



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

October 6, 2022

Ruth Poberesky  
Absolute Care, LLC  
5847 Naneva Court  
West Bloomfield, MI 48322

RE: License #: AS630390276  
**Absolute 3**  
**2145 St Joseph**  
**West Bloomfield, MI 48324**

Dear Ms. Poberesky:

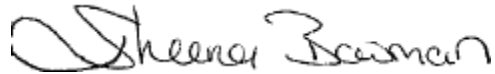
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.

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

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 black ink that reads "Sheena Bowman". The signature is written in a cursive style with a large initial 'S'.

Sheena Bowman, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342

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

**I. IDENTIFYING INFORMATION**

**License #:** AS630390276

**Licensee Name:** Absolute Care, LLC

**Licensee Address:** 5847 Naneva Court  
West Bloomfield, MI 48322

**Licensee Telephone #:** (248) 252-6310

**Licensee/Licensee Designee:** Ruth Poberesky

**Administrator:**

**Name of Facility:** Absolute 3

**Facility Address:** 2145 St Joseph  
West Bloomfield, MI 48324

**Facility Telephone #:** (248) 252-6310

**Original Issuance Date:** 11/17/2017

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
MENTALLY ILL  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/05/2022

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 2

No. of others interviewed [redacted] Role: [redacted]

- 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.  
It was not meal time during the onsite.
- 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.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
LSR CAP Approved 10/27/20; 203(1), 312(4)(b)(iii), 313(4), 401(2) 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:

**R 400.14203**

**Licensee and administrator training requirements.**

**(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:**

**(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.**

**(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.**

**REPEAT VIOLATION ESTABLISHED: LSR CAP APPROVED 10/27/20**

The licensee designee, Ruth Poberesky did not complete 16 hours of training for 2021.

**R 400.14301**

**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 A and Resident B were admitted on 08/26/22. However, an initial assessment plan was not completed for Resident A or Resident B at the time of admission.

**R 400.14301      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.

Resident A and Resident B were admitted on 08/26/22. However, a resident care agreement was not completed for Resident A or Resident B at the time of admission.

**R 400.14312      Resident medications.**

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

During the onsite, the medication cabinet was observed to be unlocked.

**R 400.14316      Resident records.**

(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:  
(a) Identifying information, including, at a minimum, all of the following:

- (i) Name.
- (ii) Social security number, date of birth, case number, and marital status.
- (iii) Former address.
- (iv) Name, address, and telephone number of the next of kin or the designated representative.
- (v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home.
- (vi) Name, address, and telephone number of the preferred physician and hospital.
- (vii) Medical insurance.
- (viii) Funeral provisions and preferences.
- (ix) Resident's religious preference information.
- (b) Date of admission.
- (c) Date of discharge and the place to which the resident was discharged.
- (d) Health care information, including all of the following:
  - (i) Health care appraisals.
  - (ii) Medication logs.
  - (iii) Statements and instructions for supervising prescribed medication, including dietary supplements and individual special medical procedures.
  - (iv) A record of physician contacts.
  - (v) Instructions for emergency care and advanced medical directives.
- (e) Resident care agreement.
- (f) Assessment plan.
- (g) Weight record.
- (h) Incident reports and accident records.
- (i) Resident funds and valuables record and resident refund agreement.
- (j) Resident grievances and complaints.

During the onsite, it was observed that the residents' files are not being kept inside the AFC group home. The licensee designee, Ruth Poberesky had to retrieve the requested files for review from a different AFC group home.

**R 400.14318      Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

A daytime fire drill was not completed during the timeframe between October 2020 through December 2020.

**R 400.14401 Environmental health.**

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

During the onsite, Resident A's window was observed not to have a screen installed.

**R 400.14403 Maintenance of premises.**

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the onsite, there were missing blinds from the window in the living room. Resident A's bedroom door sticks and does not open easily.

**R 400.14408 Bedrooms generally.**

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, nonlocking-against-egress hardware.

Resident A and Resident B's bedroom door does not have non-locking against egress hardware.

**R 400.14507 Means of egress generally.**

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

The second door of egress does not have non-locking against egress hardware on the sliding door.



**R 400.14511**

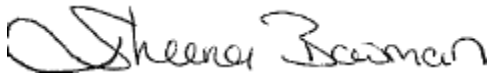
**Flame-producing equipment; enclosures.**

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware.

The heating plant doors are not self-closing as the self-closing device is not installed correctly. It is unknown if the fire doors have a one-hour fire resistance rating as it is not indicated on the doors.

**IV. RECOMMENDATION**

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



Sheena Bowman  
Licensing Consultant

10/06/22  
Date