

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.
	<ul> <li>(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:</li> <li>(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.</li> </ul>

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