

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

October 5, 2022

Claudiu Marit 5670 Greer Road West Bloomfield, MI 48324

RE: License #: AS630401755

Ahava Senior Living 5670 Greer Rd

West Bloomfield, MI 48324

Dear Mr. Marit:

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,

Frodet Dawisha, Licensing Consultant Bureau of Community and Health Systems

Irrodet Navisha

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

License #:	AS630401755
Licensee Name:	Claudiu Marit
Licensee Address:	1825 Hiller Road
	West Bloomfield, MI 48324
Licensee Telephone #:	(248) 760-6543
Administrator/Licensee Designee:	Claudiu Marit
Name of Facility	Above Conion Living
Name of Facility:	Ahava Senior Living
Facility Address:	5670 Greer Rd
l acility Address.	West Bloomfield, MI 48324
	Wood Bloomingia, Wil 1002 i
Facility Telephone #:	(248) 760-6543
Original Issuance Date:	05/14/2020
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	AGED
	TRAUMATICALLY BRAIN INJURED ALZHEIMERS
	ALZHEIIVIERO

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	10/03/20	022
Date	e of Bureau of Fire Services Inspection if appl	icable:	N/A
Date	e of Health Authority Inspection if applicable:	07/26/2	022
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: licensee	designe	2 6 e
•	Medication pass / simulated pass observed?	Yes 🛚	No ☐ If no, explain.
•	Medication(s) and medication record(s) revie	wed? Yo	es 🗵 No 🗌 If no, explair
•	Resident funds and associated documents re Yes No I If no, explain. Meal preparation / service observed? Yes		
•	Fire drills reviewed? Yes ⊠ No ☐ If no, ex	cplain.	
•	Fire safety equipment and practices observed	d? Yes[⊠ No If no, explain.
•	E-scores reviewed? (Special Certification On If no, explain. Water temperatures checked? Yes ⊠ No □		
•	Incident report follow-up? Yes ⊠ No ☐ If r	no, expla	in.
•	Corrective action plan compliance verified? `N/A ⊠ Number of excluded employees followed-up?	_	CAP date/s and rule/s: 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 400.14312	Resident medications.
	 (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: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

During the on-site inspection on 10/03/2022, I reviewed Resident A's medication logs and found the following medication errors:

Lorazepam 0.5MG: take one tablet by mouth two times daily as needed for anxiety was given on 0601/2021-06/03/2021, 06/07/2021, 06/08/2021, 06/11/2021, 06/12/2021, 06/14/2021, 06/16/2021, 06/20/2021-06/24/2021, 06/26/2021-06/30/2021, 12/03/2021, 12/05/2021, 12/08/2021, 12/09/2021, 12/23/2021, 12/30/2021 and 12/31/2021, but the reason for this as needed medication was not recorded.

R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(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 10/03/2022, I reviewed the emergency and evacuation practice and procedures for 2021 and 2022. There were missing evacuation drills for evening and sleeping hours in the first quarter of 2022 and a missing day evacuation drill in the second quarter of 2022.

IV. RECOMMENDATION

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

10/05/2022

Frodet Dawisha

Grodet Navisha

Date

Licensing Consultant