



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 2, 2022

Hersel Fouladbash
Rose Gardan Inc.
176 N. Main St.
Elkton, MI 48731

RE: License #:	AL320385433 Rose Gardan, Inc 176 N. Main Elkton, MI 48731
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Dear Mr. Fouladbash:

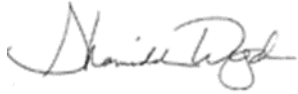
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (517) 643-7960.

Sincerely,

A handwritten signature in cursive script, appearing to read "Shamidah Wyden".

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 #:	AL320385433
Licensee Name:	Rose Gardan Inc.
Licensee Address:	176 N. Main St. Elkton, MI 48731
Licensee Telephone #:	(989) 553-2700
Licensee Designee:	Hersel Fouladbash
Administrator:	Chris Roth
Name of Facility:	Rose Gardan, Inc
Facility Address:	176 N. Main Elkton, MI 48731
Facility Telephone #:	(989) 553-2700
Original Issuance Date:	06/08/2022
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/29/2022

Date of Bureau of Fire Services Inspection if applicable: 01/26/2022

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 15

No. of others interviewed 1 Role: Administrator

- 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.
This inspection was not conducted during meal-time.
- 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.
There were no recent incident reports requiring follow-up.
- 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

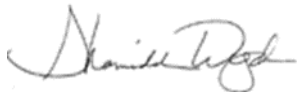
III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 400.15312	Resident medications.
	<p>(4)(b) Complete an individual medication log that contains all of the following information:</p> <p>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</p>
At the time of inspection, the medication administration records were missing staff initials for 11/27/2022 for multiple medications passes for Resident A, Resident B, Resident C, and Resident D.	
R 400.15316	Resident records.
	<p>(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:</p> <p>(a) Identifying information, including, at a minimum, all of the following:</p> <p>(viii) Funeral provisions and preferences.</p>
At the time of inspection, there were no burial provisions noted for Resident E in his resident record.	
R 400.15402	Food service.
	<p>(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.</p>

At the time of inspection, the refrigerator in room 217 had a temperature reading above 40 degrees Fahrenheit. The thermometer in kitchen's deep freezer was inoperable.	
R 400.15403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
At the time of inspection, in room number 215, the bathroom walls behind the toilet were dirty and in need of cleaning. The toilet seat also appeared to be needing replacement due to wear and tear. The bathroom faucet in room 213's bathroom was dirty and in need of being cleaned.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend issuance of a regular license to this AFC large group home (capacity 20).



12/02/2022

Shamidah Wyden
Licensing Consultant

Date