



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 14, 2024

Kelly Devereaux  
Mentors Of Michigan, Inc.  
3812 Finch  
Troy, MI 48084

RE: License #: AS630353528  
Rougemont  
22120 Rougemont  
Southfield, MI 48033

Dear Kelly Devereaux:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance or
- You are to submit a Statement of Correction.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable. 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,

A handwritten signature in cursive script that reads "Kristen 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**

<b>License #:</b>	AS630353528
<b>Licensee Name:</b>	Mentors Of Michigan, Inc.
<b>Licensee Address:</b>	3812 Finch Troy, MI 48084
<b>Licensee Telephone #:</b>	(248) 632-3534
<b>Licensee Designee:</b>	Kelly Devereaux
<b>Name of Facility:</b>	Rougemont
<b>Facility Address:</b>	22120 Rougemont Southfield, MI 48033
<b>Facility Telephone #:</b>	(248) 595-8344
<b>Original Issuance Date:</b>	03/24/2014
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/14/2024

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 0

No. of others interviewed 2 Role: VP of operations/dir. of maint

- 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
- 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:

<b>R 330.1803</b>	<b>Facility environment; fire safety.</b>
	(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3- month period.

During the period under review, a fire drill was not conducted during evening hours for the three-month period of April-June 2023 or October-December 2023.

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Resident B did not have a health care appraisal on file that was dated within the 90-day period before admission to the home (Admission Date: 11/01/23; Health Care Appraisal Dated: 04/28/23).

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

	(b) A description of services to be provided and the fee for the service.
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Resident E's Resident Care Agreement did not have the correct amount listed for the cost of care payment (Resident Care Agreement noted \$1056.50; Funds Part II form shows monthly payment of \$3300).

<b>R 400.14312</b>	<b>Resident medications.</b>
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

Resident E's medications were not in the original pharmacy supplied container. They were removed from the pill bottles and placed in bubble packs by the medication coordinator.

<b>R 400.14318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	(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.

During the period under review, a fire drill was not conducted during evening hours for the three-month period of April-June 2023 or October-December 2023.

A corrective action plan was requested and approved on 03/14/2024. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

#### IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.



03/14/2024

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Kristen Donnay  
Licensing Consultant

Date