

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

July 1, 2022

Ronald Dolzani 8035 Hidden Shores Dr. Fenton, MI 48430

RE: License #:	AM250399240
	Warwick AFC LLC
	5296 Warwick Trail
	Grand Blanc, MI 48439

Dear Mr. Dolzani:

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.

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 (517) 284-9700.

Sincerely,

Shamidah Wyden, Licensing Consultant

Bureau of Community and Health Systems

411 Genesee

P.O. Box 5070

Saginaw, MI 48607

989-395-6853

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

### I. IDENTIFYING INFORMATION

License #:	AM250399240
Licensee Name:	Ronald Dolzani
Licensee Address:	4528 Stewart Road
	Metamora, MI 48455
Licensee Telephone #:	(505) 463-7349
Licensee:	Ronald Dolzani
LICEIISCE.	TOTIAIU DOIZAIII
Administrator:	Ronald Dolzani
Name of Facility:	Warwick AFC LLC
	5000 M/
Facility Address:	5296 Warwick Trail
	Grand Blanc, MI 48439
Facility Telephone #:	(810) 344-7444
Original Issuance Date:	01/10/2020
Capacity:	11
oupuoity.	11
Program Type:	AGED

# II. METHODS OF INSPECTION

Date	of On-site Inspection(s): 06/22/2022		
Date	of Bureau of Fire Services Inspection if applicable: 12/17/2021		
Date	of Health Authority Inspection if applicable: N/A		
Insp	ection Type:  ☐ Interview and Observation ☐ Worksheet ☐ Combination ☐ Full Fire Safety		
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed  1 Role: Licensee		
•	Medication pass / simulated pass observed? Yes ⊠ No □ If no, explain.		
•	Medication(s) and medication record(s) reviewed? Yes $oxtimes$ No $oxtimes$ 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.  This inspection was not conducted during mealtime.  Fire drills reviewed? Yes No If no, explain.		
•	Fire safety equipment and practices observed? Yes 🗵 No 🗌 If no, explain.		
	<ul> <li>E-scores reviewed? (Special Certification Only) Yes ☐ No ☐ N/A ☐ If no, explain.</li> <li>Water temperatures checked? Yes ☐ No ☐ If no, explain.</li> </ul>		
•	There were no incident reports requiring follow-up		
•	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 400.14203	Licensee and administrator training requirements.
	(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:  (a) Participate in and successfully complete 16 hours.
	(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.
At the time of ins annual training c	spection, licensee Ronald Dolzani did not have 16 hours of required ompleted.
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.
	(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
At the time of ins	department review. spection, there were no annual health reviews on file for staff.
R 400.14207	Required personnel policies.
	<ul><li>(1) A licensee shall have written policies and procedures that include all of the following:</li><li>(a) Mandatory reporting, including reporting that is required by law.</li></ul>
	<ul> <li>(b) Resident care related prohibited practices.</li> <li>(c) Confidentiality requirements, including requirements specified in law.</li> </ul>
	<ul><li>(d) Training requirements.</li><li>(e) Resident rights.</li><li>(f) The process for reviewing the licensing statute and administrative rules.</li></ul>

R 400.14207	Required personnel policies.
	(2) The written policies and procedures identified in subrule (1)
	of this rule shall be given to employees and volunteers at the
	time of appointment. A verification of receipt of the policies and
	procedures shall be maintained in the personnel records.
At the time of ins	spection, verification of receipt of the policies and procedures were
	iff Glenda Jackson.
R 400.14207	Required personnel policies.
	(3) A licensee shall have a written job description for each
	position. The job description shall define the tasks, duties, and
	responsibilities of the position. Each employee and volunteer
	who is under the direction of the licensee shall receive a copy of
	his or her job description. Verification of receipt of a job
	description shall be maintained in the individuals personnel
	record.
At the time of ins	spection, there was no verification of receipt of job description on file
for staff Glenda 、	
R 400.14208	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:
	The second content of
	(e)Verification of experience education and training
At the time of ins	(e)Verification of experience, education, and training.
	(e)Verification of experience, education, and training. spection, there was no verification of education, or verification of nistration training on file for staff Glenda Jackson.
medication admi	spection, there was no verification of education, or verification of
medication admi	pection, there was no verification of education, or verification of nistration training on file for staff Glenda Jackson.  Direct care staff and employee records.
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medication admi R 400.14208  At the time of ins	pection, there was no verification of education, or verification of nistration training on file for staff Glenda Jackson.  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:  (f) Verification of reference checks.  spection, verification of reference checks was not completed and on
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R 400.14208  At the time of ins file for Staff Glen	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:  (f) Verification of reference checks.  spection, verification of reference checks was not completed and on ida Jackson.
R 400.14208  At the time of ins file for Staff Glen	pection, there was no verification of education, or verification of nistration training on file for staff Glenda Jackson.  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: (f)Verification of reference checks. spection, verification of reference checks was not completed and on ada Jackson.  Resident admission criteria; resident assessment plan; emergency admission; resident care agreement;

	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.
-	ection, Resident A did not have a completed, up to date, health
care appraisal on fi	le.
R 400.14301	Resident admission criteria; resident assessment plan;
	emergency admission; resident care agreement;
	physician's instructions; health care appraisal.
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	(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 inspe outdated.	ection, Resident A's assessment plan dated for 05/12/2021 was
R 400.14316	Resident records.
	(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:  (a) Identifying information, including, at a minimum, all of the following:  (viii) Funeral provisions and preferences.
At the time of inspection, Resident A's funeral provisions were not recorded in the resident file.	
R 400.14316	Resident records.
	(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:  (b) Date of admission.

R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(3) A telephone shall be available and accessible in a home. Emergency telephone numbers shall, at a minimum, include fire police, and medical emergency services and shall be conspicuously posted immediately adjacent to telephones.
At the time of in	spection, emergency telephone numbers were not posted.
R 400.14401	Environmental health.
	(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.
windows that did	spection, it was observed that there were a few resident bedroom d not have window screens installed.
R 400.14402	Food service.
	(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.
At the time of insa thermometer.	(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with
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R 400.14403	Maintenance of premises.
	(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.
At the time of insp	pection, the bathtubs did not have nonskid surfacing or a bathtub
R 400.14408	Bedrooms generally.
	(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, nonlocking-against-egress hardware.
At the time of inspection, bedroom #8 was not equipped with positive latching, nonlocking against egress hardware.	
R 400.14410	Bedroom furnishings.
	(2) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.
At the time of insp	pection bedrooms (#1, #2, and #5) were not equipped with a mirror.
R 400.15205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(4) A licensee shall provide the department with written evidence that he or she is and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every three years after.
At the time of insp to-date TB test.	pection, licensee Ronald Dolzani did not have verification of an up-

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, and receipt of an acceptable Bureau of Fire Services report, I recommend issuance of a two-year regular adult foster care license.

Shamidah Wyden Date Licensing Consultant