

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

August 14, 2024

Simrat Dhillon Evergreen Villas LLC 205 Washington St Mount Clemens, MI 48043

RE: License #: AM500402137

Evergreen Villas

205 Washington Street Mt. Clemens, MI 48043

Dear Ms. Dhillon:

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 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,

J. Reed

LaShonda Reed, Licensing Consultant

Bureau of Community and Health Systems Cadillac Place, Ste 9-100 Detroit, MI 48202 (586) 676-2877

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

I. IDENTIFYING INFORMATION

License#: AM500402137

Licensee Name: Evergreen Villas LLC

Licensee Address: 205 Washington St

Mount Clemens, MI 48043

Licensee Telephone #: (616) 485-0584

Licensee/Licensee Designee: Simrat Dhillon

Administrator: Zubair Ahmed

Name of Facility: Evergreen Villas

Facility Address: 205 Washington Street

Mt. Clemens, MI 48043

Facility Telephone #: (248) 854-8527

Original Issuance Date: 03/09/2022

Capacity: 12

Program Type: PHYSICALLY HANDICAPPED

ALZHEIMERS

AGED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	08/14/2	024	
Date	e of Bureau of Fire Services Inspection if appl	licable:	07/17/2024	
Date	e of Health Authority Inspection if applicable:		N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Assistan	nt Manag	4 12 er	
•	Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. I observed medications Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain.			
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.			
•	Fire drills reviewed? Yes ⊠ No ☐ If no, ex	xplain.		
•	Fire safety equipment and practices observe	d? Yes	⊠ No If no, explain.	
•	E-scores reviewed? (Special Certification Only) Yes No N/A N/A If no, explain. Water temperatures checked? Yes No If no, explain.			
•	Incident report follow-up? Yes \boxtimes No \square If	no, expla	ain.	
•	Corrective action plan compliance verified? N/A ⊠ Number of excluded employees followed-up?		CAP date/s and rule/s: 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 400.14203 Licensee and administrator training requirements.

- (1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:
- (a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

The licensee designee Simrat Dhillon did not have evidence of completion of 16 hours of training for 2022 and 2023.

The administrator Zubair Ahmed did not have evidence of completion of 16 hours of training for 2022 and 2023.

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.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

The licensee designee Simrat Dhillon and the administrator Zubair Ahmed did not have annual health reviews for 2022.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(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 an annual *Health Care Appraisal* available for review for 2023.

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.

I observed the following practice emergency and evacuation fire drills were not completed:

- In 2022, no evening or sleeping hours fire drill was conducted in the second quarter.
- In 2023, in the third quarter, there was no evening fire drill conducted.
- In 2023, no daytime fire drill was conducted in the fourth quarter.

R 400.14407 Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

I observed that bathroom number one, bathroom number two and bathroom number three did not have non-locking against egress hardware.

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.

I observed that Resident B's medication ammonium lactate 12% cream was not available for review, and it is listed on the *Medication Administration Record*.

IV. RECOMMENDATION

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

L. Reed	08/14/2024
LaShonda Reed	Date
Licensing Consultant	