM Census Current Month	End of Month Average YTD
	Current Month	Last Month		
<b>TOTAL CENSUS</b>	120	117	n/a	120
<b>By Care Setting</b>				
Skilled Nursing	120	117	100.0%	120
Domiciliary	n/a	n/a	n/a	n/a
<b>By War Era of Service</b>				
WWII	2	1	1.7%	1
KC	9	9	7.5%	9
VNE	77	76	64.2%	78
Peactime	19	19	15.8%	20
Gulf War	9	8	7.5%	9
Other	0	0	0.0%	0
Dependent	4	4	3.3%	4
<b>By Age</b>				
Under 60	5	6	4.2%	6
60 - 79	79	74	65.8%	78
80+	36	37	30.0%	37
<b>By Gender</b>				
Male	112	109	93.3%	112
Female	8	8	6.7%	9

Admissions, Deaths, Discharges During Month			
	Current Month	Total YTD	Monthly Avg YTD
Admissions	6	36	3.0
Deaths	3	35	3.5
Forced Discharges (see memo)	0	0	0.0
Other Discharges	0	4	0.3

Resident Assessment & Admissions Application Processing		
	Current Month	Total YTD
Financial Reassessments Performed	70	365
Admission Applications Processed	7	77
Admission Applications Approved	7	76
Approved Applicants Admitted	6	36
Approved Applicants on Waitlist or Not Yet Ready for Admission	166	1985
Admissions Applications Denied	0	18

Occupancy & Waitlist Rates					
	Avail. Beds	Waitlist	EOM Occupied	EOM % - Current	EOM % - Previous
Skilled Nursing	128	166	120	93.8%	91.4%
Domiciliary Care	n/a	n/a	n/a	n/a	n/a

**Michigan Veteran Homes at Grand Rapids**  
*January 2025 Monthly Census Report*

Detailed Census Data - By Care Setting				
Skilled Nursing Census	Total Census	%		Average I & A
70-100% or Adjudicated	57	47.5%	(of total SN census)	n/a
Veteran (not 70-100 SCD)	59	49.2%	(of total SN census)	\$2,529.92
Dependent	4	3.3%	(of total SN census)	\$1,397.75
<b>TOTAL Skilled Nursing Census</b>	<b>120</b>	<b>100.0%</b>	(of TOTAL census)	n/a
Domiciliary Census				
	Total Census	%		Average I & A
Veteran	n/a	n/a	(of total Dom census)	n/a
Dependent	n/a	n/a	(of total Dom census)	n/a
<b>Total Domiciliary Census</b>	<b>n/a</b>	<b>n/a</b>	(of TOTAL census)	<b>n/a</b>

Detailed Census Data - Age & Gender			
Census by Age & Gender	Male	Female	Total
Under 60	4	1	5
60-79	76	3	79
80+	32	4	36
<b>TOTAL</b>	<b>112</b>	<b>8</b>	<b>120</b>
% of Census	Male	Female	Total
Under 60	80.0%	20.0%	4.2%
60-79	96.2%	3.8%	65.8%
80+	88.9%	11.1%	30.0%
<b>TOTAL</b>	<b>93.3%</b>	<b>6.7%</b>	<b>n/a</b>

Detailed Census Data - Era of Service & Gender			
Census by EOS & Gender	Male	Female	Total
WWII	2	0	2
KC	9	0	9
VNE	75	2	77
Peacetime	19	0	19
Gulf War Era	7	2	9
Other	0	0	0
Dependent	0	4	4
<b>TOTAL</b>	<b>112</b>	<b>8</b>	<b>120</b>
% of Census	Male	Female	Total
WWII	100.0%	0.0%	1.7%
KC	100.0%	0.0%	7.5%
VNE	97.4%	2.6%	64.2%
Peacetime	100.0%	0.0%	15.8%
Gulf War	77.8%	22.2%	7.5%
Other			0.0%
Dependent	0.0%	100.0%	3.3%
<b>TOTAL</b>	<b>93.3%</b>	<b>6.7%</b>	<b>n/a</b>

