



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 3, 2023

Angela Kimball
Red Maple Place 1 LLC
6521 Red Maple Ln
Bloomfield Hills, MI 48301

RE: License #: AS630401786
Red Maple Place 1 LLC
6521 Red Maple Ln
Bloomfield Hills, MI 48031

Dear Ms. Kimball:

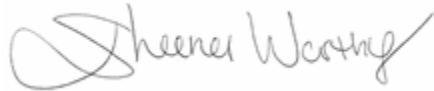
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 grey ink that reads "Sheena Worthy". The signature is fluid and cursive, with the first name "Sheena" being more prominent than the last name "Worthy".

Sheena Worthy, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd, Suite 9-100
Detroit, MI 48202

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

I. IDENTIFYING INFORMATION

License#: AS630401786

Licensee Name: Red Maple Place 1 LLC

Licensee Address: 6521 Red Maple Ln
Bloomfield Hills, MI 48301

Licensee Telephone #: (248) 792-7400

Licensee/Licensee Designee: Angela Kimball

Administrator: Angela Kimball

Name of Facility: Red Maple Place 1 LLC

Facility Address: 6521 Red Maple Ln
Bloomfield Hills, MI 48301

Facility Telephone #: (248) 678-1713

Original Issuance Date: 01/07/2021

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/30/2023

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 3

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.
N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
LSR CAP Approved 07/06/21; 205(5), 301(6), 301(4), 315(3), 204(3)(d), 207(3),
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.

The licensee designee, Angela Kimball did not complete any trainings for 2022.

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.

(2) A licensee shall have, on file with the department, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of the licensee and administrator. The statement shall be signed within 6 months before the issuance of a temporary license and at any other time requested by the department.

The licensee designee, Angela Kimball provided a physical for 2023 but the doctor did not date it. The designee did not complete a physical for 2022.

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.

Resident B's initial physical was completed late as he was admitted on 04/22/23 but, his physical was not completed until 06/06/23. Resident A did not receive a physical at the time of admission in 2022.

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.

REPEAT VIOLATION ESTABLISHED: LSR CAP APPROVED 07/06/21

Resident B is his own guardian. Resident B's initial assessment plan was not dated by Resident B or the licensee designee.

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. A resident care agreement shall include all of the following:

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

REPEAT VIOLATION ESTABLISHED: LSR CAP APPROVED 07/06/21

Resident B's resident care agreement was not signed by Resident B and a fee was not documented. Resident A's guardian did not sign his 2022 resident care agreement.

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.

An annual resident care agreement was not provided for review for Resident A for 2023.

R 400.14306 Use of assistive devices.

(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

Resident A and Resident B utilize a cane and; Resident C uses a walker and sleeps in a hospital bed. The licensee designee, Angela Kimball does not have a prescription for Resident A, Resident B, or Resident C's assistive devices in the home.

R 400.14310 Resident health care.

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

Resident A weight was not documented for 2022. Resident A's weight for January 2023 and February 2023 was not documented.

R 400.14312 Resident medications.

(2) Medication shall be given, taken, or applied pursuant to label instructions.

Resident B is prescribed Lisinopril 40mg one tablet daily. A half of pill was observed in the bubble packet dated for 06/27/23.

Resident B is prescribed Meclizine 12.5mg three times a day. This medication was not observed in the home.

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:

(i) The medication.

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

During the onsite, Sumatriptan 100mg was in the home for Resident B but this medication was not listed on his MAR. Resident B had several pills left over in his bubble packets as he often refuses to take his medications. However, the staff initial the MAR as if Resident B is taking his medications when he actually refuses to do so.

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:

(c) Record the reason for each administration of medication that is prescribed on an as needed basis.

Resident B is prescribed the following medications as a PRN:

Tylenol 500mg
Sumatriptan 50mg
Methocarbamol 500mg
Oxycodone 5mg
Clotrimazole 1%

Resident B was administered the abovementioned medications throughout the month of June however; the staff did not document the reason for each administration.

R 400.14312 Resident medications.

(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

During the onsite, there was ten medications observed in a bag for Resident B that he is no longer prescribed.

R 400.14315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

REPEAT VIOLATION ESTABLISHED: LSR CAP APPROVED 07/06/21

Resident A's funds part II was not completed in its entirety as the deposit column and balance column was left blank.

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:

(vii) Medical insurance.

(ix) Resident's religious preference information.

(b) Date of admission.

Resident A and Resident B's resident identification record was missing their medical insurance information, religious preference, and date of admission.

R 400.14318

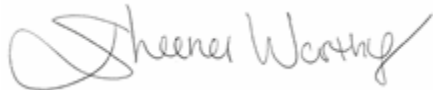
Emergency preparedness; evacuation plan; emergency transportation.

(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 fire drill was only completed twice in 2021 and in 2022. One fire drill has been completed for 2023.

IV. RECOMMENDATION

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



07/03/23

Date

Licensing Consultant