



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 31, 2024

Sunil Bhattad
Memory Mission, LLC
415 N Chippewa St.
Shepherd, MI 48883

RE: License #: AL370377901
Stone Lodge Supportive Senior Living
415 N. Chippewa Street
Shepherd, MI 48883

Dear Mr. Bhattad:

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. Please send a picture verifying the following corrections by 8/15/24:
 - Picture showing the bathroom temperature has raised to at least 105-120 degrees.
 - Training documentation for Ms. Tolentino-Leon for personal care / supervision and Ms. Richards for communicable diseases and behavior intervention.
 - TB testing and medical clearance for Ms. Tolentino-Leon.

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 (517) 284-9730.

Sincerely,

Jennifer Browning

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
browningj1@michigan.gov - 989-444-9614

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

I. IDENTIFYING INFORMATION

License #:	AL370377901
Licensee Name:	Memory Mission, LLC
Licensee Address:	415 N Chippewa St. Shepherd, MI 48883
Licensee Telephone #:	(989) 828-5683
Licensee Designee:	Sunil Bhattad
Administrator:	Sunil Bhattad
Name of Facility:	Stone Lodge Supportive Senior Living
Facility Address:	415 N. Chippewa Street Shepherd, MI 48883
Facility Telephone #:	(989) 828-5683
Original Issuance Date:	04/01/2016
Capacity:	14
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/30/2024

Date of Bureau of Fire Services Inspection if applicable: 10/30/2023, BFS
inspection pending for 2024

Date of Health Authority Inspection if applicable: Not applicable

No. of staff interviewed and/or observed

3

No. of residents interviewed and/or observed

12

No. of others interviewed

1

Role: S. Bhattad and K. Hodroge

- 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. There are no personal funds on-site.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- 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:

R 400.15204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

(d) Personal care, supervision, and protection.

The employee records for Ms. Tolentino-Leon and Ms. Richards did not include documentation of a completed Personal care, supervision, and protection training.

R 400.15204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

(g) Prevention and containment of communicable diseases.

The employee record for Ms. Richards did not include documentation of a completed communicable diseases training.

R 400.15205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

The employee record for Ms. Ms. Tolentino-Leon did not include documentation they had a completed medical clearance within 30 days of their hire date.

Repeat violation established from Renewal dated 07/5/2022. CAP completed.

R 400.15205 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.

The employee record for Ms. Ms. Tolentino-Leon did not include documentation they had a completed communicable tuberculosis test.

R 400.15307 Resident behavior interventions generally.

(3) A licensee and direct care staff who are responsible for implementing the resident's written assessment plan shall be trained in the applicable behavior intervention techniques.

The employee record for Ms. Richards did not include documentation of a completed behavior intervention training.

R 400.15401 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 bathroom (on the left side of the hallway) did not have a water temperature of 105-120 degrees. When the water was tested, the water would not raise over 80 degrees.

A corrective action plan was requested and approved on 07/30/2024. 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.

Jennifer Browning

— Jennifer Browning
Licensing Consultant

_____07/31/2024_____
Date