## Michigan Veteran Homes Staffing Report

<i>MVH at Chesterfield Township</i>	October 2024	November 2024	December 2024
<b>I. Census</b>			
Skilled Nursing Census (Monthly Average)	123.42	123	119
Domiciliary Census (Monthly Average)	0	0	0
<b>II. Patient Care Hours</b>			
Skilled Nursing PPD (Monthly Average)	7.16	7.33	8.3
Licensed Nursing PPD (Monthly Average)	1.818	1.83	2.5
CENA PPD (Monthly Average)	5.342	5.5	5.8
# of Time Below VA Min. 2.5 PPD	0	0	0

<i>MVH D.J. Jacobetti</i>	October 2024	November 2024	December 2024
<b>I. Census</b>			
Skilled Nursing Census (Monthly Average)	102.96	100.2	102.19
Domiciliary Census (Monthly Average)	2	2	2
<b>II. Patient Care Hours</b>			
Skilled Nursing PPD (Monthly Average)	4.81	4.812	4.66
Licensed Nursing PPD (Monthly Average)	1.951	1.965	1.951
CENA PPD (Monthly Average)	2.859	2.847	2.709
# of Time Below VA Min. 2.5 PPD	0	0	0

<i>MVH at Grand Rapids</i>	October 2024	November 2024	December 2024
<b>I. Census</b>			
Skilled Nursing Census (Monthly Average)	120	119	118
Domiciliary Census (Monthly Average)	0	0	0
<b>II. Patient Care Hours</b>			
Skilled Nursing PPD (Monthly Average)	6.91	6.89	6.84
Licensed Nursing PPD (Monthly Average)	2.18	2.01	1.93
CENA PPD (Monthly Average)	4.73	4.88	4.91
# of Time Below VA Min. 2.5 PPD	0	0	0



# Michigan Veteran Homes Vaccination Rates Q1 FY2025

<b>MVH at Chesterfield Township</b>		October 24	November 24	December 24
<b>Members:</b>	Vaccinated Against Influenza	93.6%	94%	68%
	Vaccinated Against COVID-19	0%	72.5%	80%
<b>Staff:</b>	Vaccinated Against Influenza	19%	21%	21%
	Vaccinated Against COVID-19	0.3%	0.3%	0.3%

<b>MVH at D.J. Jacobetti</b>		October 24	November 24	December 24
<b>Members:</b>	Vaccinated Against Influenza	65.1%	83%	83%
	Vaccinated Against COVID-19	0%	1%	1%
<b>Staff:</b>	Vaccinated Against Influenza	44.4%	50%	50%
	Vaccinated Against COVID-19	1%	1%	1%

<b>MVH at Grand Rapids</b>		October 24	November 24	December 24
<b>Members:</b>	Vaccinated Against Influenza	92%	80%	81%
	Vaccinated Against COVID-19	80%	76%	76%
<b>Staff:</b>	Vaccinated Against Influenza	38%	38%	40%
	Vaccinated Against COVID-19	5%	5%	8%



STATE OF MICHIGAN  
**MICHIGAN VETERAN HOMES**  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ANNE ZERBE  
EXECUTIVE DIRECTOR

October 29, 2024

The Honorable Gretchen Whitmer  
Governor of Michigan  
P.O. Box 30013  
Lansing Michigan

Dear Governor Whitmer,

SUBJECT: PA 351 of 2020 – FY24 Fourth Quarter Reporting

Attached please find the quarterly report from the Michigan Veteran Homes at Chesterfield Township, the Michigan Veteran Homes D.J. Jacobetti, and the Michigan Veteran Homes at Grand Rapids, pursuant to Public Act 351 of 2020, MCL 36.112a.

If you have any questions regarding this report, please contact Beth Simonton-Kramer at 616.498.5357.

Sincerely,

A handwritten signature in black ink that reads "Anne Zerbe".

