



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 31, 2024

Eliyahu Gabay
True Care Living
565 General Ave.
Springfield, MI 49037

RE: License #: AH130405658
True Care Living
565 General Ave.
Springfield, MI 49037

Dear Eliyahu Gabay:

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 action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. Please review the enclosed documentation for accuracy and contact me with any questions. In the event 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,

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AH130405658
Licensee Name:	True Care Living Limited Liability Corporation
Licensee Address:	16135 Stratford Drive Southfield, MI 48075
Licensee Telephone #:	(818) 288-0903
Authorized Representative/Administrator:	Eliyahu Gabay
Name of Facility:	True Care Living
Facility Address:	565 General Ave. Springfield, MI 49037
Facility Telephone #:	(269) 968-3365
Original Issuance Date:	03/25/2021
Capacity:	147
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/28/2024

Date of Bureau of Fire Services Inspection if applicable: BFS – A; 12/19/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 10/28/2024

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 34
No. of others interviewed 0 Role N/A

- 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.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: June 2024 - October 2024 N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
- Number of excluded employees followed up? Yes N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1924	Reporting of incidents, accidents, elopement.
	<p>(1) The home shall complete a report of all reportable incidents, accidents, and elopements. The incident/accident report shall contain all of the following information:</p> <p>(a) The name of the person or persons involved in the incident/accident.</p> <p>(b) The date, hour, location, and a narrative description of the facts about the incident/accident which indicates its cause, if known.</p> <p>(c) The effect of the incident/accident on the person who was involved, the extent of the injuries, if known, and if medical treatment was sought from a qualified health care professional.</p> <p>(d) Written documentation of the individuals notified of the incident/accident, along with the time and date.</p> <p>(e) The corrective measures taken to prevent future incidents/accidents from occurring.</p>
ANALYSIS:	<p>Inspection revealed incident reports were incomplete or not completed in accordance with rule. The incident reports reviewed from August 2024 to October 2024 were missing information (ex. date, time, narrative description about incident, effect of incident, notification of individuals etc.) and corrective measures. Therefore, the facility is in violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1931	Employees; general provisions.
	<p>(5) The home shall have adequate and sufficient staff on duty at all times who are awake, fully dressed, and capable of providing for resident needs consistent with the resident service plans.</p>
ANALYSIS:	<p>Review of working staff schedules revealed multiple days from August 2024 to October 2024 in which there was not an</p>

	adequate number of staff working in the facility. Therefore, the facility is in violation.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1931	Employees; general provisions.
	<p>(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:</p> <ul style="list-style-type: none"> (a) Reporting requirements and documentation. (b) First aid and/or medication, if any. (c) Personal care. (d) Resident rights and responsibilities. (e) Safety and fire prevention. (f) Containment of infectious disease and standard precautions. (g) Medication administration, if applicable.
ANALYSIS:	Review of staff records revealed one staff member did not have annual training records. It could not be determined if the staff member received training in 2024. Therefore, the facility is in violation.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1932	Resident medications.
	<p>(3) If a home or the home's administrator or direct care staff member supervises the taking of medication by a resident, then the home shall comply with all of the following provisions:</p> <ul style="list-style-type: none"> (a) Be trained in the proper handling and administration of medication.
ANALYSIS:	Onsite inspection revealed Employee A did not complete medication administration to Resident A properly or safely. Employee A was witnessed setting the medication in front of Resident A and walking away instead of ensuring Resident A appropriately and safely consumed the medication at the time of administration. Therefore, the facility is in violation.

CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(12) Food service equipment and work surfaces shall be installed in such a manner as to facilitate cleaning and be maintained in a clean and sanitary condition, and in good repair.
ANALYSIS:	Inspection of the kitchen reveal the surfaces of the refrigerators and freezers doors were not clean or kept in a sanitary condition. Therefore, the facility is in violation.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(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.
ANALYSIS:	Review of the dishwasher sanitization logs for August 2024 through October 2024 revealed incomplete and/or blank entries of dishwasher sanitization temperatures. It could not be determined if the dishwasher was tested thoroughly to ensure cleanliness and sanitization of dishware and utensils due to the incomplete and/or blank entries. Therefore, the facility is in violation.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.

ANALYSIS:	On-site inspection revealed multiple food items were found unlabeled in the kitchen. These items were not labeled with the appropriate open date, and it could not be determined if the food items were safe for human consumption. An open date must be placed on all food items in the facility once opened. Therefore, the facility is in violation.
CONCLUSION	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.
	(1) The building, equipment, and furniture shall be kept clean and in good repair.
ANALYSIS:	Inspection revealed ceiling tiles in the common spa room on upstairs were in disrepair. Mold was also found in the two common spa rooms on the second floor and in the common area dining room cabinet on the second floor. The building shall be kept clean and in good repair. Therefore, the facility is in violation.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
ANALYSIS:	Inspection revealed several hazardous and toxic items stored in cabinets and in the common spa rooms easily accessible to anyone in the facility. This presents a potential risk of ingestion and harm to residents in the home with impaired cognition and/or function. Therefore, the facility is in violation.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

John H. ...

10/31/2024

Licensing Consultant

Date