



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 17, 2021

Denise Aleardi
Applewood Lane Place, L.L.C.
1750 Sherwood Street
Sylvan Lake, MI 48320

RE: License #: AS630388971
Applewood Lane Place
240 Applewood Lane
Bloomfield Township, MI 48302

Dear Ms. Aleardi:

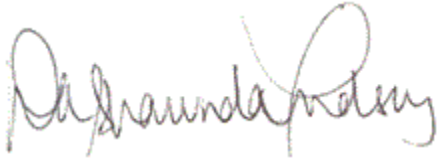
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 or licensee designee or home for the aged authorized representative and a date.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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

Sincerely,

A handwritten signature in cursive script, appearing to read "DaShawnda Lindsey".

DaShawnda Lindsey, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 505-8036

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

I. IDENTIFYING INFORMATION

License #: AS630388971

Licensee Name: Applewood Lane Place, L.L.C.

Licensee Address: 1750 Sherwood Street
Sylvan Lake, MI 48320

Licensee Telephone #:

Licensee/Licensee Designee: Denise Aleari

Administrator: Denise Aleari

Name of Facility: Applewood Lane Place

Facility Address: 240 Applewood Lane
Bloomfield Township, MI 48302

Facility Telephone #: (734) 788-3000

Original Issuance Date: 08/08/2017

Capacity: 6

Program Type: ALZHEIMERS
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/04/2021, 09/29/2021

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: Licensee designee/admin.

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
The inspection did not occur during a meal time.
- Fire drills reviewed? Yes No If no, explain.
- Fire safety equipment and practices observed? Yes No If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain.
There were no incident reports that required a follow-up.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
Renewal 2021- as312(4)(b)(v), as312(4)(c), as401(2), as403(1), and as507(5); SI
12/15/2020- as310(1)(d), as312(1), as312(2), as312(4)(b), as312(4)(c), and
as403(1) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

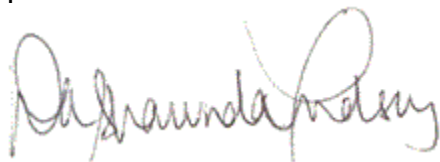
This facility was found to be in non-compliance with the following rules:	
MCL 400.734b	<p>Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.</p>
	<p>(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.</p>

There was no verification that staff Cheni Willis, Sanique Blessit, and Alicia Hardville were fingerprinted under Applewood Lane Place license.	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
Per Resident B's health care appraisal, the resident is prescribed a diabetic diet. The resident's assessment plan does not document that the resident is prescribed a diabetic diet.	
R 400.14310	Resident health care.
	(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
Resident V was not weighed in October 2021.	
R 400.14312	Resident medications.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
I observed the following medication errors: <ul style="list-style-type: none"> • Resident A is prescribed Clonazepam 0.5mg at 8am and 3pm daily. Staff administered the medication at 8am and 8pm daily. • Resident A is prescribed 2 tabs of Cholecalcif 25mcg (D3, 1,000) daily. Staff administer 1 tab of Vitamin D 1000mg daily. 	
R 400.14312	Resident medications.
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: <ul style="list-style-type: none"> (b) Complete an individual medication log that contains all of the following information: <ul style="list-style-type: none"> (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

<p>I observe the following medication errors:</p> <ul style="list-style-type: none"> Resident A is prescribed Carboxymethyl Cellulose 5% eye drop 4 times daily. Staff did not initial the medication administration record (MAR) on from 10/26/2021 to 10/29/2021 at noon or on 10/28/2021 and 10/30/2021 at 5pm to show administration of the medication. Resident B is prescribed Moxifloxacin 0.5% eye drop daily 3 times daily. Staff did not initial the MAR on 10/31/2021 at 2pm to show administration of the medication. <p>REPEATED VIOLATION ESTABLISHED. Reference SIR 2021A0993001, 12/15/2020, CAP 12/18/2020.</p>	
R 400.14312	Resident medications.
	<p>(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:</p> <p>(c) Record the reason for each administration of medication that is prescribed on an as needed basis.</p>
<p>I observed the following medication errors:</p> <ul style="list-style-type: none"> Resident N is prescribed Tramadol 50mg daily as a PRN. Staff did not document the time(s) the PRN was administered from 10/13/2021 to 10/27/2021. <p>REPEATED VIOLATION ESTABLISHED. Reference SIR 2021A0993001, 12/15/2020, CAP 12/18/2020.</p>	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



11/17/2021

DaShawnda Lindsey
Licensing Consultant

Date