



STATE OF MICHIGAN
MICHIGAN VETERAN HOMES
LANSING

GRETCHEN WHITMER
GOVERNOR

ANNE ZERBE
EXECUTIVE DIRECTOR

January 16, 2026

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

Dear Governor,

SUBJECT: PA 351 of 2020 – FY '26 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.

Sincerely,

A handwritten signature in black ink, appearing to read "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 1, FY 2026

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 FY26 Quarter 1:

Michigan Veteran Homes at Chesterfield Township (MVHCT)	7.75 PPD
Michigan Veteran Homes D.J. Jacobetti (MVHDJJ)	4.48 PPD
Michigan Veteran Homes at Grand Rapids (MVHGR)	7.05 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	3	5 days
MVHDJJ	24	2.42 days
MVHGR	35	5.5 days

MVHCT Responses:

1. DON and administrator addressed food concerns, member is requested to have a full 72 hours, rather than "3 Days" and member not seeking reimbursement.
2. Risk vs benefit completed per member's request to have dietary texture that was previously not recommended by Speech Therapy. Safety interventions in place with suction machine for choking.
3. Facility "mailman" to round on each household on mail delivery days to pick up mail from designated area and take the mail to the front desk to be mailed out. A specific time was established for out-going mail to be picked up from households.

MVHDJJ Responses:

1. Actively monitoring tray line.
2. Salads are standard recipe.
3. Scrambled eggs are liquid, not powdered, whole shell eggs are available.
4. Tray tickets are being revised.
5. Dietician followed up.
6. Power mobility device policy shared.
7. Currently interviewing ATA's.
8. Solar light installed.
9. Steam tables turned up to help food temperatures.
10. Manager monitoring diets and tray accuracy.
11. Tray card system being updated.
12. All foods will be listed on tray tickets.
13. Staff are learning the menu so that helps with quality.
14. Bone in chicken looks pink but is fully cooked and up to temperature.
15. Undercooked bacon could be a preference; you can request that it is made crisper.
16. There is no concern about running out of food.
17. Dietary staff has increased to 20.
18. No one has to go to a specific dining room.
19. Food is being temped when it arrives to the unit.
20. Food is seasoned but not salted.
21. Condiments will be provided on the side.
22. Any specific snacks will be ordered.
23. Process to obtain a Marq Tran pass explained.
24. Provider in-house 4-5 days per week.

MVHGR Responses:

1. Member satisfied with explanation provided.
2. Member satisfied with facility response.
3. Member satisfied with changes made and ability to self-administer some pain medications.
4. Jeans were found and returned.
5. TV remote found and returned.
6. Watch was found.
7. Resolution Pending.
8. Resolution Pending.
9. Member understood outcome of conversation with laundry supervisor.
10. Member satisfied with explanation provided by staff.
11. Due date for finalized trip schedules and added trip requests were updated.
12. Resolution Pending.
13. Education completed with laundry staff.
14. Findings reviewed with RP who wanted concern resolved.
15. Hearing aid was located.

16. Resolution Pending.
17. Resolution Pending.
18. Number for Wi-Fi support provided. Discussed ability to purchase a hot spot if needed.
19. Keys were found.
20. Shirt and socks were located, labeled, and returned.
21. Resolution Pending.
22. Resolution Pending.
23. Resolution Pending.
24. Resolution Pending.
25. Member satisfied with follow-up from Nutrition Service Manager.
26. Resolution Pending.
27. Resolution Pending.
28. Resolution Pending.
29. Resolution Pending.
30. Resolution Pending.
31. Resolution Pending.
32. Vest was labeled and returned to member.
33. Resolution Pending.
34. Resolution Pending.
35. Resolution Pending.

(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 addition to the storage room.

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

The following individual provides 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 re-stocked 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 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 Manager

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

MVHCT	12 facility deaths
MVHDJJ	11 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