



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 28, 2022

Michael Piagentini
Sandyside Senior Living
8257 Peaceful Vly
Clarkston, MI 48348

RE: License #: AL630388808
Sandyside Senior Living
9259 Sandyside
White Lake, MI 48386

Dear Mr. Piagentini:

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.
- You are to submit a Statement of Correction.

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 "Frodet Dawisha".

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

License #:	AL630388808
Licensee Name:	Sandyside Senior Living
Licensee Address:	9259 Sandyside White Lake, MI 48386
Licensee Telephone #:	(248) 670-2618
Licensee/Licensee Designee:	Michael Piagentini
Administrator:	Timothy Nye
Name of Facility:	Sandyside Senior Living
Facility Address:	9259 Sandyside White Lake, MI 48386
Facility Telephone #:	(248) 698-3700
Original Issuance Date:	06/06/2018
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/28/2022

Date of Bureau of Fire Services Inspection if applicable: 05/17/2022

Date of Health Authority Inspection if applicable: 08/23/2022

No. of staff interviewed and/or observed 5
No. of residents interviewed and/or observed 20
No. of others interviewed 2 Role: Licensee/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.
- 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 400.15401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

During the on-site inspection on 11/28/2022, the hot water was outside the safe range of 105°-120° Fahrenheit in the kitchen (127.8°) and in bathroom #1 (124.3°).

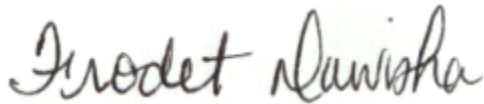
R 400.15403	Maintenance of premises.
	(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

During the on-site inspection on 11/28/2022, there was no nonskid surface installed in the shower in bathroom #1. A shower mat was being used.

A corrective action plan was requested and approved on 11/28/2022. 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.



11/28/2022

Frodet Dawisha
Licensing Consultant

Date