



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 15, 2022

John Putz
Rockwood Childrens Home Inc
21511 Huron River Dr.
Rockwood, MI 49173

RE: License #: AL820007551
Rockwood Home
21511 Huron River Dr
Rockwood, MI 48173

Dear Mr. Putz:

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 (313) 456-0380.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Denasha Walker'.

Denasha Walker, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 300-9922

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

I. IDENTIFYING INFORMATION

License #:	AL820007551
Licensee Name:	Rockwood Childrens Home Inc
Licensee Address:	21511 Huron River Dr. Rockwood, MI 48173
Licensee Telephone #:	(734) 379-9361
Licensee/Licensee Designee:	John Putz
Administrator:	Christine Putz
Name of Facility:	Rockwood Home
Facility Address:	21511 Huron River Dr Rockwood, MI 48173
Facility Telephone #:	(734) 379-9361
Original Issuance Date:	12/29/1975
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

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

Date of Bureau of Fire Services Inspection if applicable: 05/03/2022

Date of Health Authority Inspection if applicable:

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination ☐ Full Fire Safety

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 8

No. of others interviewed 1 Role: Administrator

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
A full worksheet inspection was completed
- 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 ☐ If no, explain.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☒ No ☐ If no, explain.
- Fire safety equipment and practices observed? Yes ☒ No ☐ If no, explain.
- E-scores reviewed? (Special Certification Only) Yes ☐ No ☐ N/A ☒
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:
CAP Dated 06/24/2020 R 400.15205 (3), R 400.15205 (5), R 400.15301 (10),
R 400.15301 (4), R 400.15301 (9), R 400.15312 (1) N/A ☐
- 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 400.15208 Direct care staff and employee records.

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
- (e) Verification of experience, education, and training.

At the time of inspection, direct care staff Richard Waugh employee file did not contain verification of training.

Richard was hired on 4/16/2022, he is currently on the schedule and performing assigned tasks in the home.

R 400.15301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

- (10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection, Residents A, D and E resident files did not contain annual health care appraisals. Their records were missing the following:

Resident A

- File did not contain an annual 2020 health care appraisal.
- File did not contain an annual 2021 health care appraisal.

Resident D

- File did not contain an annual 2020 health care appraisal.
- File did not contain an annual 2021 health care appraisal.

Resident F

- File did not contain an annual 2020 health care appraisal.
- File did not contain an annual 2021 health care appraisal.

***REPEAT VIOLATION ESTABLISHED* LSR DATED 06/08/2020; CAP DATED 06/24/2020.**

R 400.15301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

At the time of inspection, Resident E resident files did not contain annual 2022 assessment plan.

***REPEAT VIOLATION ESTABLISHED* LSR DATED 06/08/2020; CAP DATED 06/24/2020.**

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.

At the time of inspection, Resident A, C and F resident files did not contain annual resident care agreement. Their records were missing the following:

Resident A

- File did not contain an annual 2022 resident care agreement.

Resident C

- File did not contain an annual 2020 resident care agreement.

Resident F

- File did not contain an annual 2022 resident care agreement.

***REPEAT VIOLATION ESTABLISHED* LSR DATED 06/08/2020; CAP DATED 06/24/2020.**

R 400.15315 Handling of resident funds and valuables.

(5) All resident funds, which includes bank accounts, shall be kept separate and apart from all funds and monies of the licensee. Interest and dividends earned on resident funds shall be credited to the resident. Payments for care for the current month may be used by the licensee for operating expenses.

At the time of inspection, Residents D, G, E and F were not kept separate from the licensee. Administrator Christine Putz explained that the resident funds are deposited into Rockwood Children's Home Inc bank account and some of their personal allowance remains in the account because she goes shopping for them.

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.

At the time of inspection, the hot water temperature for resident's use in the bathroom located in bedroom H registered at 85.8 degrees Fahrenheit at the faucet.

R 400.15403 Maintenance of premises.

(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

At the time of inspection, the showers and bath areas in resident's bathroom in the north hallway was not equipped with nonskid surfaces.

R 400.15403 Maintenance of premises.

(14) Hot water pipes and steam radiators that are located in resident occupied areas shall be shielded to protect against burns.

At the time of inspection, the heat radiator was exposed and not shielded to protect against burns.

R 400.15403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

At the time of inspection, the following was not in good repair:

- The paint on the ceiling was peeling in bedroom C.
- The tile on the wall is unfinished in the resident's bathroom located in the north hallway.

R 400.15407 Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

At the time of inspection, the following resident bathroom doors were not positive-latching; bedroom H bathroom and the north hallway.

R 400.15410 Bedroom furnishings.

(2) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.

At the time of inspection, resident bedrooms A, F and G, were not equipped with a mirror appropriate for grooming.

R 400.15410

Bedroom furnishings.

(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a waterbed is not prohibited by this rule.

At the time of inspection, resident bedrooms A, D, F, G, and H were not equipped with a mattress in good condition and well protected.

The home is licensed for 20 residents but is currently furnished with 15 mattresses.

IV. RECOMMENDATION

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



5/16/2022

Denasha Walker
Licensing Consultant

Date