



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 6, 2021

Kathryn Simpson
Progressive Lifestyles Inc
Suite 11A
6600 Highland Rd
Waterford, MI 48327

RE: License #: AS630012593
Hunt Club House
25491 Hunt Club
Farmington Hills, MI 48335

Dear Ms. Simpson:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance.
- You are to submit a Statement of Correction.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 dark ink that reads "Frodet Dawisha". The signature is written in a cursive, flowing style.

Frodet Dawisha, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 303-6348

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

I. IDENTIFYING INFORMATION

License #:	AS630012593
Licensee Name:	Progressive Lifestyles Inc
Licensee Address:	Suite 11A 6600 Highland Rd Waterford, MI 48327
Licensee Telephone #:	(248) 666-4136
Licensee/Licensee Designee:	Kathryn Simpson
Administrator:	Jennifer Bohne
Name of Facility:	Hunt Club House
Facility Address:	25491 Hunt Club Farmington Hills, MI 48335
Facility Telephone #:	(248) 478-6111
Original Issuance Date:	02/28/2002
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/17/2021

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 0
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.
- Meal preparation / service observed? Yes No If no, explain.
Inspection did not occur during mealtime
- 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 found to be in non-compliance with the following rules:

R 400.14207	Required personnel policies.
	(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record.

During the on-site inspection on 06/17/2021, I reviewed direct care staff Melanie Rogers' employee record and Ms. Rogers did not have a signed copy of the verification of job description in her employee file.

R 400.14312	Resident medications.
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

During the on-site inspection on 06/17/2021, I reviewed Resident A's medications and found the following medication errors:

- Benzonatate 100MG CAP: take one capsule by mouth three times a day as needed for cough was given 31 different times/days, but staff only recorded the reason for this as needed medication only seven times.

R 400.14401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

During the on-site inspection on 06/17/2021, the hot water temperature in the kitchen was 102.6° Fahrenheit, 99.5° Fahrenheit in bathroom #1, 100.2° Fahrenheit in bathroom #2, and 101.3° Fahrenheit in bathroom #3, which is below the range of 105°-120° Fahrenheit.

R 400.14505	Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions and changes of category.
	(2) Approved heat detectors may be installed in place of smoke detectors in the kitchen or bathroom and in other areas of the home that contain flame- or heat-producing equipment.

During the on-site inspection on 06/17/2021, there was no smoke/heat detector installed near the kitchen and laundry room.

A corrective action plan was requested and approved on 06/17/2021. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Frodet Dawisha 07/06/2021

 Frodet Dawisha Date
 Licensing Consultant