



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 13, 2021

Manda Ayoub
Pomeroy Living Rochester Assisted
3466 South Blvd. W.
Rochester Hills, MI 48309

RE: License #: AH630338700
Pomeroy Living Rochester Assisted
3466 South Blvd. W.
Rochester Hills, MI 48309

Dear Ms. Ayoub:

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 that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (248) 975-5053

Sincerely,

A handwritten signature in cursive script that reads "Brender L. Howard".

Brender L. Howard, Licensing Staff
Bureau of Community and Health Systems
4th Floor, Suite 4B, 51111 Woodward Avenue
Pontiac, MI 48342
(313) 268-1788
enclosure

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

I. IDENTIFYING INFORMATION

License #: AH630338700

Licensee Name: Pomkal Rochester Assisted, LLC

Licensee Address: Suite 130
5480 Corporate Drive
Troy, MI 48098

Licensee Telephone #: (248) 354-7200

Authorized Representative: Manda Ayoub

Administrator: Teresa Harnos

Name of Facility: Pomeroy Living Rochester Assisted

Facility Address: 3466 South Blvd. W.
Rochester Hills, MI 48309

Facility Telephone #: (248) 564-2200

Original Issuance Date: 05/22/2015

Capacity: 84

Program Type: AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/09/2021

Date of Bureau of Fire Services Inspection if applicable: 10/5/20, 7/19/21

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 09/13/2021

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 23
No. of others interviewed 1 Role Resident's family member

- 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.
Interviewed staff on the policies and procedures.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: 8/17/21 N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
7/15/21 2021A1027042 1931(2); 8/5/20 2020A1019073 1933(1), 1921 (1),
1931 (2), 20201 (1); 9/3/20 2020A1011074 1922 (5), 1924 (3)
- Number of excluded employees followed up? N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
325.1964	Interiors.
	(9) Ventilation shall be provided throughout the facility in the following manner:
	(b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.
The residents' bathing/toilet facilities located in rooms 139, 145, 110, 159, and the janitor closet on the first floor lacked adequate and discernable air flow.	
325.1970	Water supply systems.
	(5) The plumbing system shall be designed and maintained so that the possibility of back flow or back siphonage is eliminated.
When water was turned on in residents' bathroom sink located in room 107, it was slow going down the drain, causing it to back up in the sink.	
325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
Refrigerators in rooms 134, 139, 141, and 110 did not have a thermometer.	

IV. RECOMMENDATION

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

Brenden D. Howard

9/13/21

Date

Licensing Consultant