

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 25, 2021

Michele White The Village of Westland, A Senior Living Community 32001 Cherry Hill Road Westland, MI 48186-7902

RE: License #: AL820244666

Rose Cottage

32111 Cherry Hill Road Westland, MI 48186

Dear Mrs. White:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

An on-site inspection will be conducted.

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 (313) 456-0380.

Sincerely,

K. Robinson, LMSW, Licensing Consultant Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 919-0574

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

I. IDENTIFYING INFORMATION

License #: AL820244666

Licensee Name: The Village of Westland, A Senior Living

Community

Licensee Address: 32001 Cherry Hill Road

Westland, MI 48186-7902

Licensee Telephone #: (734) 728-5222

Licensee/Licensee Designee: Michele White, Designee

Administrator: Michele White

Name of Facility: Rose Cottage

Facility Address: 32111 Cherry Hill Road

Westland, MI 48186

Facility Telephone #: (734) 762-8885

Original Issuance Date: 06/19/2002

Capacity: 20

Program Type: ALZHEIMERS

AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		08/12/	08/12/2021	
Date of Bureau of Fire Services Inspection if applicable: 05/07/2021, 07/14/2021				
Date of Health Authority Inspection if applicable:				
Insp	pection Type:	Observatio	n ⊠ Worksheet □ Full Fire Safety	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed O1 Role: Licensee designee				
•	Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. Due to the Covid-19 pandemic, this inspection was completed onsite with minimal face-to-face contact. 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.			
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.			
•	Fire safety equipment and practices observed? Yes \square No \boxtimes If no, explain.			
•	E-scores reviewed? (Special Certification Only) Yes \(\subseteq \text{No} \subseteq \text{N/A} \subseteq \text{If no, explain.} \) Water temperatures checked? Yes \(\subseteq \text{No} \subseteq \text{If no, explain.} \)			
•	Incident report follow-up? Yes ⊠ No □ If no, explain.			
•	Corrective action plan compliance verified	? Yes⊠	CAP date/s and rule/s:	
•	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:

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

Resident (B.R.) assessment plan at the time of placement is missing signatures and his 2021 assessment has yet to be completed.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

- (6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

 (b) A description of services to be provided and the fee for
- the service.

Resident (E.C.) care agreement is missing the basic fee for service.

A corrective action plan was requested and approved on 08/12/2021. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Date

08/25/21

Kara Robinson Licensing Consultant