Anne Zerbe  
Executive Director, MVH

Attachment

cc: Senate Committee on Veterans and Emergency Services  
Senate Appropriations Subcommittee on Military, Veterans, State Police  
House Committee on Military, Veterans and Homeland Security  
House Appropriations Subcommittee on Military and Veterans and State Police  
Major General Paul D. Rogers, DMVA Director

**MVH Quarterly Report**

**Quarter 4, FY 2024**

**Pursuant to Public Act 560 of 2016 (as amended by PA 351 of 2020), MCL 36.112(a)**

Sec. 9 (1) No later than January 1, April 1, July 1, and October 1 of each year, the Michigan Veteran Homes, its successor agency, or the department of military and veterans’ affairs shall report in writing all the following information concerning any state veterans’ facility to the governor, the senate and house committees on veterans’ affairs, and the senate and house appropriations subcommittees for the department of military and veterans’ affairs:

**(a) Staffing levels and the extent to which staffing levels do or do not meet industry standards.**

38 CFR Part 51.130(d) requires a minimum of 2.5 hours per-patient delivered (PPD). Actual total direct care PPD for FY24 Quarter 4:

Michigan Veteran Homes at Chesterfield Township (MVHCT)	7.78 PPD
Michigan Veteran Homes D.J. Jacobetti (MVHDJJ)	4.69 PPD
Michigan Veteran Homes at Grand Rapids (MVHGR)	6.77 PPD

**(b) Number of patient complaints<sup>1</sup>, average time to review a complaint and respond, and response to each complaint.**

<u>Home</u>	<u>Number of Complaints</u>	<u>Average Time to Review and Respond</u>
MVHCT	19	7.5 days
MVHDJJ	3	3.0 days
MVHGR	55	3.4 days

**MVHCT Responses:**

1. Member’s dentures were located.
2. Member’s hearing aid was located.
3. Member’s hearing aid was located.
4. Member’s glasses were located.
5. Member’s socks were located.
6. Member’s money was not missing after all.
7. Member’s hat was located.
8. Member’s wallet was located.
9. Member’s phone charging cord was replaced by family and labelled for identification.
10. Member’s glasses were located.

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<sup>1</sup> Note. Complaints are issues raised by members that do not rise to the level of an allegation of abuse or neglect. Examples of complaints include missing items, personal preferences, availability of services, etc. Information regarding allegations is provided in the monthly Abuse and Neglect Report.

11. Member's glasses were located and tagged.
12. Member provided with additional bed pads, labeled.
13. Member's phone was located.
14. Member's wallet and debit card were located.
15. Member's wallet was located.
16. Member's blanket was located.
17. Member's saltshaker was located. Member's cup was not located.
18. Member was provided new hearing aids.
19. Member's blanket was not located. Member will replace.

MVHDJJ Responses:

1. Member missing lower partial; does not want to replace.
2. Member's blanket and two shirts were located.
3. Member's clothing was replaced.

MVHGR Responses:

1. Wallet found.
2. Bill paid.
3. Item not missing.
4. IDT and physician updated plan of care; staff educated.
5. RP will be notified of appointments; care plan updated.
6. Staff re-educated.
7. Item found.
8. Updated food preferences.
9. Updated plan of care; staff educated.
10. Staff education
11. Two out of three items found, RP satisfied.
12. Claim for reimbursement for laundry items not returned.
13. New contracted staff terminated.
14. Care plan updated to reflect members preferences.
15. Item found and care plan updated.
16. Missing laundry items found or replaced.
17. Care Plan updated, member and staff educated.
18. Lost clothing item replaced.
19. Medication times changed per request.
20. Volunteer removed from facility.
21. Missing item found.
22. Meal delivery preference updated.
23. Staff education.
24. Missing laundry items replaced.
25. Member care plan updated.
26. Missing glasses found and returned to member.
27. Care plan updated.

28. Misplaced item reordered and replaced.
29. Appointment procedure updated for member.
30. Missing item found and returned.
31. Care assignment communication reviewed.
32. Results from outside appointment reviewed with member.
33. Ceiling lift repaired.
34. Staff education, care plan updated.
35. Member canceled appointment rescheduled.
36. Member and staff education.
37. Concern retracted by member.
38. RP updated member's authorization to spend funds.
39. Lost member keys replaced.
40. Make up appointment and transportation confirmed with RP.
41. Member reporting missing items from old home several years ago.
42. Missing item found and returned.
43. Staff education.
44. Dentist has been replaced by contractor.
45. Member and staff education.
46. Lost book was replaced.
47. Audiology appointment scheduled to replace missing hearing aide.
48. Care plan updated.
49. Missing wallet returned from laundry.
50. Care Plan updated.
51. Member scheduled for requested services.
52. Member's hearing aids replaced.
53. Missing item replaced.
54. Member lost debit card cancelled and replaced.
55. Staff education.

