



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 14, 2026

Michele Locricchio
Northville Operations LLC
15870 N Haggerty Rd
Plymouth, Michigan 48170

Fairmont Senior Living of Northville
License Number: HFA0000330
License Type: Home For The Aged - HFA Licensed
Survey #: SURV0001109

Dear Licensee:

Attached is the report for the Licensure Survey conducted at the above-mentioned facility. Please review the enclosed report for survey findings and/or additional required actions, including identification of any necessary corrective actions.

If you have any questions or concerns about the report or the findings, please feel free to contact me. If I am not available, and you need to speak to someone immediately, please contact the Non-Long-Term-Care State Licensing Section at 1-833-757-7308.

Sincerely,
Jessica Rogers, Health Care Surveyor
Bureau of Community and Health Systems
517-285-7433

enclosure

**BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SURVEY REPORT**

Facility Name: Fairmont Senior Living of Northville

License #: HFA0000330

License Type: Home For The Aged - HFA

Survey #: SURV0001109

Survey Type: Licensure

Survey Date: 09/02/2026

Summary:

A review of the home's Workforce Background Check (WBC) system on September 2, 2026, showed 271 applications listed, while the home's employee roster included only 74 employees. The WBC system had not been updated to accurately reflect the individuals currently employed at the home.

APPLICABLE RULE

333.20173a

Covered facility; employees or applicants for employment; prohibitions; criminal history check; procedure; conditional employment or clinical privileges; 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; storage and retention of fingerprints; notification; electronic web-based system; definitions.

ANALYSIS:

The WBC system was not updated to accurately reflect the current number of employees.

Summary:

Inspection of the memory care kitchen found that an all-purpose cleaning spray and a knife were not stored in a secure manner.

APPLICABLE RULE

R 325.1979

(3) Hazardous and toxic materials shall be stored in a safe manner.

ANALYSIS:

A cleaning agent and knife were not stored securely.

Summary:

Inspection of the kitchen revealed several undated food items, including brownie mix, cheese, and chicken nuggets. Additionally, hash browns were observed uncovered on a pan in the freezer and were not dated.

APPLICABLE RULE

R 325.1976

Kitchen and dietary.

**BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SURVEY REPORT**

5) The kitchen and dietary area, as well as all food being stored, prepared, served, or transported, shall be protected against potential contamination from dust, flies, insects, vermin, overhead sewer lines, and other sources.

ANALYSIS: Food items were not dated nor stored for protection.

Summary:

Review of the food temperature log from August 26, 2026, through August 31, 2026, showed that staff did not consistently document food temperatures for all three meals served each day.

APPLICABLE RULE

R 325.1976

(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.

ANALYSIS: Food temperatures were not documented.

Summary:

Inspection of the memory care medication carts revealed incomplete narcotic count logs. The logs were required to include the date, time, and signatures from both incoming and outgoing staff, along with comments on the number of narcotic medications in the cart. On multiple dates in August 2026, staff did not consistently sign the logs to indicate that a narcotic count had been completed.

Additionally, review of the home's resident census identified ten residents with bedside assist devices. An additional device was observed in apartment 350 during inspection. Review of the maintenance log for these devices showed that the list did not align with the resident list provided; for example, maintenance checks were not documented for Residents A and D. Furthermore, the service plans for Residents A, D, and F did list the bedside device as an assistive or adaptive device, but lacked sufficient detail regarding its intended use, care requirements, and maintenance procedures. This information is necessary to ensure staff know when to notify their supervisor or maintenance for further inspection.

The home's undated Proper Use of Bed Rails policy reads, in part, that mattress and bed rails will be inspected regularly for potential entrapment hazards. It also requires direct monitoring and supervision during the use of bed rails, and identification of how resident needs will be met during their use. The policy specifies that direct care staff are responsible for care and treatment according to the plan of care, while maintenance staff are responsible for adhering to the routine maintenance and inspection schedule.

APPLICABLE RULE

R 325.1921

Governing bodies, administrators, and supervisors.

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Rule 21. (1) The owner, operator, and governing body of a home shall do all of the following:

(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.

ANALYSIS:

The home did not maintain an organized safety and protection program for its narcotic count logs or its bedside assist devices, as required by own policies.

The licensee was found not to be compliant with the laws or rules evaluated in the licensure survey. A corrective action plan must be submitted via the [Michigan State Licensing System \(MI-SLS\)](#) by **9/28/2026**. The corrective action plan must contain all of the following components:

- (a) The actions that will be taken to correct the violation and achieve compliance.
- (b) The staff responsible for implementing the actions.
- (c) The timeline for the implementation and completion of the actions.
- (d) The actions that will be taken to ensure continued compliance with the law or rules.

Jessica Rogers

Jessica Rogers 09/14/2026
Non-Long-Term-Care State Licensing Health Care Surveyor