



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 29, 2022

Erin Gust
Dignitas Inc
P.O. Box 3460
Farmington Hills, MI 48333-3460

RE: License #: AS630315897
Dignitas, Inc/Orchard Lake House 2
24485 Orchard Lake Road
Farmington Hills, MI 48336

Dear Ms. Gust:

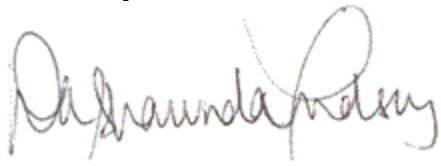
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 "DaShawnda Lindsey". The signature is written in a cursive, flowing style.

DaShawnda Lindsey, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste. 9-100
Detroit, MI 48202
(248) 505-8036

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

I. IDENTIFYING INFORMATION

License #: AS630315897

Licensee Name: Dignitas Inc

Licensee Address: Suite 112
24380 Orchard Lake Road
Farmington Hills, MI 48336-3460

Licensee Telephone #: (248) 442-1170

Licensee/Licensee Designee: Erin Gust

Administrator: Erin Gust

Name of Facility: Dignitas, Inc/Orchard Lake House 2

Facility Address: 24485 Orchard Lake Road
Farmington Hills, MI 48336

Facility Telephone #: (248) 442-1170

Original Issuance Date: 04/05/2012

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/28/2022

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 2

No. of residents interviewed and/or observed 3

No. of others interviewed 2 Role: Home manager/Clinical director

- 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:
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 **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.**

(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.

Staff Lawanna Dowtin was fingerprinted under the Newburgh Home license (AS820080727). There was no verification she was fingerprinted under the Dignitas, Inc/Orchard Lake House 2 license (AS630315897).

R 400.14204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (b) First aid.
- (c) Cardiopulmonary resuscitation.

Ms. Dowtin's and staff Donovan Poole's CPR and First Aid certification expired on 03/27/2020 and 10/16/2021 respectively. There was no verification they had current CPR and First Aid certification.

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

Ms. Dowtin and Mr. Poole completed health reviews. However, there were no dates on the reviews. I was unable to determine if they completed a review in the last two years.

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Resident A and Resident B did not have a fee listed for services. Instead, the agreement stated, "auto to pay".

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:

(b) Complete an individual medication log that contains all of the following information:

(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

(vi) A resident's refusal to accept prescribed medication or procedures.

Staff did not initial Resident A's medication administration record (MAR) on 09/09/2022 and 09/26/2022 at 2:00pm to show administration of Baclofen 10mg. Instead, the MAR was initialed during the inspection on 09/28/2022 to show administration of the medication. In addition, Resident A attends day program. Staff did not always document the MAR to show that this medication was packed for the day program.

Staff did not initial Resident B's MAR on the following dates and times to show administration of each medication:

- 8:00pm on 09/07/2022- Aripiprazole 2mg
- 10:00pm on 09/05/2022 and 09/07/2022- Aripiprazole 5mg
- 2:00pm on 09/26/2022- Assure Lance Miss Micro
- 2:00pm on 09/26/2022- BD Swab Reg Pad
- 2:00pm on 09/09/2022 and 09/26/2022- Clonazepam 1mg
- 2:00pm 09/09/2022 and 09/26/2022- Xenical 120mg

Instead, the MAR was initialed during the inspection on 09/28/2022 to show administration of the medication. Also, staff initialed the MAR to show administration of a medication despite the medication not being in the facility and/or the resident refusing the medication.

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.

During the second quarter of 2021, a drill was conducted during evening and sleeping hours. Another drill was also conducted, but the time of the drill was not documented. During the third quarter of 2021, two drills were conducted during daytime hours. The time was not documented for the third drill completed.

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 door did not automatically self-close.

IV. RECOMMENDATION

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



09/29/2022

DaShawnda Lindsey
Licensing Consultant

Date