



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

April 13, 2023

Dean Solden  
The Laurels Of Lake Orion LLC  
97 N Cass Avenue  
Pontiac, MI 48342

RE: License #: AH630386897  
Orion Oaks Assisted Living & Memory Care

Dear Mr. Solden:

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 authorized representative and a date.

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 (517) 284-9730.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 347-5503

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH630386897
<b>Licensee Name:</b>	The Laurels Of Lake Orion LLC
<b>Licensee Address:</b>	97 N Cass Avenue Pontiac, MI 48342
<b>Licensee Telephone #:</b>	(586) 504-4368
<b>Authorized Representative:</b>	Dean Solden
<b>Administrator:</b>	Tiffany Giammarco
<b>Name of Facility:</b>	Orion Oaks Assisted Living & Memory Care
<b>Facility Address:</b>	3451 W Clarkston Road Lake Orion, MI 48360
<b>Facility Telephone #:</b>	(586) 909-3989
<b>Original Issuance Date:</b>	11/10/2022
<b>Capacity:</b>	60
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/12/2023

Date of Bureau of Fire Services Inspection if applicable: 02/11/2021

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 04/12/2023

No. of staff interviewed and/or observed **6**

No. of residents interviewed and/or observed **3**

No. of others interviewed **0** Role

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
A medication pass did not occur during my inspection.
- 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. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
The Bureau of Fire Services reviews fire drills, however facility disaster planning procedures were reviewed.
- 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? N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following administrative rules regulating home for the aged facilities:	
<b>R 325.1923</b>	<b>Employee's health.</b>
	<b>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005 (<a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a>), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.</b>
Employees 1 and 2 were both hired on 2/7/23. The TB screens on file for both employees was dated 12/02/2022, which is outside the timeframe required in this rule.	
<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.</b>

Medication administration records (MAR) were reviewed and the following observations were made:

Resident A missed one or more scheduled doses of medication on 3/1/23, 3/13/23, 3/23/23, 4/6/23, 4/8/23 and 4/9/23. Based on the documentation provided it is unknown why Resident A did not receive her scheduled medications on those dates, as staff left the MAR blank and did not document a reason for the missed med passes.

<b>R 325.1953</b>	<b>Menus.</b>
	<b>(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.</b>
The posted menu contained items for the current day, not for the entire week.	
<b>R 325.1954</b>	<b>Meal and food records.</b>
	<b>The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.</b>
The facility was not keeping a meal census record that differentiated between food prepared for staff, visitors and residents. Employee 3 reported being unaware of this requirement.	
<b>R 325.1964</b>	<b>Interiors.</b>
	<b>(2) A part of a building in use as a home shall not be used for any purpose which interferes with the care, well-being, and safety of residents, personnel, and visitors.</b>
The chapel was being used for miscellaneous item storage. The chapel is an area designated for resident use and the items were left unsecured in the room.	
<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(1) The building, equipment, and furniture shall be kept clean and in good repair.</b>

<p>A leak in the ceiling in an assisted living hallway was observed. A large garbage can was placed in the middle of the hallway to catch the water that was actively dripping. Administrator Tiffany Giammarco and Employee 4 reported that the leak was coming from the HVAC unit and had been leaking for three days. A large area of drywall was missing near the entrance to the memory care unit. Ms. Giammarco stated that the drywall was removed in order to install a window but could not indicate when that installation will occur. Additionally multiple doors in the memory care unit were missing locks on their doors, creating holes in the doorknobs. This was observed on the activities office door, a common area restroom and resident apartment #s 32, 33, 34, 35, 37, 39, 44 and 59. Ms. Giammarco stated that the affected doors require a screw driver in order to be opened. The Bureau of Fire Services reported that they were unaware of this issue and did not approve any changes to the doors or locks.</p>	
<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(3) Hazardous and toxic materials shall be stored in a safe manner.</b>
<p>Hazardous and toxic materials (various cleaning agents, construction adhesives and paint) were found unsecured in the fitness room, salon and assisted living dining room. These items are an unnecessary ingestion and subsequent poisoning risk to those residents that lack safety awareness.</p>	

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, invoice payment and updated fire safety approval report, renewal of the license is recommended.



04/13/2023

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Elizabeth Gregory-Weil  
Licensing Consultant

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Date