**(c) Timeliness of distribution of pharmaceutical drugs.**

**MVHCT** - Pharmaceutical drugs are delivered to medication rooms and medication carts at the Home every two weeks for distribution for the following two-week period.

**MVHDJJ** - Pharmaceutical drugs are delivered to medication rooms and medication carts at the Home every two weeks for distribution for the following two-week period.

**MVHGR** – Pharmaceutical drugs are delivered the nursing units and medication carts at the Home every two weeks for distribution for the following two-week period.

**(d) Security provided for pharmaceutical drugs in the facility, including the title of the individuals providing the security.**

**MVHCT** - Pharmaceutical drugs are locked in the C2 safe within the pharmacy, to which only the licensed pharmacist listed below has sole access. The pharmacy requires a two-means of authentication in efforts to enter the pharmacy. Narcotics are double locked within the pharmacy. On the units, the medication rooms are locked, as are medication carts, and narcotics are double locked. The medication nurse on duty on any given shift is the only employee with the key to medications on the household.

A PYXIS Medication Station, located within the wellness center storage room for after-hours and weekend usage, only. The Wellness Center after-hours required key-card access, which is controlled, and a pre-determined group of Nurse Managers have specific key-card access to enter said storage room where the PYXIS is located.

The PYXIS station is accessed via individual sign on with password. There is also a security camera located in the Wellness Center in additional to the storage room.

Returned medications to the pharmacy are handled via nursing and documented on a form. Returned medications are restocked or destroyed as appropriate. Returned medications are logged into the QS1 pharmacy system.

The following individual provide the security and oversight of pharmaceutical drugs:

Kristie Schemansky, PharmD.

**MVHDJJ** - Pharmaceutical drugs are locked in the pharmacy, to which only the licensed pharmacists listed below have access. The pharmacy is equipped with an alarm. Narcotics are double locked within the pharmacy. On the unit(s), the medication rooms are locked, as are medication carts, and narcotics are double locked. The medication nurse on duty on any given shift is the only employee with the key to medications on the unit(s).

The following individuals provide the security and oversight of pharmaceutical drugs:

Brad Harvala, Pharmacy Director  
Lori Krueger, Pharmacist  
Barb Salmela, Pharmacist

**MVHGR**- Pharmaceutical drugs are locked in the pharmacy, to which only the licensed pharmacists listed below have access. The pharmacy is equipped with an alarm. Narcotics are double locked within the pharmacy. On the units, the medication rooms are locked, as are medication carts, and narcotics are double locked. The medication nurse on duty on any given shift is the only employee with the key to medications on the units(s).

A PYXIS Medication Station, located in the pharmacy entry way is available after hours. The front entry is only accessible via key card access when the pharmacy is closed. The PYXIS station is accessed via fingerprint or individual sign on with password. There is also a security camera located in the entry way.

The unit medication rooms are locked. Medication carts are locked with key access only and narcotics are double locked.

Returned medications to the pharmacy are handled via nursing and documented on a form. Returned medications are restocked or destroyed as appropriate. Returned medications are logged into the QS1 pharmacy system.

The following individuals provide the security and oversight of pharmaceutical drugs:

Louis Ciaramello, RPh

**(e) How patient money is accounted for, including the name and title of the individual who supervises patient spending accounts.**

**MVHCT** - Patient monies *held by the facility* are accounted for using generally accepted accounting principles, with interest applied to the balances monthly.

The following individual supervises patient spending accounts:

Sara Brys, Business Office Manager

**MVHDJJ** - Patient monies *held by the facility* are accounted for using generally accepted accounting principles, with interest applied to the balances monthly.

The following individual supervises patient spending accounts:

Sean Depuydt, Business Office Manager

**MVHGR** - Patient monies *held by the facility* are accounted for using generally accepted accounting principles, with interest applied to the balances monthly.

