



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

January 16, 2024

Vini Voggu
Elderly Solutions, Inc.
100 Santure Road
Monroe, MI 48162

RE: License #: AS580291609
Elderly Solutions Inc - II
100 Santure Rd #2
Monroe, MI 48162

Dear Ms. Voggu:

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,

A handwritten signature in blue ink that reads "Pandora Robinson". The signature is written in a cursive, flowing style.

Pandrea Robinson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
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**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #: AS580291609

Licensee Name: Elderly Solutions, Inc.

Licensee Address: 100 Santure Road
Monroe, MI 48162

Licensee Telephone #: (734) 240-2374

Licensee/Licensee Designee: Vini Voggu

Administrator: Vini Voggu

Name of Facility: Elderly Solutions Inc - II

Facility Address: 100 Santure Rd #2
Monroe, MI 48162

Facility Telephone #: (734) 240-2374

Original Issuance Date: 09/12/2007

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
ALZHEIMERS
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/12/2024

Date of Bureau of Fire Services Inspection if applicable: 01/12/2024

Date of Health Authority Inspection if applicable: 01/12/2024

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

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.
- 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.
- 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 determined to be in substantial compliance with rules and requirements.

This facility was found to be in non-compliance with the following rules:

R 400.14204

Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.**
- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**
- (d) Personal care, supervision, and protection.**
- (e) Resident rights.**
- (f) Safety and fire prevention.**
- (g) Prevention and containment of communicable diseases.**

At the time of inspection, 2 of 4 employee records reviewed showed that the licensee designee failed to provide training in all required areas prior to staff performing assigned tasks. Staff, Anne Rockey started on 03/07/23 and was trained in all required areas except first aid and CPR on 10/13/23. Staff, Jalinia Mitchell started 05/10/23 and was not trained until 10/17/23. To date there is no verification that Ms. Mitchell has completed first aid and CPR training.

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.

(3) A licensee shall maintain, in the home, and make available for department review, 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 direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

At the time of inspection, staff Anne Rockey's employee record did not contain verification that she completed a physical within 30 days of hire. Ms. Rockey was hired on 03/07/23.

R 400.14208 Direct care staff and employee records.

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
- (e) Verification of experience, education, and training.

At the time of inspection, 2 of 4 employee records reviewed did not contain verification of education.

R 400.14312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

At the time of inspection, I observed that Resident A and B both had over the counter medications that staff were administering without prescriptions from their respective physicians.

- Resident A had the following;
- 500mg Cranberry Gummies
- Mucus relief tablets
- Vaporizing chest rub
- Nasal relief (pump mist spray)

Resident B had the following:

- Centrum Women 50+ multi-gummies
- Melatonin gummies (two separate gummies)
- Ibuprofen
- Magnesium

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.

At the time of inspection, licensee designee did not ensure that emergency and evacuation procedures were conducted during daytime, evening and sleeping hours at least once per quarter as required. During 2022 and 2023 no evening or sleep drills were conducted. Additionally, staff failed to evacuate the residents during some of the drills.

IV. RECOMMENDATION

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



Pandrea Robinson
Licensing Consultant

01/16/24
Date