



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 7, 2024

Erin Gust
Dignitas, Incorporated
PO Box 3460
Farmington Hills, MI 48333

RE: License #: AS630349201
Dignitas Inc./Orchard Lake House 3
24467 Orchard Lake Road
Farmington Hills, MI 48336

Dear Ms. Gust:

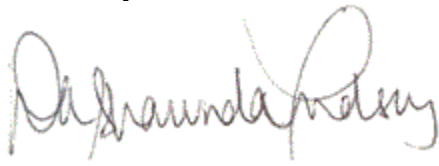
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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,

A handwritten signature in dark ink, appearing to read "DaShawnda Lindsey". The signature is fluid and cursive, with the first name "DaShawnda" being more prominent than the last name "Lindsey".

DaShawnda Lindsey, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste. 9-100
Detroit, MI 48202
(248) 505-8036

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

I. IDENTIFYING INFORMATION

License #:	AS630349201
Licensee Name:	Dignitas, Incorporated
Licensee Address:	24505 Orchard Lake Road Farmington Hills, MI 48336
Licensee Telephone #:	(586) 201-7873
Licensee/Licensee Designee:	Erin Gust
Administrator:	Erin Gust
Name of Facility:	Dignitas Inc./Orchard Lake House 3
Facility Address:	24467 Orchard Lake Road Farmington Hills, MI 48336
Facility Telephone #:	(248) 442-1170
Original Issuance Date:	03/06/2015
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/17/2024

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 3

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Management

- 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.
The inspection did not occur during a 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.
There were no incident reports that needed a follow-up.
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s:
Renewal 09/2023- asec734(b)(2), as205(6), as312(1), as312(4)(b)(v), as318(5)
and as403(1) N/A ☐
- Number of excluded employees followed-up? 0 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:	
MCL 400.734b	Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.
	(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limit/ed to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

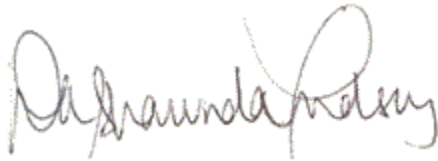
<p>Staff Drucilla Foster was fingerprinted under the now closed BerryHill small group home license. There was no verification that this staff was fingerprinted under the Orchard Lake House 3 small group home license.</p> <p>REPEAT VIOLATION ESTABLISHED. LSR 09/01/2023. CAP 09/27/2023.</p>	
R 400.14210	Resident register.
	<p>A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:</p> <ul style="list-style-type: none"> (a) Date of admission. (b) Date of discharge. (c) Place and address to which the resident moved, if known.
<p>Per the register, there are only four residents in the facility, and Resident B was discharged from the facility on 11/06/2023. Resident C is readmitted into the facility, but the register was not updated.</p>	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	<p>(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.</p>
<p>Resident C's health care appraisal was completed on 04/04/2023. Resident C's readmission date is not listed in the register.</p>	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

	(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.
The cost to reside in the facility was not listed on Resident B's or Resident C's resident care agreement.	
R 400.14312	Resident medications.
	(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 B's ammonium lactate lotion 12% was in his bedroom as opposed to in a locked cabinet.	
REPEAT VIOLATION ESTABLISHED. LSR 09/01/2023. CAP 09/27/2023.	
R 400.14316	Resident records.
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information: <ul style="list-style-type: none"> (a) Identifying information, including, at a minimum, all of the following: <ul style="list-style-type: none"> (viii) Funeral provisions and preferences. (b) Date of admission.
No burial provisions were listed on Resident B's and Resident C's information and identification record. Also, the admission date was not listed.	
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.

The water temperature was 124.2 degrees Fahrenheit.	
R 400.14505	Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions, and changes of category.
	(1) At least 1 single-station, battery-operated smoke detector shall be installed at the following locations: (b) On each occupied floor, in the basement, and in areas of the home that contain flame- or heat-producing equipment.
The smoke detector in the basement was not interconnected to the other smoke detectors.	

IV. RECOMMENDATION

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



05/07/2024

DaShawnda Lindsey
Licensing Consultant

Date