



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

November 9, 2023

Michael Dyki
Blossom Ridge, LLC
Ste 100
3005 University
Auburn Hills, MI 48326

RE: License #: AL630389144
Blossom Ridge
3145 Lily Trail
Oakland, MI 48306

Dear Mr. Dyki:

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 designee 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 cursive script that reads "Johnna Cade".

Johnna Cade, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd. Ste 9-100
Detroit, MI 48202
Phone: 248-302-2409

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

I. IDENTIFYING INFORMATION

License #:	AL630389144
Licensee Name:	Blossom Ridge, LLC
Licensee Address:	3005 University Drive Auburn Hills, MI 48326
Licensee Telephone #:	(248) 340-9400
Licensee/Licensee Designee:	Michael Dyki
Administrator:	Lorrie Worden
Name of Facility:	Blossom Ridge
Facility Address:	3145 Lily Trail Oakland, MI 48306
Facility Telephone #:	(248) 759-8500
Original Issuance Date:	05/17/2019
Capacity:	20
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/08/2023

Date of Bureau of Fire Services Inspection if applicable: 01/23/2023

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3
No. of residents interviewed and/or observed 20
No. of others interviewed 1 Role: licensee designee

- 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. Resident funds and associated documents were not onsite and available for review.
- Meal preparation / service observed? Yes No If no, explain.
- 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 incidents to follow up on.
- 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:	
R 400.15210	Resident register.
	A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident: (a) Date of admission. (b) Date of discharge. (c) Place and address to which the resident moved, if known.

During the onsite inspection completed on 11/08/2023, the facility did not have a resident register onsite and available for review.

R 400.15301	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.

During the onsite inspection completed on 11/08/2023, Resident A did not have a health care appraisal on file for 2022.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report dated 11/18/2021; CAP dated 04/21/2022.

R 400.15301	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.

During the onsite inspection completed on 11/08/2023, Resident A and Resident B did not have a 2022 and/or 2023 assessment plan on site and available for review.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report dated 11/18/2021; CAP dated 04/21/2022.

R 400.15306	Use of assistive devices.
	(2) An assistive device shall be specified in a resident's written assessment plan and agreed upon by the resident or the resident's designated representative and the licensee.

Resident A uses a walker, wheelchair, hospital bed, bedrails, and a gait belt. During the onsite inspection completed on 11/08/2023, Resident A did not have an assessment plan and therefore, her assistive devices were not specified in the written plan.

R 400.15306	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 uses a walker, wheelchair, hospital bed, bedrails, and a gait belt. During the onsite inspection completed on 11/08/2023, there was no prescriptions on file for these assistive devices.

R 400.15310	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.

During the onsite inspection completed on 11/08/2023, there were no weights on file for Resident A in December 2022, January 2023, March 2023, April 2023, May 2023, June 2023, and August 2023.

R 400.15315	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.

During the onsite inspection completed on 11/08/2023:

- Resident A did not have a Resident Funds and Valuables Part I form onsite and available for review.
- Resident A and Resident B did not have a Resident Funds and Valuables Part II form onsite and available for review.

R 400.15316	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: (e) Resident care agreement.

During the onsite inspection completed on 11/08/2023, Resident A did not have a 2022 and/or a 2023 Resident Care Agreement onsite and available for review.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report dated 11/18/2021; CAP dated 04/21/2022.

IV. RECOMMENDATION

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



11/09/2023

Date

Licensing Consultant