



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 28, 2022

Joanne Garza
Plum Grove Senior Living, LLC
49252 Bulldog Drive
Macomb, MI 48044

RE: License #: AS500401586
Plum Grove Senior Living
45260 Plum Grove Dr
Macomb, MI 48044

Dear Mrs. Garza:

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 documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 285-1703

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

I. IDENTIFYING INFORMATION

License #:	AS500401586
Licensee Name:	Plum Grove Senior Living, LLC
Licensee Address:	49064 Cranbrook Dr Macomb, MI 48044
Licensee Telephone #:	(586) 321-9555
Licensee/Licensee Designee:	Joanne Garza
Administrator:	Joanne Garza
Name of Facility:	Plum Grove Senior Living
Facility Address:	45260 Plum Grove Dr Macomb, MI 48044
Facility Telephone #:	(586) 321-9555
Original Issuance Date:	01/29/2020
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/28/2022

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 4
No. of others interviewed 1 Role: Licensee Designee

- Medication pass / simulated pass observed? Yes No If no, explain.
Reviewed medication passing procedures with licensee designee.
- 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:
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> <p>(d) Personal care, supervision, and protection.</p>
	<p>Staff, Herminia Agapito and Jeelyn Garza, did not have verification of personal care, supervision and protection training in employee files.</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>Staff, Jeelyn Garza, did not have an annual health review in employee file.</p>
R 400.14312	Resident medications.
	<p>(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:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <p>(ii) The dosage.</p> <p>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</p>

Resident A's medication log did not include the dosage for Venlafaxine XR Caps. Resident A's medication log was not initiated by staff on 07/08/2022 and 07/11/2022 for Ammonium lactate.

Resident B's medication log was not initiated by staff on 07/08/2022 for Omeprazole 20 mg.

Resident C's medication log was not initiated by staff on 06/23/2022 for Senna 8.6 mg.

A corrective action plan was requested and approved on 07/28/2022. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

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



07/28/2022

Kristine Cilluffo
Licensing Consultant

Date