



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 20, 2022

Jennifer Bhaskaran
Alternative Services Inc.
Suite 10
32625 W Seven Mile Rd
Livonia, MI 48152

RE: License #: AS630309665
Pine Lake
1686 Square Lake Rd.
Bloomfield, MI 48302

Dear Ms. Bhaskaran:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed. It is valid only at your present address and is nontransferable.

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 and special certification 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,

A handwritten signature in cursive script, appearing to read "DaShawnda Lindsey".

DaShawnda Lindsey, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(248) 505-8036

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

I. IDENTIFYING INFORMATION

License #: AS630309665

Licensee Name: Alternative Services Inc.

Licensee Address: Suite 10
32625 W Seven Mile Rd
Livonia, MI 48152

Licensee Telephone #: (248) 471-4880

Licensee/Licensee Designee: Jennifer Bhaskaran

Administrator: Jennifer Bhaskaran

Name of Facility: Pine Lake

Facility Address: 1686 Square Lake Rd.
Bloomfield, MI 48302

Facility Telephone #: (248) 471-4880

Original Issuance Date: 02/11/2011

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/19/2022

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

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 6

No. of others interviewed 1 Role: licensee designee/admin.

- 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 If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
The inspection did not occur during a meal time.
- 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.
There were no incident reports that required a follow-up
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
Renewal 2020- as301(4), as318(5) and as204(3)(b)(c) 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 400.14204	Direct care staff; qualifications and training.
	<p>(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:</p> <ul style="list-style-type: none"> (b) First aid. (c) Cardiopulmonary resuscitation.
<p>Staff Sandra Hairston's First Aid and CPR certification expired in July 2021. There was no verification Ms. Hairston has current certification.</p> <p>REPEAT VIOLATION ESTABLISHED. Reference LSR 08/11/2020. CAP 08/26/2020.</p>	
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.
	<p>(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.</p>
<p>There was no verification staff Brenda Hollis and Ms. Hairston completed an annual health review in 2021.</p>	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	<p>(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</p>

	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.
Resident A was admitted into the facility on 07/09/2020. Her health review was not completed until 08/27/2020. In addition, there was no verification a health review was completed for Resident A in 2021.	
R 400.14301	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.
There was no verification an assessment plan was completed for Resident A in 2021. Resident B's assessment plan was not signed by licensee designee Jennifer Bhaskaran in 2021. REPEAT VIOLATION ESTABLISHED. Reference LSR 08/11/2020. CAP 08/26/2020.	
R 400.14301	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.
There was no verification a resident care agreement was completed for Resident A in 2021. Resident B's resident care agreement was not signed by licensee designee Jennifer Bhaskaran in 2021.	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.

The following fire drills took 14 minutes or longer:

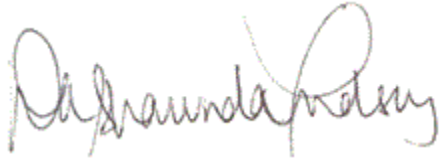
- July 2020 15 minutes afternoon shift
- March 2021 15 minutes and 18 seconds midnight shift
- September 2021 25 minutes and six seconds midnight
- March 2022 14 minutes midnight shift
- May 2022 15 minutes
- June 2022 18 minutes and 36 seconds

There is concern about the evacuation times during the midnight shift. The fire drill practices may need to be revised, more staff added to the shift and/or something else may need to be completed to shorten the time it takes to evacuate the facility.
This concern was addressed during the renewal inspection in 2020.

R 400.14316	Resident records.
	<p>(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:</p> <ul style="list-style-type: none"> (a) Identifying information, including, at a minimum, all of the following: <ul style="list-style-type: none"> (viii) Funeral provisions and preferences.
<p>There were no burial provisions documented for Resident A.</p>	
R 400.14403	Maintenance of premises.
	<p>(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.</p>
<p>The walls through the facility as well as the kitchen ceiling need to be cleaned, repaired and/or painted.</p>	
R 400.14506	Fire extinguishers; location, examination, and maintenance.
	<p>(1) A minimum of 1 underwriters laboratories approved 2A 10BC extinguisher or equivalent shall be provided for use in a small group home on each occupied floor and in the basement.</p>
<p>There was not a fire extinguisher in the basement.</p>	

IV. RECOMMENDATION

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



07/20/2022

DaShawnda Lindsey
Licensing Consultant

Date