



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 21, 2021

Katelyn Fuerstenberg
StoryPoint of Rockford
950 Corporate Office Dr.
Milford, MI 48381

RE: License #: AH410359749
StoryPoint of Rockford
2885 10 Mile Rd. NE
Rockford, MI 49341

Dear Ms. Fuerstenberg:

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 licensee home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, 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 (616) 356-0100.

Sincerely,

A handwritten signature in blue ink that reads "Lauren Wohlfert".

Lauren Wohlfert, Licensing Staff
Bureau of Community and Health Systems
350 Ottawa N.W. Unit 13 7th Floor
Grand Rapids, MI 49503
(616) 260-7781
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH410359749
Licensee Name:	Senior Living Rockford, LLC
Licensee Address:	Ste 200 7927 Nemco Way Brighton, MI 48116
Licensee Telephone #:	(248) 438-2216
Authorized Representative:	Katelyn Fuerstenberg
Administrator:	Jenny Conlan
Name of Facility:	StoryPoint of Rockford
Facility Address:	2885 10 Mile Rd. NE Rockford, MI 49341
Facility Telephone #:	(248) 438-2216
Original Issuance Date:	03/17/2016
Capacity:	40
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 9/15/21

Date of Bureau of Fire Services Inspection if applicable: 4/1/21

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 9/20/21

No. of staff interviewed and/or observed 12

No. of residents interviewed and/or observed 17

No. of others interviewed 1 Role Relative

- 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. No resident funds held in trust
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews fire drills, disaster plans were reviewed with staff
- 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: N/A
- Number of excluded employees followed up? 0 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1913	Licenses and permits; general provisions.
	(2) The applicant or the authorized representative shall give written notice to the department within 5 business days of any changes in information as submitted in the application pursuant to which a license, provisional license, or temporary nonrenewable permit has been issued.
ANALYSIS:	Upon arrival at the facility, I was advised that Ms. Conlan was appointed to the administrator position several months ago. Review of the facility file revealed the department was not notified within five business days that the change in administrator occurred.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1953	Menus.
	(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.
ANALYSIS:	The interview with the facility's kitchen manager revealed a separate menu for residents with a special or therapeutic diet was not kept. The special or therapeutic diet menu was not posted.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(5) The kitchen and dietary area, as well as all food being stored, prepared, served, or transported, shall be protected against potential contamination from dust, flies, insects, vermin, overhead sewer lines, and other sources.

ANALYSIS:	Inspection of the walk-in refrigerator in the kitchen revealed a cart of food items was uncovered and open to the elements and potential contamination.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



9/15/21

Date

Licensing Consultant