



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 22, 2021

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

RE: License #: AS630260392  
**High Meadow CLF**  
**29455 Highmeadow**  
**Farmington Hills, MI 48334**

Dear Mrs. 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**

<b>License #:</b>	AS630260392
<b>Licensee Name:</b>	Progressive Lifestyles Inc
<b>Licensee Address:</b>	Suite 11A 6600 Highland Rd Waterford, MI 48327
<b>Licensee Telephone #:</b>	(248) 666-4136
<b>Licensee/Licensee Designee:</b>	Kathryn Simpson
<b>Administrator:</b>	Jennifer Bohne
<b>Name of Facility:</b>	High Meadow CLF
<b>Facility Address:</b>	29455 Highmeadow Farmington Hills, MI 48334
<b>Facility Telephone #:</b>	(248) 626-1632
<b>Original Issuance Date:</b>	01/27/2004
<b>Capacity:</b>	5
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 07/22/2021

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.  
Meal preparation did not occur during inspection
- 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:

<b>R 400.14312</b>	<b>Resident medications.</b>
	<p>(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:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <p>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</p>

During the on-site inspection on 07/22/2021, I reviewed Resident A's medication logs and found the following errors:

- **Fluticasone 50MCG Spray:** spray one spray in each nostril everyday was sprayed on 03/23/2020 at 8PM, but staff did not initial the medication log.
- **Topriamate 100MG Tab:** take one tablet by mouth twice a day was given on 06/01/2020 at 8AM, but staff did not initial the medication log.
- **Levetiraceta 750MG Tab:** take one tablet by mouth twice a day was given on 06/01/2020 and 12/05/2020 at 8AM, but staff did not initial the medication log.
- **Amlodipine 5MG Tab:** take one tablet by mouth daily was given on 06/01/2020 and 12/25/2020 at 8AM, but staff did not initial the medication log.

<b>R 400.14401</b>	<b>Environmental health.</b>
	<p>(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.</p>

During the on-site inspection on 07/22/2021, bedroom #1 did not have a screen on the window.

<b>R 400.14507</b>	<b>Means of egress generally.</b>
	<p>(2) A means of egress shall be arranged and maintained to provide free and unobstructed egress from all parts of a small group home.</p>

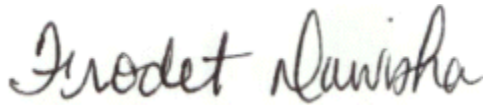
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During the on-site inspection on 07/22/2021, the door located in the kitchen that is utilized as a second means of egress was not opening/closing properly as it was getting stuck.

A corrective action plan was requested and approved on 07/22/2021. 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.



07/22/2021

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Frodet Dawisha  
Licensing Consultant

Date