



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 complaints¹, 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.

¹ 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