

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 31, 2019

Ashley Dubay Sunrise Assisted Living of Troy 6870 Crooks Rd Troy, MI 48098

> RE: Application #: AH630399616 Sunrise Assisted Living of Troy 6870 Crooks Rd Troy, MI 48098

Dear Ms. Dubay:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 80 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

Elizabeth Gregory-Weil, Licensing Staff Bureau of Community and Health Systems 4th Floor, Suite 4B 51111 Woodward Avenue Pontiac, MI 48342 (810) 347-5503

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License #:	AH630399616
Applicant Name:	SZR Troy Assisted Living Opco, L.L.C.
Applicant Address:	Suite 200
	500 N. Hurstbourne Pkwy
	Louisville, KY 40222-3301
Authorized Representative/ Administrator:	Ashley Dubay
Name of Facility:	Sunrise Assisted Living of Troy
Facility Address:	6870 Crooks Rd Troy, MI 48098
Facility Telephone #:	(248) 293-1200
Application Date:	05/07/2019
Capacity:	80
Program Type:	ALZHEIMERS AGED

II. METHODOLOGY

05/07/2019	Enrollment
05/16/2019	File Transferred To Field Office Grand Rapids
05/21/2019	Comment File rec'd in GR
06/28/2019	Application Incomplete Letter Sent requested policies and procedures
06/28/2019	File Transferred To Field Office to liz in pontiac
12/11/2019	Inspection Completed On-site
12/11/2019	Comment Outstanding items stills needed for licensure: BCAL 1603, BCAL 1606, management agreement, letter of attestation, disaster plans, policy and procedure approval from area manager Russ Misiak
12/16/2019	Contact- Document Received Emailed received containing BCAL 1603, BCAL 1606, letter of attestation and management agreement
12/20/2019	Comment Area manager Russ Misiak indicated policies and procedures are approved

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Sunrise Assisted Living of Troy is a two story, 80 bed home for the aged that offers assisted living and memory care services.

Upon entering the facility, visitors and guests are greeted by the concierge desk that is occupied daily from 9:00am-8:00pm. After concierge hours, visitors may gain entrance by ringing a doorbell in the front vestibule of the facility. The facility contains a bistro, multiple seating areas, activity and craft space, beauty salon, commercial kitchen, laundry rooms, ample dining space and several other offices and workspaces. Once prepared, the meals will be transported in warming units to the "Reminiscence" memory care unit.

The first and second floors of the facility house general assisted living residents. The "Reminiscence" memory care unit is located in a secured area on the first floor and requires a key code to enter and exit the unit. The memory care unit contains a secured, enclosed courtyard with a six-foot vinyl fence surrounding the area. All resident apartments are outfitted with a small kitchenette containing a refrigerator, sink and some cabinetry. Apartments also contain a bathroom with a sink, toilet, built in shelving and walk in shower.

Residents have the option to bring in their own furniture if they desire, so long as it meets fire safety requirements. If residents do not bring their own furniture, the facility will provide a twin bed, nightstand and wardrobe space. Each resident suite is outfitted with a call system that summon staff for assistance by means of pull cords located in each bedroom and bathroom. Residents also have the option to wear call pendants and when activated, provide an alert notification to staff iPhones that are carried on their person.

The facility has an emergency generator that is compliant with MCL 333.21335. Essential services are maintained during power outages such as heating and cooling, kitchen equipment, elevators and the fire detection system. The generator does not operate any functions in resident apartments.

The facility is outfitted with approved fire suppression systems throughout the building. On 10/17/2019 the Bureau of Fire Services granted an acceptable fire safety certification.

SZR Troy Assisted Living Opco, LLC is the licensee of Sunrise Assisted Living of Troy. They have a management agreement between the licensee and Sunrise Senior Living Management, Inc. A review of the Department of Licensing and Regulatory Affairs *Corporations Online Filing System* revealed SZR Rochester Assisted Living Opco, LLC is a Foreign Limited Liability Company with a Michigan qualification date of 4/25/19.

B. Program Description

Sunrise Assisted Living of Troy offers room, board and supervised personal care services to a total capacity of 80 individuals 55 years of age or older. The facility allows residents to choose their own primary health physician, specialist, licensed health care agency and/or hospice. The facility allows residents to choose their own personal pharmacy, Veteran Affairs if eligible, and/or the facility's contracted pharmacy, OmniCare. Resident needs are assessed, and an initial service plan is written prior to admission to the facility.

Staff training includes assistance in personal care, medication administration, disaster planning procedures, resident rights, behavior management and all services identified in residents' service plans.

The facility does not permit smoking inside the building but does have a designated smoking area outside on the premises for residents, staff and visitors. The facility is pet friendly, does not intend to hold any resident funds and does not permit the use of bed rails.

Ascension Hospital along with banking, pharmacy, retail and food establishments are located within a few minutes driving distance of the facility.

C. Rule/Statutory Violations

The facility is in substantial compliance with home for the aged public health code and administrative rules.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this home for the aged that will allow it to operate for a period of six months with a licensed bed capacity of 80.

Elizabeth Gregory-Weil Licensing Staff 12/12/19

Date

Approved By:

Russell Misias

12/20/19

Russell B. Misiak Area Manager Date