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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

October 29, 2024

Matthew Sufnar Encore McHenry Suite 710 230 West Monroe Chicago, IL 60606

RE: License #: AL630417059

The Courtyard at Auburn Hills 3 3033 N. Squirrel Rd. Auburn Hills, MI 48326

Dear Mr. Sufnar:

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,

Cindy Berry, Licensing Consultant

Bureau of Community and Health Systems

3026 West Grand Blvd

Cadillac Place, Ste 9-100

Detroit, MI 48202 (248) 860-4475

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

#### I. IDENTIFYING INFORMATION

**License #:** AL630417059

**Licensee Name:** Encore McHenry

Licensee Address: Suite 710

230 West Monroe Chicago, IL 60606

**Licensee Telephone #:** (248) 340-9296

Licensee Designee: Matthew Sufnar

Administrator: Matthew Sufnar

Name of Facility: The Courtyard at Auburn Hills 3

**Facility Address:** 3033 N. Squirrel Rd.

Auburn Hills, MI 48326

**Facility Telephone #:** (312) 623-0884

Original Issuance Date: 11/13/2023

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED

**AGED** 

**ALZHEIMERS** 

# **II. METHODS OF INSPECTION**

Date	e of On-site Inspection(s):	05/28/2024
Date	e of Bureau of Fire Services Inspection if applicable:	02/26/2024
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  O Role: N/A	
•	Medication pass / simulated pass observed? Yes ⊠ No ☐ If r	no, explain.
•	Medication(s) and medication record(s) reviewed? Yes ⊠ No [	☐ If no, explain.
	Resident funds and associated documents reviewed for at least Yes $\boxtimes$ No $\square$ If no, explain. Meal preparation / service observed? Yes $\boxtimes$ No $\square$ If no, expl	
•	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 ☐ If no, explain.  Water temperatures checked? Yes ☒ No ☐ If no, explain.	N/A 🖂
•	Incident report follow-up? Yes ⊠ No □ If no, explain.	
	Corrective action plan compliance verified? Yes ☐ CAP date/s N/A ☒ Number of excluded employees followed-up? N/A ☒	s and rule/s:
•	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 400.15301

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.

There was no current health care appraisal form observed in Resident O's resident file.

R 400.15301

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

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

There was no written assessment plans observed in Resident A, Resident B, Resident C, Resident E, or Resident G's resident file.

#### R 400.15301

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

- (8) A copy of the signed resident care agreement shall be provided to the resident or the resident's designated representative. A copy of the resident care agreement shall be maintained in the resident's record.
- Resident F's resident care agreement form was not signed.
- There was no resident care agreement form observed in Resident J's resident file

# R 400.15315 Handling of resident funds and valuables.

- (3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.
- There was no resident fund's part I or part II observed in Resident B, Resident D, or Resident G's resident file.
- There was no resident fund's part I observed in Resident J's resident file.

#### 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 water pressure was low in room #18.

# R 400.15403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

- The heat vent cover in room #6 along the floor near the bed was bent/damaged.
- The closet door in room #8 was difficult to open.
- The carpeting near the dining area was stained.

# R 400.15403 Maintenance of premises.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

The toilet in room #6 was dirty.

#### R 400.15407 Bathrooms.

(1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.

There was no bathroom fan in room #5 to create forced ventilation to the outside.

#### IV. RECOMMENDATION

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

10/29/2024

Date

**Licensing Consultant**