The following individual supervises patient spending accounts:

Ashley Rawlings, Business Office Manager

**(f) Number of facility resident deaths that occurred since the most recent report.**

MVHCT	5 facility deaths
MVHDJJ	12 facility deaths
MVHGR	10 facility deaths

**(2) The department of military and veterans' affairs shall place the reports required under subsection (1) on its public website in a prominent and conspicuous manner.**

These reports are published at [www.michigan.gov/mvh/about/legislation](http://www.michigan.gov/mvh/about/legislation)



STATE OF MICHIGAN  
**MICHIGAN VETERAN HOMES**  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ANNE ZERBE  
EXECUTIVE DIRECTOR

January 15, 2025

Governor Gretchen Whitmer  
State of Michigan  
Romney Building  
Lansing, MI 48909

Dear Governor,

SUBJECT: PA 351 of 2020 – FY '25 First Quarter Reporting

Attached please find the quarterly report from the Michigan Veteran Homes at Chesterfield Township, the Michigan Veteran Homes D.J. Jacobetti, and the Michigan Veteran Homes at Grand Rapids, pursuant to Public Act 351 of 2020, MCL 36.112a.

If you have any questions regarding this report, please contact Beth Simonton-Kramer at 616.498.5357.

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A handwritten signature in black ink that reads "Anne Zerbe".

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Major General Paul D. Rogers, DMVA Director

**MVH Quarterly Report**

**Quarter 1, FY 2025**

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**(a) Staffing levels and the extent to which staffing levels do or do not meet industry standards.**

38 CFR Part 51.130(d) requires a minimum of 2.5 hours per-patient delivered (PPD). Actual total direct care PPD for FY24 Quarter 4:

Michigan Veteran Homes at Chesterfield Township (MVHCT)	7.5 PPD
Michigan Veteran Homes D.J. Jacobetti (MVHDJJ)	4.76 PPD
Michigan Veteran Homes at Grand Rapids (MVHGR)	6.88 PPD

**(b) Number of patient complaints, average time to review a complaint and respond, and response to each complaint.**

<u>Home</u>	<u>Number of Complaints</u>	<u>Average Time to Review and Respond</u>
MVHCT	28	3.28 days
MVHDJJ	9	3.25 days
MVHGR	28	4.64 days

**MVHCT Responses:**

1. Headphone were replaced
2. Hearing aid found
3. Hearing aid found
4. Money is not lost
5. Member wanted to speak with agency manager.
6. Member was reimbursed for pajamas
7. Cane was found and returned to member
8. Wallet was found and returned to member
9. Cane was found and returned to member

10. Hearing aid was found and returned to member
11. Member did not want to be reimbursed for two blankets
12. Denture was replaced
13. Ring was found and returned to member
14. Clothing was found and returned
15. Headset and cord were replaced to member
16. Denture was found and returned to member
17. Supplements were approved for member for have.
18. 2 pins on hat remain missing; unable to determine if they are lost. Member currently has two pins on his hat.
19. Clothing items were found and returned to member
20. Hearing aides were replaced by VA
21. Wallet was found and returned to member
22. Honey mustard was replaced
23. Food was discarded after 3 days; education to member about policy/procedure
24. Wallet was found and returned to member
25. Hearing aid was found and returned to member
26. Dentures were found and returned to member
27. Hearing aid was replaced for member
28. Glasses were replaced for member

MVHDJJ Responses:

1. Member's wedding band located
2. Member's CD's located or replaced
3. Member's glasses returned
4. Cost of member's shirt reimbursed
5. Member Wi-Fi repaired
6. Staff will wake member for honor walks
7. Elevator maintenance company called out for repairs
8. Member provided correct smoking time
9. Members met with dietary to discuss spaghetti

MVHGR Responses:

1. Education completed.
2. Education completed.
3. Missing socks were replaced.
4. Wallet was located.
5. Audiology appointment scheduled to replace missing hearing aid.

6. Some of missing shirts replaced and member was not worried about remaining items.
7. Claim for reimbursement was completed.
8. Wallet was returned from laundry.
9. Hearing aid was located.
10. Education completed.
11. Caregiver was removed from MVH-GR contract.
12. Ring was located.
13. Declined wanting to file a claim for reimbursement.
14. Investigation into noise is ongoing.
15. Phone was located.
16. Wallet was returned from laundry. Education completed.
17. Dental appointment scheduled.
18. Declined wanting to file a claim for reimbursement. Some clothing items returned.
19. Education completed.
20. RP stated no money is missing and to close concern form.
21. Dental appointment scheduled.
22. Care plan updated and education completed.
23. Dental appointment scheduled. Replacement shower bed obtained. Alternatives offered.
24. Most clothing items were returned.
25. Pending resolution.
26. RP stated concern form could be closed.
27. Pending resolution.
28. Pending resolution.

