GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 28, 2019

Charles Udanoh
Angel Care Homes Inc
16565 Sunderland Road
Detroit, MI 48219

RE: License #: AS820299055
Investigation #: 2019A0772019
Cherry AFC Home

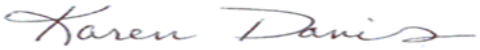
Dear Mr. Udanoh:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party 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 contact the local office at (313) 456-0380.

Sincerely,



Karen Davis, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 296-5412

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS820299055
Investigation #:	2019A0772019
Complaint Receipt Date:	06/28/2019
Investigation Initiation Date:	06/28/2019
Report Due Date:	07/28/2019
Licensee Name:	Angel Care Homes Inc
Licensee Address:	16565 Sunderland Road Detroit, MI 48219
Licensee Telephone #:	(313) 387-6042
Administrator:	Charles Udanoh
Licensee Designee:	Charles Udanoh
Name of Facility:	Cherry AFC Home
Facility Address:	30214 Cherry Avenue Romulus, MI 48174
Facility Telephone #:	(734) 941-4033
Original Issuance Date:	10/15/2009
License **Status:**	REGULAR
Effective Date:	03/23/2019
Expiration Date:	03/22/2021
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Prescribed medication was not given to Resident A from 06/01/2019 to 06/17/2019.	Yes

III. METHODOLOGY

06/28/2019	Special Investigation Intake 2019A0772019 ORR Referral
06/28/2019	Special Investigation Initiated - Telephone Mr. Udanoh
07/08/2019	Inspection Completed On-site Interviewed staff Blandine Bamegne and licensee designee and I reviewed the facility files.
07/18/2019	Contact Telephone Call Made – Emeka Obi
08/06/2019	Exit conference - Charles Udanoh
08/22/2019	APS referral – Completed

ALLEGATION:

Prescribed medication was not given to Resident A from 06/01/2019 to 06/17/2019.

INVESTIGATION:

On 07/08/2019, I conducted an unannounced investigation at the facility. I interviewed staff Blandine Bamegne, licensee designee Charles Udanoh, and reviewed the facility file and medication log for Resident A. Mr. Udanoh stated that the pharmacy generated medication log indicated medication that was not delivered to the facility by the pharmacy. He stated that none of the medication was administered to Resident A. The medication error was noticed by a caseworker for Resident A. He stated that none of the staff informed him that the medication was not at the facility. I was unable to interview Resident A she was in the hospital at the time of my on-site investigation, this was not due to not receiving her medication. Mr.

Udanoh stated that seven medications were not delivered to the facility by the pharmacy but were noted on the pharmacy supplied medication log.

I reviewed the medication log for 06/2019, the following is the list of medication that was not given from 06/01/2019 to 06/17/2019:

MEDICATION	TIME
Serlraline 100mg	1 time a day (8am & 8pm)
Topamax 40mg	2 times a day(8am & 8pm)
Vimpat 200mg	2 times a day(8am & 8pm)
Vitamin D 5000 unit	1 time a day
Potassium Chloride	1 time a day
Vryaylar 3mg	1 time a day
Prazosin HCL	1 time a day

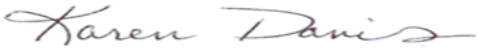
I interviewed staff Blandine Bamegne who stated that the medication was not at the home and she did not inform the others and none of the staff including herself, follow-up on why the medication was not in the facility or inform Mr. Udanoh. I interviewed the other staff Emeka Obi via the telephone and he stated that the medication was not at the facility and did not inform Mr. Udanoh or mention it to anyone else.

On 08/06/2019, I conducted an exit conference with licensee designee, Charles Udanoh. We discussed the allegation, my findings, and recommendation.

APPLICABLE RULE	
R 400.14312	**Resident medications.**
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
ANALYSIS:	Resident A did not receive her medication as prescribed and the staff failed to inform the licensee designee that the medication was not delivered by the pharmacy but was noted on Resident A's medication log. Staff Obi and Bamegne confirmed that no one told Mr. Udanoh about Resident A's medication.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the license status.

 08/22/2019

Karen Davis Date
Licensing Consultant

Approved By:

 08/28/2019

Ardra Hunter Date
Area Manager