

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 31, 2023

Rochelle Reneker-Rothwell Rose Hill Center Inc 5130 Rose Hill Blvd Holly, MI 48442

> RE: License #: AL630065742 Polk House 5130 Rose Hill Blvd Holly, MI 48442

Dear Ms. Reneker-Rothwell:

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 designee 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,

Kisten Donnay

Kristen Donnay, Licensing Consultant Bureau of Community and Health Systems Cadillac Place 3026 W. Grand Blvd., Ste. 9-100 Detroit, MI 48202 (248) 296-2783

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

I. IDENTIFYING INFORMATION

License #:	AL630065742
Licensee Name:	Rose Hill Center Inc
Licensee Address:	5130 Rose Hill Blvd
	Holly, MI 48442
Licensee Telephone #:	(248) 634-5530
Licensee/Licensee Designee:	Rochelle Reneker-Rothwell
Name of Facility:	Polk House
Facility Address:	5130 Rose Hill Blvd
	Holly, MI 48442
Facility Telephone #:	(248) 634-5537
	05/44/4005
Original Issuance Date:	05/11/1995
Capacity:	20
Program Type:	MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/27/2023

Date of Bureau of Fire Services Inspection if applicable: 05/13/2022

Date of Environmental/Health Inspection if applicable: 03/15/2023

No. of staff interviewed and/or observed		
No. of residents interviewed and/or observed		
No. of others interviewed	Role:	

- 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.
 Inspection did not occur 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.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed-up? N/A \boxtimes
- 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 400.15203	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 of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

During the renewal inspection, there was no documentation available to review showing that the licensee designee completed 16 hours of training annually.

R 400.15315	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

During the renewal inspection, there were no funds forms available to review showing the cost of care payments for Resident A or Resident B.

IV. RECOMMENDATION

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

Kisten Dov

03/31/2023

Kristen Donnay Licensing Consultant Date