



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 5, 2025

Caitlin Hartman
Fleischman Residence
6710 West Maple Road
West Bloomfield, MI 48322

RE: License #: AH630236785

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. Failure to submit an acceptable corrective action plan may result in disciplinary action. 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) 335-5985.

Sincerely,

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 #:	AH630236785
Licensee Name:	Jewish Home and Aging Services
Licensee Address:	6710 W Maple Rd. West Bloomfield, MI 48322
Licensee Telephone #:	(248) 661-2999
Authorized Representative and Administrator:	Caitlin Hartman
Name of Facility:	Fleischman Residence
Facility Address:	6710 West Maple Road West Bloomfield, MI 48322
Facility Telephone #:	(248) 661-2999
Original Issuance Date:	09/01/1999
Capacity:	116
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/30/2025

Date of Bureau of Fire Services Inspection if applicable: 04/16/2024- "C" rating

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 05/05/2025

No. of staff interviewed and/or observed 29

No. of residents interviewed and/or observed 47

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 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: CAP date 12/11/24, R 325.1931(2)
- Number of excluded employees followed up? 22 N/A ☐

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following administrative rules regulating home for the aged facilities:	
R 325.1931	Employees; general provisions.
	(2) A home shall treat a resident with dignity and his or her personal needs, including protection and safety, shall be attended to consistent with the resident's service plan.
I observed Resident's A, B and C to have assistive devices affixed to their bed frames. The assistive device was not listed on Resident A's service plan.	
R 325.1931	Employees; general provisions.
	(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: (g) Medication administration
Review of employee files revealed that identified medication passing staff (Employees 1, 2, 3, and 4) did not have proof of medication administration training in their records.	
R 325.1932	Resident medications.
	(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.

Medication administration records (MAR) were reviewed for the previous eight weeks. The following observations were made:

Resident D missed a scheduled dose of amoxicillin on 4/7/25. The MAR was left blank and staff failed to document a reason for the missed dose.

Resident E missed a scheduled dose of albuterol on 3/29/25 and 4/7/25. The MAR was left blank and staff failed to document a reason for the missed doses.

Resident F missed a scheduled dose of januvia and escitalopram on 4/27/25. The MAR was left blank and staff failed to document a reason for the missed doses.

Resident G missed a scheduled dose of valacyclovir on 3/1/25 and 3/4/25 and a dose of vitamin D on 4/9/25. The MAR was left blank and staff failed to document a reason for the missed doses.

R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
Some perishable food items in the commercial kitchen's refrigerator and freezer were not properly stored (unsealed with packaging left open or uncovered) and other items did not contain labels or dates on them identifying when the manufacturer's packing was opened or when the items were prepared. These items include but are not limited to grape salad, sweet potatoes fries, onion rings, vegetable patties and waffles.	
R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
Thermometers were missing from the freezer in resident rooms 1008, 1040, 2019, 2015 and 2035.	
R 325.1976	Kitchen and dietary.
	(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and

	sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.
Employee 5 reported that staff are to use temperature test strips daily to ensure the dish machine is properly sanitizing dishes. While onsite, I observed a clipboard near the dish machine where daily temperatures are recorded, however staff had not been using the test strips for the previous seven days.	

IV. RECOMMENDATION

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



05/05/2025

Elizabeth Gregory-Weil
Health Care Surveyor

Date