

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

ORLENE HAWKS DIRECTOR

June 8, 2023

Karen Harris Integrated Living, Inc. 43133 Schoenherr Road Sterling Heights, MI 48313

RE: License #: AS500380734 Biland 42820 Biland Clinton Township, MI 48038

Dear Ms. Harris:

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 (248) 975-5053.

Sincerely,

Kristine Cillufo

Kristine Cilluffo, Licensing Consultant Bureau of Community and Health Systems Cadillac Place 3026 West Grand Blvd Ste 9-100 Detroit, MI 48202 (248) 285-1703

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

I. IDENTIFYING INFORMATION

License #:	AS500380734
Licensee Name:	Integrated Living, Inc.
Licensee Address:	43133 Schoenherr Road
	Sterling Heights, MI 48313
Licensee Telephone #:	(586) 731-9800
	Karan Harria
Licensee/Licensee Designee:	Karen Harris
Administrator:	Antonetta Phillips
Name of Facility:	Biland
Facility Address:	42820 Biland
	Clinton Township, MI 48038
Facility Telephone #:	(586) 840-7959
Original Issuance Date:	12/09/2016
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	06/07/2	2023
Date	e of Bureau of Fire Services Inspection if app	licable:	N/A
Date	e of Environmental/Health Inspection if applic	able:	N/A
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role:		3 1
•	Medication pass / simulated pass observed? Reviewed medication passing procedures w Medication(s) and medication record(s) revie	ith home	manager.
• •	Resident funds and associated documents re Yes No I If no, explain. Meal preparation / service observed? Yes I Inspection did not occur during a meal preparation Fire drills reviewed? Yes No I If no, early] No ⊠ aration.	
•	Fire safety equipment and practices observe	d? Yes	🛛 No 🗌 If no, explain.
•	E-scores reviewed? (Special Certification Or If no, explain. Water temperatures checked? Yes 🛛 No [• ,	
•	Incident report follow-up? Yes $igsqceed$ No $igsqceed$ If	no, expl	ain.
•	Corrective action plan compliance verified? CAP date 07/20/2021- AS301(2), AS302(6), AS406 N/A Number of excluded employees followed-up	AS315(
•	Variances? Yes \Box (please explain) No \Box		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.
	wlers, did not have verification of current TB testing in employee e was dated 05/06/2019.
R 400.14306	Use of assistive devices.
	(2) An assistive device shall be specified in a resident's written assessment plan and agreed upon by the resident or the resident's designated representative and the licensee.
Resident A did n	ot have use of shower chair listed in assessment plan.
R 400.14310	Resident health care.
	 (3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
Resident A's wei	ght was not recorded on record for September 2021, October 2021,
	or December 2021.
R 400.14312	Resident medications.
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:

	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A
R 400.14315	Handling of resident funds and valuables.
Instructions state t day. There were n Medication is not l	upirocin 2% Ointment listed on June 2023 medication log. to apply to affected area on scalp with a clean Q-tip 2 to 3 times a to staff initials showing medication has been administered. isted as a PRN. There is not an order discontinuing medication. ated that a sample of another ointment was provided, however, entation.
state to take 1 tab	2023 medication log lists Levetiracetam 1000 mg. Instructions let by mouth twice a day. Staff have only initiated that the en administered at 8:00 am. The second dose is not listed on the
3350 Powder at 8: initiated despite m	e 2023 medication log was initiated by staff for Polyethylene Glycol 200 am on day of inspection, 06/07/2023. Medication log was redication not being available in home to administer. Home Manger ation ran out yesterday and a refill was called in last Thursday.
	 (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given. (vi) A resident's refusal to accept prescribed medication or procedures. (e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.
	 (b) Complete an individual medication log that contains all of the following information: (i) The medication. (ii) The dosage.

During the onsite inspection, the Home Manager reported that Resident B's guardian provides cash to the home for Resident B's spending money. A Funds Part 2 form was not completed for the cash received.

R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

A sleep time fire drill was not completed for the 4th quarter of 2022.

REPEAT VIOLATION ESTABLISHED: LSR dated 06/30/2021, CAP dated 07/20/2021.

R 400.14401	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 ensit	a inspection. I measured the water temperature with a digital

During the onsite inspection, I measured the water temperature with a digital thermometer. The water temperature was found to be 146.1 degrees Fahrenheit.

R 400.14402	Food service.
	(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.
During the onsite	inspection, I did not observe a thermometer in the garage freezer.
R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

During the onsite inspection, I observed the following items needed maintenance:

- Unknown substance smeared on curtains in Bedroom #1
- Ceiling fans covered in dust in Bedroom #1 and Bedroom #2
- Cobwebs in corner of ceiling in Bedroom #1

R 400.14403	Maintenance of premises.
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.
	e inspection, I observed that the walls needed cleaning in Bedroom and Bedroom #3.
R 400.14507	Means of egress generally.
	 (5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

IV. RECOMMENDATION

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

Ristine Cillufo

06/08/2023

Date

Licensing Consultant