



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 25, 2024

Rowan Farber
Fairmont Senior Living of Farmington Hills
29681 Middlebelt Road
Farmington Hills, MI 48334

RE: License #: AH630407346

Dear Licensee:

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 home for the aged authorized representative and a date.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 347-5503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630407346
Licensee Name:	Farmington Operations LLC
Licensee Address:	29861 Middlebelt Road Farmington Hills, MI 48334
Licensee Telephone #:	(248) 538-9200
Authorized Representative:	Rowan Farber
Administrator:	Michele Locricchio
Name of Facility:	Fairmont Senior Living of Farmington Hills
Facility Address:	29681 Middlebelt Road Farmington Hills, MI 48334
Facility Telephone #:	(248) 538-9200
Original Issuance Date:	06/07/2021
Capacity:	75
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/20/2024

Date of Bureau of Fire Services Inspection if applicable: 04/08/2024- "C" rating

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 11/25/2024

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 31

No. of others interviewed 0 Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
The Bureau of Fire Services reviews fire drills, however facility disaster planning procedures were reviewed.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: 1922 (3) (c) and 1931 (2)- CAP 12/8/22, 1922 (5)- CAP 3/15/23,
- Number of excluded employees followed up? 5 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

<p>This facility was found to be in non-compliance with the following public health code and administrative rules regulating home for the aged facilities:</p>	
<p>MCL 333.20173a</p>	<p>Covered facility; employees or applicants for employment; prohibitions; criminal history check; procedure; conditional employment; knowingly providing false information as misdemeanor; prohibited use or dissemination of criminal history information as misdemeanor; review by licensing or regulatory department; conditions of continued employment; failure to conduct criminal history checks as misdemeanor; establishment of automated fingerprint identification system database; electronic web-based system; definitions.</p>
	<p>(4) Upon receipt of the written consent to conduct a criminal history check and identification required under subsection (3), a staffing agency or covered facility that has made a good faith offer of employment or an independent contract or clinical privileges to the applicant shall make a request to the department of state police to conduct a criminal history check on the applicant, to input the applicant's fingerprints into the automated fingerprint identification system database, and to forward the applicant's fingerprints to the Federal Bureau of Investigation. The department of state police shall request the Federal Bureau of Investigation to make a determination of the existence of any national criminal history pertaining to the applicant. The applicant shall provide the department of state police with a set of fingerprints. The request shall be made in a manner prescribed by the department of state police. The staffing agency or covered facility shall make the written consent and identification available to the department of state police. The staffing agency or covered facility shall make a request regarding that applicant to the relevant licensing or regulatory department to conduct a check of all relevant registries established according to federal and state law and regulations for any substantiated findings of abuse, neglect, or misappropriation of property. If the department of state police or the Federal Bureau of Investigation charges a fee for conducting the criminal history check, the staffing</p>

agency or covered facility shall pay the cost of the charge. Except as otherwise provided in this subsection, if the department of state police or the Federal Bureau of Investigation charges a fee for conducting the criminal history check, the department shall pay the cost of or reimburse the charge for a covered facility that is a home for the aged. After October 1, 2018, if the department of state police or the Federal Bureau of Investigation charges a fee for conducting the criminal history check, the department shall pay the cost of the charge up to 40 criminal history checks per year for a covered facility that is a home for the aged with fewer than 100 beds and 50 criminal history checks per year for a home for the aged with 100 beds or more. The staffing agency or covered facility shall not seek reimbursement for a charge imposed by the department of state police or the Federal Bureau of Investigation from the individual who is the subject of the criminal history check. A prospective employee or a prospective independent contractor covered under this section may not be charged for the cost of a criminal history check required under this section. The department of state police shall conduct a criminal history check on the applicant named in the request. The department of state police shall provide the department with a written report of the criminal history check conducted under this subsection. The report shall contain any criminal history record information on the applicant maintained by the department of state police. The department of state police shall provide the results of the Federal Bureau of Investigation determination to the department within 30 days after the request is made. If the requesting staffing agency or covered facility is not a state department or agency and if criminal history record information is disclosed on the written report of the criminal history check or the Federal Bureau of Investigation determination that resulted in a conviction, the department shall notify the staffing agency or covered facility and the applicant in writing of the type of crime disclosed on the written report of the criminal history check or the Federal Bureau of Investigation determination without disclosing the details of the crime. Any charges imposed by the department of state police or the Federal Bureau of Investigation for conducting a criminal history check or making a determination under this subsection shall be paid in the manner required under this subsection. The notice shall include a statement that the applicant has a right to appeal

	<p>the information relied upon by the staffing agency or covered facility in making its decision regarding his or her employment eligibility based on the criminal history check. The notice shall also include information regarding where to file and describing the appellate procedures established under section 20173b.</p>
<p>Employees 1 and 2's files lacked evidence that a that a state police criminal history review was completed and did not contain an eligibility notice through the Michigan workforce background check unit.</p>	
<p>R 325.1921</p>	<p>Governing bodies, administrators, and supervisors.</p>
	<p>(1) The owner, operator, and governing body of a home shall do all of the following:</p> <p style="padding-left: 40px;">(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</p>
<p>The owner, operator, governing body did not assure that the home maintains an organized program of protection to its residents as evidenced by the following:</p> <p>I observed Residents A and B to have bedside assistive devices on or about their beds. The facility lacked physician's orders for the devices directing their purpose and authorization for use, the devices were not addressed in any of the resident service plans, there were no manufacturer's guidelines for proper installation and use of the devices and did not demonstrate an ongoing training and maintenance program for the devices. The facility did not have an evaluation process to determine the appropriateness of the devices for those residents that had the rails on their bedframes and administrator Michele Locricchio reported that neither resident should have the devices.</p> <p>The lack of a reasonably organized program of protection related to these devices place staff at a disadvantage when attempting to meet the safety needs of residents and does not reasonably protect residents from the possibility of unnecessary entrapment and/or entanglement injury or death associated with such devices.</p>	
<p>R 325.1922</p>	<p>Admission and retention of residents.</p>
	<p>(1) A home shall have a written resident admission contract, program statement, admission and discharge policy and a resident's service plan for each resident.</p>

Resident C moved into the facility on 6/27/22. During the licensure survey, facility staff were unable to produce an admission contract for Resident C.	
R 325.1932	Resident medications.
	<p>(3) Staff who supervise the administration of medication for residents who do not self-administer shall comply with all of the following:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <p>(v) The initials of the individual who administered the prescribed medication.</p>
<p>Medication administration records (MAR) were reviewed for the previous seven weeks, and the following observations were made:</p> <p>Resident D's MAR was blank for her 1:00pm dose of alprazolam on 11/18/24. The administrator provided supporting documentation in the form of a controlled substance disposition form in which the medication administration was documented, but it is unclear why the MAR was left blank for that date and time.</p>	
R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
Thermometers were missing from the refrigerator and freezer located in the memory care kitchen and the refrigerator located in resident apartment 118.	
R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.

Unsecured chemicals and various cleaning agents were observed in cabinets underneath both sinks in the memory care kitchen, underneath the sink in the second floor kitchen and also in the beauty salon. The cabinets were not locked, nor was the door to the beauty salon. These items are an unnecessary ingestion and subsequent poisoning risk to those residents that lack safety awareness.

IV. RECOMMENDATION

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



11/25/2024

Elizabeth Gregory-Weil
Licensing Consultant

Date