



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 7, 2023

Lance Davis
Sunrise Assisted Living of Bloomfield
2080 S. Telegraph Rd
Bloomfield Hills, MI 48302

RE: License #: AH630399613

Dear Mr. Davis:

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. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 home for the aged authorized representative and a date.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 347-5503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630399613
Licensee Name:	SZR Bloomfield Senior Living Opco, LLC
Licensee Address:	Suite 200 500 N. Hurstbourne Pkwy Louisville, KY 40222-3301
Licensee Telephone #:	(502) 357-9029
Authorized Representative and Administrator:	Lance Davis
Name of Facility:	Sunrise Assisted Living of Bloomfield
Facility Address:	2080 S. Telegraph Rd Bloomfield Hills, MI 48302
Facility Telephone #:	(248) 972-0800
Original Issuance Date:	01/08/2020
Capacity:	114
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/07/2023

Date of Bureau of Fire Services Inspection if applicable: 05/08/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 06/07/2023

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 32

No. of others interviewed 0 Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
The Bureau of Fire Services reviews fire drills, however facility disaster planning procedures were reviewed.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A, special investigations for the previous two license periods were all full compliance.
- Number of excluded employees followed up? N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following administrative rules regulating home for the aged facilities:

R 325.1923 Employee's health.

(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005? (<http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.

Employee 1 was hired on 6/8/22. The facility was unable to locate Employee 1's initial tuberculosis screen.

R 325.1932 Resident medications.

(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.

Medication administration records (MAR) were reviewed for the timeframe of 5/1/23-6/7/23 (date of onsite inspection) and the following observations were made:

Resident A missed a scheduled dose of Seroquel on 6/3/23. Staff failed to notate any reason for the missed dose and the MAR was left completely blank.

Resident B missed scheduled doses of Vitamin D3 on 5/12/23, 5/15/23, 5/18/23, 5/20/23, 5/21/23, 5/24/23 and 5/26/23. Staff documented the reason for the missed doses as "medication pending delivery" [from the pharmacy], however staff

documented that the medication was administered in between all the dates that the medication was documented as not available. Administrator and authorized representative Lance Davis reported that a 90-day supply of Resident B's Vitamin D3 was filled on 4/12/23 so Resident B should have had more than enough of the medication to last throughout the month of May. It is unclear why Resident B did not receive her scheduled medication on the abovementioned dates.

Resident C missed scheduled doses of Mirtazapine on 5/30-6/3/23, 6/5/23 and 6/6/23. Staff documented the reason for the missed doses as "medication pending delivery" [from the pharmacy], however staff documented that the medication was administered on 6/4/23 in-between dates the medication was documented as not available. Mr. Davis reported that the facility receives pharmacy deliveries daily and that a refill for the Mirtazapine was requested on 5/25/23 but at the time of this report it has not been delivered. It is unclear why there is a delay in obtaining this medication. Additionally, the administration of this medication on 6/4/23 is considered to be a documentation error given that the medication was not in the facility. Resident C missed scheduled doses of Sertraline on 5/20/23, 5/21/23, 5/23/23-5/26/23, 5/28/23, 5/29/23, 5/31/23, 6/2/23, 6/3/23, 6/6/23 and 6/7/23. Staff documented the reason for the missed doses as "medication pending delivery" [from the pharmacy], however staff documented that the medication was administered in between all the dates that the medication was documented as not available except on 6/5/23 where staff notated "other/ see progress notes". Mr. Davis reported that a refill of Mirtazapine was ordered on 5/9/23 and delivered to the facility on 5/10/23. It is unclear why Resident C did not receive her scheduled medication on the abovementioned dates. The note referenced on 6/5/23 did not give any justification for Resident C missing the medication and only contained the administration instructions of the medication.

R 325.1954 Meal and food records.

The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.

Meal census records were not maintained for the previous 3-month period. Mr. Davis reported that the meal census was last completed on 4/4/23.

R 325.1975 Laundry and linen requirements.

(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following:

- (a) A separate soiled linen storage room.**
- (b) A separate clean linen storage room.**

The facility was not utilizing separate clean and soiled linen areas and there are concerns for cross contamination between soiled items and those items that have already been laundered.

R 325.1976 Kitchen and dietary.

(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.

Perishable food items located in the commercial kitchen's walk-in fridge and freezer contained items that lacked proper labeling, dating and sealing. Examples of these items included but are not limited to bread products, cookie dough, hamburger patties and produce.

R 325.1976 Kitchen and dietary.

(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.

The facility uses a high temperature dish machine to sanitize the dishes. While the facility has forms staff are to use to document the water temperatures three times daily, staff are not consistently monitoring or recording temperature levels to ensure proper sanitization of the dishes and had not yet completed the documentation for this month and were sporadically completed for the previous two months.

Additionally, the dish machine temperature log indicates that the rinse temperature needs to reach 180 degrees Fahrenheit to properly sanitize the dishes. In the documentation observed for April and May, at no time was the rinse temperature recorded above 160 degrees Fahrenheit. It does not appear that this issue has been addressed and the facility cannot demonstrate the items being washed are properly sanitized.

R 325.1979 General maintenance and storage.

(3) Hazardous and toxic materials shall be stored in a safe manner.

Hazardous and toxic materials (various cleaning agents, detergents and barbicide) were found unsecured in the beauty salon. The beauty salon door contained a lock, however the lock was not engaged. These items are an unnecessary ingestion and subsequent poisoning risk to those residents that lack safety awareness.

IV. RECOMMENDATION

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



06/08/2023

Elizabeth Gregory-Weil
Licensing Consultant

Date