



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 1, 2024

Daniel Bogosian
Moriah Incorporated
3200 E Eisenhower
Ann Arbor, MI 48108

RE: License #: AS810315443-Encore House
Investigation #: 2024A0575016

Dear Mr. Bogosian:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days.

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 contact the local office at (517) 284-9720.

Sincerely,

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AS810315443
Investigation #:	2024A0575016
Complaint Receipt Date:	06/12/2024
Investigation Initiation Date:	06/12/2024
Report Due Date:	07/12/2024
Licensee Name:	Moriah Incorporated
Licensee Address:	3200 E Eisenhower Ann Arbor, MI 48108
Licensee Telephone #:	(734) 677-0070
Administrator:	Daniel Bogosian
Licensee Designee:	Daniel Bogosian
Name of Facility:	Encore House
Facility Address:	2890 Easy Street Ann Arbor, MI 48108
Facility Telephone #:	(734) 677-0070
Original Issuance Date:	04/06/2012
License Status:	REGULAR
Effective Date:	10/24/2022
Expiration Date:	10/23/2024
Capacity:	6
Program Type:	DD; MI; TBI

II. ALLEGATION(S)

	Violation Established?
Facility is too small for the number of residents.	No
Resident A is not being repositioned to prevent skin breakdown.	Yes
There is no ventilation in Resident A's room.	No
Resident A's room is cluttered and not clean.	No
Resident A's room is too small for two residents.	No

III. METHODOLOGY

06/12/2024	Special Investigation Intake-2024A0575016
06/12/2024	Special Investigation Initiated - Telephone
06/12/2024	APS Referral
06/12/2024	Referral - Recipient Rights
06/12/2024	Contact - Telephone call made- (a) Resident A's spouse/guardian; (b) Stephanie Harris- program manager
06/18/2024	Inspection Completed On-site-(1) interviews with (a) Emily Hook-facility manager; (b) Resident A; (2) review of Resident A's AFC assessment plan, IPOS, health care appraisal, and nursing assessment.
06/18/2024	Contact- Telephone call made- Penny Patterson, RN-Eisenhower Center
06/18/2024	Inspection Completed-BCAL Sub. Compliance
06/18/2024	Exit Conference with licensee designee, Daniel Bogosian

ALLEGATION:

Facility is too small for the number of residents.

INVESTIGATION:

APS and ORR referrals were made/received.

On 6/18/2024, the original licensing study report (OLSR) dated 4/6/2012, licensed this facility for 5 residents. On 5/5/2015, I modified the license and increased the capacity to six residents. At the time of licensure, living space measurements were completed. According to licensing rule 405(1), a licensee shall provide not less than 35 square feet of indoor space, per occupant. This facility has been licensed since 4/6/2012 and meets this requirement.

APPLICABLE RULE	
R 400.14105	Licensed capacity.
	(1) The number of residents cared for in a home and the number of resident beds shall not be more than the capacity that is authorized by the license.
ANALYSIS:	Since this facility has been licensed as of 5/5/2015 for six residents, then the number of residents cared for in a home and the number of resident beds shall not be more than the capacity that is authorized by the license. Therefore, there is no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A is not being repositioned to prevent skin breakdown.

INVESTIGATION:

On 6/12/2024, I interviewed Resident A's spouse/guardian. She stated that she observed his buttocks to be red and alleged that Resident A has not been repositioned frequently enough which would have prevented this skin abrasion/breakdown. She also stated that she used to like this facility better but did not want to move Resident A to another facility.

On 6/18/2024, I interviewed Resident A. Due to his TBI and cognitive deficit, he was unable to communicate to answer any of my questions. He is wheelchair bound but can stand with assistance. He was not checked for skin breakdown/abrasions.

On 6/18/2024, I reviewed Resident A's assessment plan, IPOS, health care appraisal, and nursing assessment. None of these documents addresses Resident A's possible need for positioning to prevent skin breakdown.

On 6/18/2024, I interviewed Emily Hook, facility manager. She stated that Resident A has a new wheelchair that allows staff to rotate/tilt the wheelchair back at about a 45 degree angle to relieve the pressure off his buttocks to prevent skin breakdown. She stated the staff have only been given a verbal order to rotate/tilt Resident A, they haven't received any in-service training or documentation requirements from the nursing staff. Although, she stated the staff note in the daily log the 4-5 times per shift that Resident A is rotated/tilted.

On 6/18/2024, I interviewed Penny Patterson, RN. She stated Resident A is supposed to be repositioned every 2 hours to prevent skin breakdown and that he can stand in the bathroom with staff assistance. She stated that she will review Resident A's treatment plan with the nursing director.

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	Since Resident A needs to be repositioned to prevent skin breakdown and there is no plan/documentation to address his personal need, then Resident A's personal needs, including protection and safety, were not attended to at all times in accordance with the provisions of the act.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

There is no ventilation in Resident A's room.

INVESTIGATION:

On 6/18/2024, I observed Resident A's bedroom. It has two bedroom windows that are operable, the bedroom has forced air ventilation, and the whole facility is air conditioned.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.
ANALYSIS:	Since Resident A's bedroom has two operable windows, forced air and is air conditioned, then his room meets the rule requirement of having direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. Therefore, is no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A's room is cluttered and not clean.

INVESTIGATION:

On 6/18/2024, I observed Resident A's bedroom to be clean and neat.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

ANALYSIS:	Since Resident A's room was found to be clean and neat, then the facility furnishings and housekeeping standards presented a comfortable, clean, and orderly appearance. Therefore, there is no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A's room is too small for two residents.

INVESTIGATION:

At the time of licensure, bedroom measurements were completed. According to licensing rule R 400.14409(3), a multioccupancy resident bedroom shall not have less than 65 square feet of usable floor space per bed. The facility meets this requirement. On 5/5/2015 a modification of licensed capacity was approved to increase the capacity from five to six residents. The modification included approving bedrooms #4 and #5 to accommodate two residents.

APPLICABLE RULE	
R 400.14409	Bedroom space; "usable floor space" defined.
	(1) A multioccupancy resident bedroom shall have not less than 65 square feet of usable floor space per bed.
ANALYSIS:	Since a two resident bedroom requires a minimum of 130 square feet and this bedroom measures 204 square feet, then Resident A's bedroom is more than adequate size for two residents.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 6/18/2024, I conducted an exit conference with the licensee designee, Daniel Bogosian.

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable plan of correction; I recommend no changes in the status of the license.



Jeffrey J. Bozsik
Licensing Consultant

Date: 6/25/2024

Approved By:



Ardra Hunter
Area Manager

Date: 7/1/2024