**(c) Timeliness of distribution of pharmaceutical drugs.**

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**(f) Number of facility resident deaths that occurred since the most recent report.**

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MVHDJJ	9 facility deaths
MVHGR	11 facility deaths

**(2) The department of military and veterans' affairs shall place the reports required under subsection (1) on its public website in a prominent and conspicuous manner.**

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P.O. Box 30036  
Lansing, Michigan 48909-7536  
Phone: (517) 373-1347

Website: <https://council.legislature.mi.gov/VeteranOmbudsman/Index>

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**Michigan Veterans' Facility Ombudsman  
Semi-Annual Report  
May 8, 2024 to November 7, 2024**

The Michigan Veterans' Facility Ombudsman (MVFO) was created by [Public Act 198, 2016](#). The office of the MVFO is created within the Legislative Council, a nonpartisan legislative agency.

The MVFO mission is to ensure all residents of Michigan Veterans' Homes are treated with dignity and respect and that their concerns are heard and resolved. Our ability to obtain, interpret, and explain veteran policies and procedures and our knowledge of the veteran system uniquely position the MVFO office to serve the Legislature, Veterans, Facility Members, and citizens of Michigan.

This semi-annual report is submitted to the Legislative Council, the Board of Managers, and the Michigan Legislature pursuant to the provisions of [MCL 4.782 in Public Act 198, 2016](#), which states, "The ombudsman shall submit to the council, the board of managers, and the legislature a semi-annual report on the conduct of the office."

**Michigan Veterans' Home Locations:**

- [Michigan Veteran Homes at Chesterfield Township](#)
- [Michigan Veteran Homes D.J. Jacobetti](#)
- [Michigan Veteran Homes at Grand Rapids](#)

**Authority:**

- Under [MCL 4.775 in Public Act 198, 2016](#), the MVFO office has access to all Michigan Veteran Homes and the information, records, and documents in possession of the facilities, including, but not limited to, veterans' facility member medical health records, mental health records, and mortality and morbidity records.
- The MVFO office investigates concerns filed by legislators, veterans' facility residents or their family members of allegations of violations of state law or issues concerning an administrative act, medical treatment of a veterans' facility resident, and conditions at a facility that pose a significant health or safety issue.
- The MVFO office serves as a point person to legislative offices regarding inquiries related to constituent questions and visits veterans' facilities on a regular basis, interacting with the veteran residents and facility staff.

**MVFO Funding:**

- In FY 2025, \$368,600 was appropriated through its traditional funding source in the Legislature's section of the general government budget.

**MVFO Process:**

The MVFO office receives correspondence that may be general in nature, but where sufficient information or specific complaints against a Michigan Veterans' Home about an administrative act, medical treatment of a resident veteran, or a condition existing at a facility that poses a significant health or safety issue for which there is no effective administrative remedy or is alleged to be contrary to law or departmental policy are given, the MVFO office will commence an initial inquiry to determine if an investigation is warranted.

The MVFO office initial inquiry includes reviewing relevant records and policies as well as correspondence with the Home's administrator and their staff members, and other individuals who are familiar with the issue presented in the inquiry.

Under [MCL 4.774 in Public Act 198, 2016](#), the MVFO office may commence an investigation if the initial inquiry results in further questions about an administrative act, medical treatment of a resident veteran, or a condition existing at a facility that pose a significant health or safety issue for which there is no effective administrative remedy or is alleged to be contrary to law or departmental policy.

Upon conclusion of an investigation, the MVFO office will prepare a written report with findings and recommendations to facilitate resolution of issues to the constituent, Home Administrator, and the Michigan Department of Military and Veterans Affairs.

**Inquiries:**

In the period covering this report, the MVFO office received two (2) inquiries.

