



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 4, 2019

Deborah Skotak
First & Main of Auburn Hills
3151 E. Walton Blvd.
Auburn Hills, MI 48326

RE: License #: AH630370122
First & Main of Auburn Hills
3151 E. Walton Blvd.
Auburn Hills, MI 48326

Dear Ms. Skotak:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan and required Statement of Corrections, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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 feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Kimberly Horst".

Kimberly Horst, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa
Lansing, MI 48909
(517) 256-9814
enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH630370122
Licensee Name:	F&M Auburn Hills OPCO, LLC
Licensee Address:	#2200 2221 Health Drive SW Wyoming, MI 49519
Licensee Telephone #:	(616) 248-3566
Authorized Representative/ Administrator:	Deborah Skotak
Name of Facility:	First & Main of Auburn Hills
Facility Address:	3151 E. Walton Blvd. Auburn Hills, MI 48326
Facility Telephone #:	(248) 282-4094
Original Issuance Date:	04/24/2018
Capacity:	158
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/4/19

Date of Bureau of Fire Services Inspection if applicable: 4/11/19; 6/11/19; 7/16/19

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 12/4/19

No. of staff interviewed and/or observed 10

No. of residents interviewed and/or observed 20

No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. Resident funds not kept in trust
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Disaster plans reviewed and staff interviewed.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
 - 10/18/19: MCL 333.20201(2e); R325.1932(1) R325.1932(3)
 - 10/18/19: R 325.1921(1)(b); R 325.1932 (1); R325.1932(3)
 - 10/18/19: R 325.1932(1)
 - 9/13/19: R 325.1921; R 325.1932(1);
 - 4/18/19: R 325.1931(5)
 - 3/16/19: R325.1979(3)
- Number of excluded employees followed up? 3 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 325.1931	Employees; general provisions.
	<p>(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:</p> <p>(a) Reporting requirements and documentation.</p> <p>(b) First aid and/or medication, if any.</p> <p>(c) Personal care.</p> <p>(d) Resident rights and responsibilities.</p> <p>(e) Safety and fire prevention.</p> <p>(f) Containment of infectious disease and standard precautions.</p> <p>(g) Medication administration, if applicable.</p>
<p>Interview with administrator Deborah Skotak revealed the facility utilizes a temp agency for staffing needs. Ms. Skotak reported when a temp agency staff worker comes to the facility, they check in at the front desk and get their assignment from a charge worker. The temp agency worker is closely followed by another worker at the facility. The facility does not provide training nor evaluate the competency of temporary agency staff but allows them to work directly with residents and provide personal care to the residents.</p>	
R 325.1932	Resident medications.
	<p>(3) If a home or the home's administrator or direct care staff member supervises the taking of medication by a resident, then the home shall comply with all of the following provisions:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <p>(i) The medication.</p> <p>(ii) The dosage.</p> <p>(iii) Label instructions for use.</p> <p>(iv) Time to be administered.</p> <p>(v) The initials of the person who administered the medication, which shall be entered at the time the medication is given.</p> <p>(vi) A resident's refusal to accept prescribed medication or procedures.</p>

Review of Resident M and N's MAR reveal missing or incomplete records. Some dates were left completely blank with no clarification as to whether the medication was administered. Based on this information, the facility did not comply with this rule.	
REPEAT VIOLATION ESTABLISHED [For reference, see SIR2019A1019067, SIR2020A1019004, 202A101903, and 2019 renewal LSR].	
R 325.1935	Bedding, linens, and clothing.
	(2) The home shall assure the availability of clean linens, towels, and washcloths. The supply shall be sufficient to meet the needs of the residents in the home. Individually designated space for individual towels and washcloths shall be provided.
Inspection of the facility revealed there was no availability of clean linens, towels, and washcloths for the residents. Ms. Skotak reported the facility will provide these items to the residents but there is no additional supply of these items.	
R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
Inspection of the facility kitchen revealed that the refrigerator and freezer area contained items that were opened, unsealed and were not dated (including but not limited to hot dogs, pancakes, and cookie dough).	
R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
Inspection of the kitchen revealed there was no thermometer located in the refrigerator and freezer.	
R 325.1979	General maintenance and storage.
	(1) The building, equipment, and furniture shall be kept clean and in good repair.

Inspection of the facility revealed in memory care, there was a community bathroom that did not have a door. In addition, in the memory care unit on the locking mechanism on the terrace door batteries were exposed.	
R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
Inspection of the facility revealed oxygen tanks located in the laundry area were not stored safely in Oxygen Cylinder holders. In addition, in the memory care unit dining area, there was a used cleaning rag that was accessible to residents. Easily accessible and hazardous and toxic materials are an unnecessary ingestion and poisoning risk to residents with poor safety awareness.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and required Statement of Corrections, renewal of the license is recommended.

Kimberly Hoast

12/4/19

 Licensing Consultant Date