



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 23, 2024

Pamela Hurley  
Innovative Lifestyles, Inc.  
PO Box 1258  
Clarkston, MI 48347

RE: License #: AS630067389  
Foster  
8531 Foster Road  
Clarkston, MI 48346

Dear Pamela Hurley:

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 Donmay".

Kristen Donmay, Licensing Consultant  
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>	AS630067389
<b>Licensee Name:</b>	Innovative Lifestyles, Inc.
<b>Licensee Address:</b>	5490 Dixie Hwy Suite 1 Waterford, MI 48329
<b>Licensee Telephone #:</b>	(248) 931-2061
<b>Licensee Designee:</b>	Pamela Hurley, Designee
<b>Name of Facility:</b>	Foster
<b>Facility Address:</b>	8531 Foster Road Clarkston, MI 48346
<b>Facility Telephone #:</b>	(248) 795-2174
<b>Original Issuance Date:</b>	10/01/1995
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/23/2024

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

Date of Environmental/Health Inspection if applicable: 04/15/2024

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 0

No. of others interviewed 2 Role: Licensee Deisignee/Area Sup.

- 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 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(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 resident care agreement on file for Resident C that was updated annually in 2024 was not fully completed and was not dated. The checkboxes on the resident care agreement were not checked and it did not specify the amount being paid for cost of care.

<b>R 400.14310</b>	<b>Resident health care.</b>
	(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 C did not have a weight recorded monthly for February or June 2024.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(2) Medication shall be given, taken, or applied pursuant to label instructions.

During the onsite inspection, it could not be determined that medications were being given as prescribed. Staff were not writing a start date on the bubble packs and medications were not being popped out according to the number/date on the bubble pack. Each bubble pack had a different number of pills remaining. For example, I noted the following:

- Resident C's morning dose of Lorazepam 1mg had pills popped out from the bubbles numbered 1-20, but there were still pills in the bubbles numbered 12, 13, and 16.
- Resident C's morning dose of Lorazepam 2mg had pills popped out from the bubbles numbered 1-22, but there were still pills in the bubbles numbered 15-19.
- Resident C's bedtime dose of Quetiapine Fumarate 200mg had pills popped out from the bubbles numbered 1-24, while the morning dose had pills popped out from the bubbles numbered 1-21.

- Resident K's Ketoconazole 2% shampoo was prescribed three times weekly, but staff were using it more frequently.

<b>R 400.14312</b>	<b>Resident medications.</b>
	<p>(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:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <ul style="list-style-type: none"> <li>(i) The medication.</li> <li>(ii) The dosage.</li> <li>(iii) Label instructions for use.</li> <li>(iv) Time to be administered.</li> <li>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</li> </ul>

Resident C is prescribed Quetiapine Fumarate 200mg- take one tablet by mouth twice daily. The June 2024 and July 2024 Medication Administration Record (MAR) did not have the 8:00pm dose listed. Staff passed the medication without initialing the MAR for the 8:00pm dose, which also shows they did not complete their medication checks or follow proper medication passing procedures.

Resident K is prescribed Levetiracetam 250mg- take one tablet by mouth two times a day. There was a prescription on file which showed this was a new prescription that was delivered on 07/11/24, as Resident K was previously prescribed a 300mg dose. The July 2024 MAR was initialed from 07/01/24-07/23/24 for the 250mg dose at 8:00am and 8:00pm, even though it was not delivered until 07/11/24. There was no documentation showing when the 300mg dose was discontinued and it was not listed on the July 2024 MAR. The initials on the MAR for this medication did not match the initials for the other medications passed on the same day and time.

Resident K's June 2024 MAR could not be located at the time of the onsite inspection.

**REPEAT VIOLATION ESTABLISHED**

**Reference Renewal Licensing Study Report Dated: 07/20/22; CAP Dated: 07/19/22**

<b>R 400.14402</b>	<b>Food service.</b>
	<p>(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</p>

	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.
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During the onsite inspection, the freezer was not working properly and the thermometer was reading 30°F.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

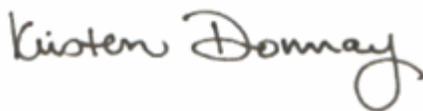
During the onsite inspection:

- The bedroom closet doors were difficult to open and were coming off the track.
- The flooring in bedroom #2 was coming up near the door.
- The closet in the bathroom had missing handles.
- The furnace/air conditioner in the basement was making a loud noise.

A corrective action plan was requested and approved on 07/23/2024. 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.



07/23/2024

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Kristen Donnay  
Licensing Consultant

Date