

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 10, 2021

Amanda Germain
First & Main of Commerce Township
2500 Martin Parkway
Commerce Township, MI 48390

RE: License #:	AH630370124
	First & Main of Commerce Township
	2500 Martin Parkway
	Commerce Township, MI 48390

Dear Ms. Germain:

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 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 (517) 284-9730.

Sincerely,

Kimberly Horst, Licensing Staff

Kinveryttoox

Bureau of Community and Health Systems

611 W. Ottawa Street Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630370124	
Licensee Name:	F&M Commerce Township OPCO, LLC	
Licensee Address:	#2200	
	2221 Health Drive, SW	
	Wyoming, MI 49519	
Licensee Telephone #:	(616) 248-3566	
Licensee relephone #.	(010) 240-3300	
Authorized Representative/ Administrator:	Amanda Germain	
Name of Facility:	First & Main of Commerce Township	
Partit Address	0500 M (; D)	
Facility Address:	2500 Martin Parkway	
	Commerce Township, MI 48390	
Facility Telephone #:	(248) 387-2961	
Original Issuance Date:	02/02/2018	
Capacity:	157	
Program Type:	AGED ALZHEIMERS	

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 9/3/21					
Date of Bureau of Fire Services Inspection if applicable:		10/5/2020			
Inspection Type:	☐Interview and Observation ☐Combination	⊠Worksheet			
Date of Exit Conference:					
No. of staff interviewed an No. of residents interviewed No. of others interviewed	ed and/or observed	15 7			
Medication pass / sim	ulated 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. Resident funds not kept in trust. Meal preparation / service observed? Yes ⋈ No ☐ If no, explain. 					
 Fire drills reviewed? Yes ☐ No ☒ If no, explain. Diaster plans reviewed and staff interviewed. Water temperatures checked? Yes ☒ No ☐ If no, explain. 					
 Corrective action plan 5/6/20: R 325.1932; R 11/14/19: R 325.1932 	compliance verified? Yes 🔲 (A ⊠ CAP date/s and rule/s:			

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

—		
R 325.1922	Admission and retention of residents.	
	(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.	
documentation t	ble resident service plans revealed the facility was unable to provide that the changes to the service plan were communicated to the the authorized representative.	
R 325.1931	Employees; general provisions.	
	(2) A home shall treat a resident with dignity and his or her personal needs, including protection and safety, shall be attended to consistent with the resident's service plan.	
and services reg	rvice plan lacked any information on the methods of providing care garding implementation in the use of the halo ring devices, including resident to summon staff, methods for on-going monitoring of the	
resident, method the device and f	ds of monitoring the equipment by trained staff for maintenance of for monitoring measurements of gaps to protect the resident from the ysical harm related to entrapment, entanglement, strangulation, etc.	

IV. RECOMMENDATION

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

Kinveryttood	9/10/21	
Licensing Consultant		Date