

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 22, 2021

Rochelle Reneker-Rothwell Rose Hill Center Inc 5130 Rose Hill Blvd Holly, MI 48442

RE: License #: AL630007341

Kelly Community Center 5130 Rose Hill Boulevard

Holly, MI 48442

Dear Ms. Reneker-Rothwell:

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 plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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,

Kristen Donnay, Licensing Consultant Bureau of Community and Health Systems

Kisten Donnay

Cadillac Place, Ste 9-100

Detroit, MI 48202

(248) 296-2783

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

I. IDENTIFYING INFORMATION

License #:	AL630007341
Licensee Name:	Rose Hill Center Inc
Licensee Address:	5130 Rose Hill Blvd
	Holly, MI 48442
Licensee Telephone #:	(248) 634-5530
Licensee Designee:	Rochelle Reneker-Rothwell
Licensee Designee:	Nochelle Refleker-Rottiwell
Name of Facility:	Kelly Community Center
Facility Address:	5130 Rose Hill Boulevard
	Holly, MI 48442
Facility Telephone #:	(248) 634-5530
Original Issuance Date:	05/11/1992
Capacity:	20
Program Type:	MENTALLY ILL

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s): 09/22/2021		
Date	e of Bureau of Fire Services Inspection if applicable: 04/26/2021		
Date	e of Environmental/Health Inspection if applicable: 09/28/2021		
Insp	ection Type:		
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed N/A Role:		
•	Medication pass / simulated pass observed? Yes ⊠ No ☐ If no, explain.		
•	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain.		
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.		
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.		
•	Fire safety equipment and practices observed? Yes \boxtimes No \square If no, explain.		
•	E-scores reviewed? (Special Certification Only) Yes No NA NA 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:		
•	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 400.15301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

During the onsite inspection, Resident B's file did not contain an updated resident care agreement. The resident care agreement on file was dated 10/10/2019.

R 400.15312	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: (b) Complete an individual medication log that contains all of the following information: The medication. The dosage. Label instructions for use. Time to be administered. The initials of the person who administers the medication, which shall be entered at the time the medication is given. A resident's refusal to accept prescribed medication or procedures.

During the onsite inspection, I reviewed Resident B and Resident D's medication logs and noted the following:

- Resident B's September 2021 medication administration record (MAR) was not initialed on 09/12/21 for the 5:00pm dose of Austedo tab 12mg.
- Resident B's August 2021 MAR was not initialed on 08/03/2021 for the 7:30am dose of Fluticasone 50mcg.
- Resident D's August 2021 MAR indicated that Amphet/Dextr 5mg tab was discontinued from 08/08/21-08/09/21, but staff initialed the MAR on 08/09/21 and did not indicate that the medication was not passed or that there was an exception.

• Resident D was on a leave of absence on 09/04/21, but staff initialed the medication log and did not indicate that the medication was not passed or that there was an exception.

R 400.15401	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 onsite inspection, the water temperature was measured at 130°F in the bathrooms. The director of maintenance adjusted the mixing valve to correct the temperature following the onsite inspection.

IV. RECOMMENDATION

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

Kristen Donnay Date
Licensing Consultant