

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 8, 2022

Rosalia Aiello Roses Tender Home Care, LLC 43475 S. 94 Service Dr. Van Buren Twp., MI 48111

> RE: License #: AS820386195 Aiello Adult Foster Care 26071 Denning Rd New Boston, MI 48164

Dear Mrs. Aiello:

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 a Statement of Correction.

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 (313) 456-0380.

Sincerely,

Regina Buchanon

Regina Buchanan, Licensing Consultant Bureau of Community and Health Systems Cadillac PI. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 949-3029

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

I. IDENTIFYING INFORMATION

License #:	AS820386195	
Licensee Name:	Roses Tender Home Care, LLC	
Licensee Address:	43475 S. 94 Service Dr. Van Buren Twp., MI 48111	
Licensee Telephone #:	(734) 680-4216	
Licensee/Licensee Designee:	Rosalia Aiello	
Administrator:	Rosalia Aiello	
Name of Facility:	Aiello Adult Foster Care	
Facility Address:	26071 Denning Rd New Boston, MI 48164	
Facility Telephone #:	(734) 680-4216	
Original Issuance Date:	09/06/2017	
Capacity:	6	
Program Type:	AGED ALZHEIMERS	

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	03/04/2	022
Date of Bureau of Fire Services Ins	pection if applicable:	N/A
Date of Health Authority Inspection if applicable: N/A		
	rview and Observatior nbination	n ⊠ Worksheet □ Full Fire Safety
No. of staff interviewed and/or observed of residents interviewed and/or No. of others interviewed 0 F		0 3
● 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 I If no, explain. Meal preparation / service observed? Yes No X If no, explain. Residents had already eaten Fire drills reviewed? Yes No I If no, explain. 		
● Fire safety equipment and practices observed? Yes ⊠ No □ If no, explain.		
 E-scores reviewed? (Special Certification Only) Yes No N/A In N/A If no, explain. Water temperatures checked? Yes No I If no, explain. 		
● Incident report follow-up? Yes ⊠ No □ If no, explain.		
 Corrective action plan complian 02/25/2020-Rule 205 (3) N/A [Number of excluded employee 		CAP date/s and rule/s: N/A 🔀
• Variances? Yes 🗌 (please ex	plain) No 🗌 N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 400.14204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.
- (b) First aid.
- (c) Cardiopulmonary resuscitation.
- (d) Personal care, supervision, and protection.
- (e) Resident rights.
- (f) Safety and fire prevention.

(g) Prevention and containment of communicable diseases.

Staff, Arlene Denske, started employment on 08/02/2021 but all required training was not completed until 01/14/2022.

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home. Staff, Arlene Denske, did not obtain a physical health statement within 30 days of employment. She did not have a physical health statement in her file.

REPEAT VIOLATION {RENEWAL INSPECTION 02/25/2020}

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

Staff, Arlene Denske, did not obtain TB testing before working in the home. There were no TB test results in her file.

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.

The hot water temperature was 146 degrees Fahrenheit.

IV. RECOMMENDATION

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

Regina Buchanon

Regina Buchanan Licensing Consultant

03/08/2022

Date