

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 23, 2023

Patricia Thomas Quest, Inc 36141 Schoolcraft Road Livonia, MI 48150-1216

RE: License #: AS820015751

Pardee Home 8251 Pardee Road Taylor, MI 48180

Dear Mrs. Thomas:

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 (313) 456-0380.

Sincerely,

Denasha Walker, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202

(313) 300-9922

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

I. IDENTIFYING INFORMATION

License #: AS820015751

Licensee Name: Quest, Inc

Licensee Address: 36141 Schoolcraft Road

Livonia, MI 48150-1216

Licensee Telephone #: (734) 838-3400

Licensee/Licensee Designee: Patricia Thomas

Administrator: Renea Humphrey

Name of Facility: Pardee Home

Facility Address: 8251 Pardee Road

Taylor, MI 48180

Facility Telephone #: (313) 292-1746

Original Issuance Date: 09/22/1994

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		05/15/2023		
Date of Bureau of Fire Services Inspection if applicable:				
Date of Environmental/Health Inspection if applicable:				
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Adminis	trator	1 3	
•	Medication pass / simulated pass observed? A full worksheet inspection was completed. Medication(s) and medication record(s) revie		·	
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.			
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.			
•	Fire safety equipment and practices observed? Yes $oximes$ No $oximes$ If no, explain.			
•	E-scores reviewed? (Special Certification Only) Yes No N/A In If no, explain. Water temperatures checked? Yes No If no, explain.			
•	Incident report follow-up? Yes \boxtimes No \square If	no, expla	ain.	
•	Corrective action plan compliance verified? CAP Dated 06/04/2021 R 400.14312 (1) N/A Number of excluded employees followed-up	A 🔲 🗀	CAP date/s and rule/s: 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 400.14301

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

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection, Resident A's resident file did not contain an annual 2023 health care appraisal. Her last health care appraisal was dated 03/2022.

IV. RECOMMENDATION

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

05/23/2023	
	Date
	05/23/2023