



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

November 7, 2024

Katelyn Fuerstenberg  
StoryPoint Birmingham  
2400 E. Lincoln Street  
Birmingham, MI 48009

RE: License #: AH630381578  
**StoryPoint Birmingham**  
**2400 E. Lincoln Street**  
**Birmingham, MI 48009**

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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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,

Brender Howard, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street, P.O. Box 30664  
Lansing, MI 48909  
(313) 268-1788  
enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH630381578
<b>Licensee Name:</b>	2400 East Lincoln St OpCo LLC
<b>Licensee Address:</b>	4500 Dorr Street Toledo, OH 43615
<b>Licensee Telephone #:</b>	(419) 247-2800
<b>Authorized Representative:</b>	Katelyn Fuerstenberg
<b>Administrator:</b>	Crystal Smith
<b>Name of Facility:</b>	StoryPoint Birmingham
<b>Facility Address:</b>	2400 E. Lincoln Street Birmingham, MI 48009
<b>Facility Telephone #:</b>	(248) 940-2050
<b>Original Issuance Date:</b>	03/29/2018
<b>Capacity:</b>	128
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/06/2024

Date of Bureau of Fire Services Inspection if applicable: 09/13/2023

Inspection Type: ☐ Interview and Observation ☒ Worksheet  
☐ Combination

Date of Exit Conference: 11/06/2024

No. of staff interviewed and/or observed 16

No. of residents interviewed and/or observed 81

No. of others interviewed 3 Role Residents' family member/one private caregiver

- 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. No funds held for residents.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.  
Interviewed staff on the policy an
- 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:  
6/27/2024 2024A1027073 1931(2), 1932 (2), 1932 (1), 1922 (5); 5/17/2024  
2024A1019055 1979(1), 1976(5), 1976(6), 1972, 1976(13), 1976(15)
- Number of excluded employees followed up? 4 N/A ☐

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
<b>R 325.1921</b>	<b>Governing bodies, administrators, and supervisors.</b>
	<p><b>1) The owner, operator, and governing body of a home shall do all of the following:</b></p> <p><b>(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</b></p>
A rail was found on the bed of Resident A. There was nothing written in the resident's service plan regarding the bed rail. There were no doctor's order or manufacturer label in the resident's file.	
<b>R 325.1921</b>	<b>Governing bodies, administrators, and supervisors.</b>
	<p><b>1) The owner, operator, and governing body of a home shall do all of the following:</b></p> <p><b>(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</b></p>
The janitor' closet in memory care was not locked and it contained chemicals (cleaning supplies).	
<b>R 325.1931</b>	<b>Employees; general provisions.</b>
	<p><b>(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:</b></p> <p><b>(a) Reporting requirements and documentation.</b></p> <p><b>(b) First aid and/or medication, if any.</b></p> <p><b>(c) Personal care.</b></p> <p><b>(d) Resident rights and responsibilities.</b></p> <p><b>(e) Safety and fire prevention.</b></p> <p><b>(f) Containment of infectious disease and standard precautions.</b></p>

	<b>(g) Medication administration, if applicable.</b>
Review of staff person 1 (SP1) and staff person 2 (SP2) employee record revealed there was no record of staff training for SP1 and SP2. Administrator said that staff are to be trained within 30 days of employment. SP1 and SP2 did not have training within 30 days.	
<b>R 325.1953</b>	<b>Menus.</b>
	<b>(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.</b>
The facility did not have a posted menu for the current week.	
<b>R 325.1953</b>	<b>Menus.</b>
	<b>(2) A home shall maintain a copy of all menus as actually served to residents for the preceding 3 months.</b>
The facility did not maintain copies of all menus for the preceding three (3) months.	
<b>R 325.1954</b>	<b>Meal and food records.</b>
	<b>The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.</b>
The facility did not maintain a record of the meal census.	
<b>R 325.1972</b>	<b>Solid wastes.</b>
	<b>All garbage and rubbish shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.</b>
Garbage cans in the janitor closet located in memory care did not have lids on them.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(8) A reliable thermometer shall be provided for each refrigerator and freezer.</b>

Four refrigerators in the facility were found to not have reliable thermometers in them.

#### IV. RECOMMENDATION

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

*Brenden L. Howard*

11/7/2024

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Date

Licensing Consultant