- 1) In August, Senator Huizenga's office requested information regarding an investigation that the MVFO office completed in June 2023 at the Grand Rapids Veteran Home. This inquiry was prompted by a request from a constituent. The MVFO office provided the Senator's office with information about the case and the recommendations made at the conclusion of the investigation. The Senator's office appreciated this information, and no further action was needed.
- 2) In October, a staff member at the Chesterfield Township Veteran Home contacted the MVFO office regarding a scabies outbreak that occurred at the Home in December 2023, affecting both the staff and veteran residents. The MVFO office is in communication with the Home to monitor the situation regarding the care of veteran residents. According to MVFO statute, a staff member of the Home does not qualify as a complainant. The MVFO office expressed appreciation to the staff member for bringing the issue to attention and noted the MVFO office will continue to monitor the situation. The MVFO office has not received any concerns or inquiries from any of the Home's veteran residents, residents' family members, or legal guardians regarding this matter.

**Investigations:**

In the period covering this report, the MVFO did not conduct any investigations.

**Home Visits:**

In the period covering this report, the MVFO office visited Veteran Homes as outlined below:

Grand Rapids Home

June 20, 2024

September 23, 2024 *via phone call*Chesterfield Twp. HomeOctober 24, 2024 *via phone call*D.J. Jacobetti Home

July 19, 2024



**MICHIGAN VETERAN HOMES**

**D.J. Jacobetti**

 **2025 Event Calendar** 

**February**

**Feb 9** – Super Bowl Tailgate Party (TBD)

**March**

**March 19** – Vegas Day – 1:30 PM

**March 29** – National Vietnam Veteran War Recognition

**May**

**May 26** – Memorial Day Ceremony – 1:30 PM

**June**

**June 12** – Women’s Veterans Recognition Day

**June 14** – Flag Day Ceremony – 1:30 PM

**June TBD** – Onsite Fishpond

**July**

**July 4** – Independence Day Festivities – 1:30 PM (TBD)

**July 5** – Ishpeming Parade

**July 16** – Nathan Koski Memorial Classic Car Show – 1:00–2:30 PM

**July 25** – 20th Annual Fish Fry (Sponsored by Alger County VVA)

**August**

**August TBD** – Annual Member Carnival

**September**

**Sept 11** – National Day of Service Activities

**Sept 19** – POW/MIA Ceremony – 1:30 PM

**October**

**Oct 27–31** – Fall Harvest and Halloween Festivities

**November**

**Nov 11** – Veterans Day Ceremony – 11:00 AM

**December**

**Dec 11–12 (TBD)** – Christmas Gift Shop



MICHIGAN VETERAN HOMES

## Grand Rapids

# 🌻 2025 Event Calendar 🌻

### **January**

January 15 – New Year Party

### **February**

TBD

### **March**

March 17 – St. Patrick's Day Party

### **May**

May 22 – Dog Show

May 30 – Memorial Day Service (NGS)

### **June**

June 2–6 – Michigan Veterans Home Week Celebrations

June 26 – Fishing Contest (NGV)

### **July**

July 24 – MVHGR Summer Celebration Event (NGV)

### **September**

September 18 – Volunteer Banquet

### **October**

October 23 – Haunted House Event

### **November**

November 8 – Veterans 5K

November 11 – Veterans Day Celebration Event (NGS)



**MICHIGAN VETERAN HOMES**

## **Chesterfield Township**

# **🌻 2025 Event Calendar 🌻**

### **January**

January 15 – Carnival Day

### **February**

TBD – Casino Day

February 14 – Valentine’s Day Party (Evening)

### **April**

April 24 – Bring Your Child to Work Day

### **May**

May 1 – Kentucky Derby Horse Race (Staff as horses, members place bets)

May 11 – Mother’s Day Tea Party

May 23 – Entertainment and Slideshow Honoring Memorial Day

May 26 – New Baltimore Memorial Day Parade and Ceremony

### **June**

June 7 – 4th Annual 5K Walk, Run, and Roll

June 14 – Army’s 250th Birthday Celebration

June 15 – Father’s Day Celebration with Entertainment

### **July**

July 4 – BBQ Lunch

July 20 – Bike Rally and Cookout with American Legion Post 4 Riders

July 24 – Staff and Member Field Day

### **August**

August 21 – Volunteer Appreciation Dinner (Tentative)

### **September**

September 11 – Luau and Pig Roast (End of Summer Party)

September 14 – Classic Car Show

### **October**

October 26 – Trick-or-Treat at MVH Through the Halls

### **November**

November 11 – Veterans Day Events and Ceremonies