



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 25, 2022

Caroline Anderson AND Colleen Cassidy  
22467 Paddington Ct  
Novi, MI 48374

RE: License #: AS630390815  
**Essence Memory Care LLC**  
**20800 Chigwidden St**  
**Northville, MI 48167**

Dear Ms. Anderson and Ms. Cassidy:

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 (248) 975-5053.

Sincerely,

A handwritten signature in dark ink, reading "Frodet Dawisha". The signature is written in a cursive, flowing style.

Frodet Dawisha, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place, Ste 9-100  
Detroit, MI 48202  
(248) 303-6348

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630390815
<b>Licensee Name:</b>	Colleen Cassidy AND Caroline Anderson
<b>Licensee Address:</b>	22467 Paddington Ct Novi, MI 48374
<b>Licensee Telephone #:</b>	(248) 506-1634
<b>Licensee/Licensee Designee:</b>	Caroline Anderson/Colleen Cassidy
<b>Administrator:</b>	Colleen Cassidy
<b>Name of Facility:</b>	Essence Memory Care LLC
<b>Facility Address:</b>	20800 Chigwidden St Northville, MI 48167
<b>Facility Telephone #:</b>	(248) 308-9607
<b>Original Issuance Date:</b>	02/01/2018
<b>Capacity:</b>	6
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/20/2022

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 2 Role: licensee designees

- 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.  
Meal preparation did not occur during inspection
- 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:

<b>R 400.14312</b>	<b>Resident medications.</b>
	(2) Medication shall be given, taken, or applied pursuant to label instructions.

During the on-site inspection on 07/20/2022, I reviewed Resident A's medications and medication logs and found the following error:

- **Acetaminophen TAB 500MG:** take one tablet by mouth twice a day was not given in the AM on 07/18/2022 as the pill was still inside the blister pack.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(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: (b) Complete an individual medication log that contains all of the following information: (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

During the on-site inspection on 07/20/2022, I reviewed Resident A's and Resident B's medication logs and found the following errors:

- Resident A's **Acetaminophen TAB 500MG:** take one tablet by mouth twice a day was not given in the AM on 07/18/2022, but staff initialed the medication log.
- Resident A's **Sertraline HCL 50MG:** take one tablet by mouth every evening was given in the evening on 12/03/2021, but staff did not initial the medication log.
- Resident B's **Memantine 10MG:** take one tablet by mouth every evening was given on in the evening on 05/03/2022, but staff did not initial the medication log.

<b>R 400.14318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

During the on-site inspection on 07/20/2022, I was informed by licensee designee Colleen Cassidy that sleep evacuation and practice drills were conducted as “mock drills,” the residents were not fully evacuated outside of the home for 2021 and 2022.

<b>R 400.14407</b>	<b>Bathrooms.</b>
	(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.

During the on-site inspection on 07/20/2022, the ½ bathroom located in the laundry room was not equipped with positive-latching, non-locking-against-egress hardware.

#### IV. RECOMMENDATION

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



07/25/2022

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Frodet Dawisha  
Licensing Consultant

Date