



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

October 26, 2023

Darlene Vernier  
Anthology of Troy  
3400 Livernois Rd  
Troy, MI 48083

RE: License #: AH630398531

Dear Licensee:

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. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 home for the aged 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>	AH630398531
<b>Licensee Name:</b>	CA Senior Troy Operator, LLC
<b>Licensee Address:</b>	3400 Livernois Rd Troy, MI 48083
<b>Licensee Telephone #:</b>	(312) 994-1880
<b>Authorized Representative and Administrator:</b>	Darlene Vernier
<b>Name of Facility:</b>	Anthology of Troy
<b>Facility Address:</b>	3400 Livernois Rd Troy, MI 48083
<b>Facility Telephone #:</b>	(248) 528-8001
<b>Original Issuance Date:</b>	04/29/2020
<b>Capacity:</b>	103
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/25/2023

Date of Bureau of Fire Services Inspection if applicable: 07/26/2023

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 10/25/2023

No. of staff interviewed and/or observed 22

No. of residents interviewed and/or observed 59

No. of others interviewed 0 Role

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- 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: MCL 333.20201 (3)(b)/ CAP dated 5/1/23
- Number of excluded employees followed up? 6 N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

<p>This facility was found to be in non-compliance with the following administrative rules regulating home for the aged facilities:</p>	
<b>R 325.1923</b>	<b>Employee's health.</b>
	<p><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></p>
<p>Employees 1 and 2 did not receive their initial TB screens in a timely manner. Employee 1 was hired on 6/5/23 and her TB screen was completed on 10/17/23. Employee 2 was hired on 6/13/23 and her TB screen was completed on 10/18/23.</p>	
<b>R 325.1932</b>	<b>Resident medications.</b>
	<p><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></p>
<p>Medication administration records (MAR) were reviewed for the previous seven-week period and the following observations were made:</p> <p>Resident A missed a scheduled dose of acetaminophen on 9/9/23, 10/12/23 and 10/13/23, alprazolam on 10/12/23 and 10/13/23, melatonin on 10/12/23 and 10/13/23 and tramadol on 10/12/23 and 10/13/23. Staff left the MAR blank and did not document a reason for the missed med passes. Resident A missed scheduled doses of Sertraline on 10/19, 10/20, 10/21, 10/22 and 10/23. Staff documented "drug</p>	

not given". Employee 3 reported that Resident A was in rehab and upon his return, staff were unaware that the medication had been delivered to the facility. It was confirmed by the pharmacy that the medication was delivered on 10/18/23, however staff did not locate it until 10/24/23.

Resident B missed a scheduled dose of benzonatate on 9/24/23 and 10/7/23, guaifenesin on 9/8/23, melatonin on 10/5/23, rosuvastatin on 10/24/23 and serevent on 10/24/23. Staff left the MAR blank and did not document a reason for the missed med passes. Resident B missed one or both scheduled doses of Mucinex on 9/25/23, 9/26/23, 9/27/23, 9/28/23, 9/29/23, 9/30/23, 10/1/23, 10/2/23, 10/21/23 and 10/22/23. Employee 3 reported that Resident B's family was providing the medication instead of the pharmacy and there was a delay in the medication being brought to the facility.

Resident C missed a scheduled dose of vitamin B-12 on 10/22/23. Staff left the MAR blank and did not document a reason for the missed med pass.

Resident D missed a scheduled dose of memantine on 9/19/23 and 10/20/23, levothyroxine on 10/20/23 and simvastatin on 10/20/23. Staff left the MAR blank and did not document a reason for the missed med passes.

Resident E missed a scheduled dose of refresh on 9/24/23. Staff left the MAR blank and did not document a reason for the missed med pass.

<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(5) A home shall take reasonable precautions to ensure or assure that prescription medication is not used by a person other than the resident for whom the medication is prescribed.</b>
A medication cart located near resident apartment #106 was left unlocked. The medications held within the cart were not secured and could easily be intercepted by a resident, staff or visitor of the facility.	
<b>R 325.1944</b>	<b>Employee records and work schedules.</b>
	<b>(1) A home shall maintain a record for each employee, which shall include all of the following:</b>  <b>(g) Results of initial TB screening as required by R 325.1923(2).</b>

Employee 4 was hired on 4/21/23, however her file did not contain evidence that an initial TB screen was completed.	
<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 did not keep a meal census record consistent with this rule and was missing required information.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.</b>
Employee 5 reported that the facility uses a high temperature dish machine to sanitize utensils, dishes and cookware. He was unable to demonstrate that temperatures are being routinely checked and the last recorded temperature check occurred on 8/7/23.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(14) A single service eating or drinking article shall be stored, handled, and dispensed in a sanitary manner and shall be used only once.</b>
Single serve dessert items located in the first-floor activity room freezer were left uncovered, leaving the perishable items susceptible to contamination.	
<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>
Hazardous and toxic materials (various cleaning agents and detergents) were found unsecured in two first-floor laundry rooms. These items are an unnecessary	

ingestion and subsequent poisoning risk to those residents that lack safety awareness.

#### IV. RECOMMENDATION

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



10/26/2023

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Elizabeth Gregory-Weil  
Licensing Consultant

Date