



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 13, 2022

Steven Tyshka
Waltonwood at University II
3280 Walton Boulevard
Rochester Hills, MI 48309

RE: License #: AH630336571

Dear Mr. Tyshka:

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.

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 blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 347-5503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630336571
Licensee Name:	Waltonwood II Ltd Dividend Hsg Assoc L.P.
Licensee Address:	Suite #200 7125 Orchard Lake Road West Bloomfield, MI 48322
Licensee Telephone #:	(248) 865-1606
Authorized Representative:	Steven Tyshka
Name of Facility:	Waltonwood at University II
Facility Address:	3280 Walton Boulevard Rochester Hills, MI 48309
Facility Telephone #:	(248) 375-9664
Original Issuance Date:	11/26/2012
Capacity:	50
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/10/2022

Date of Bureau of Fire Services Inspection if applicable: 10/19/2021

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 05/13/2022

No. of staff interviewed and/or observed 13

No. of residents interviewed and/or observed 21

No. of others interviewed 0 Role

- 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. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
The Bureau of Fire Services is responsible for reviewing fire drills, however facility disaster planning procedures were reviewed.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 4 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

<p>This facility was found to be in non-compliance with the following rules and public health code statutes:</p>	
MCL 333.20173a	<p>Covered facility; employees or applicants for employment; prohibitions; criminal history check;</p>
	<p>(2) Except as otherwise provided in this subsection or subsection (5), a covered facility shall not employ, independently contract with, or grant privileges to an individual who regularly has direct access to or provides direct services to patients or residents in the covered facility until the covered facility or staffing agency has a criminal history check conducted in compliance with this section or has received criminal history record information in compliance with subsections (3) and (10).</p>
<p>Employee A was hired on 2/14/2022. The background eligibility clearance that was provided for Employee A was dated 6/29/2017. Administrator Jonathan Hills explained that this employee was a rehire and previously worked at the facility from 2017- 2020. At the time of this report, the facility had not produced proof of background clearance for the employee’s 2022 hire date.</p>	
R 325.1922	<p>Admission and retention of residents.</p>
	<p>(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home which consists of an intradermal skin test, chest x-ray, or other methods recommended by the local health authority performed within 12 months before admission.</p>

<p>Resident A moved into the facility on 05/26/2021 but there is no evidence of a TB screen on file for him prior to admission. Resident B moved into the facility on 03/02/2022 and had her TB screen completed on 03/04/2022, after she was admitted to the facility.</p>	
R 325.1932	Resident medications.
	(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.
<p>Medication administration records (MAR) for several were reviewed. During the timeframe reviewed, I observed that on 05/07/2022, Resident C did not receive scheduled doses of atorvastatin, metoprolol and preserision soft gel. Resident C's MAR was blank on the above-mentioned instances and therefore a reason for the missed medication administrations cannot be determined.</p>	
R 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.
<p>Exhaust ventilation was not functioning in the soiled linen room.</p>	
R 325.1972	Solid wastes.
	All garbage and rubbish shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.

The facility's commercial kitchen had numerous trash containers that were observed without lids.	
R 325.1976	Kitchen and dietary.
	(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.
The facility utilizes a three compartment sink and a commercial dish machine to sanitize dishes. Chemical test strips were utilized and documented on for the three compartment sink but were not for the commercial dish machine.	
R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
Multiple cleaning agents that contain toxic ingredients were observed under the sink in the activity room. The activity room doors were propped open that the cabinet that contained the agents did not have a lock on it.	

IV. RECOMMENDATION

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



05/13/2022

Elizabeth Gregory-Weil
Licensing Consultant

Date