

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 20, 2021

Appolonia Okonkwo Tender Hearts, Inc. 2708 Oakman Court Detroit, MI 48238

RE: License #: AS820400485

Phipps Manor

27229 Phipps Street Inkster, MI 48141

#### Dear Mrs. Okonkwo:

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 (313) 456-0380.

Sincerely,

Denasha Walker, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202

(313) 300-9922

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820400485

**Licensee Name:** Tender Hearts, Inc.

Licensee Address: 2708 Oakman Court

Detroit, MI 48238

**Licensee Telephone #:** (248) 240-4413

Licensee/Licensee Designee: Appolonia Okonkwo

**Administrator:** Appolonia Okonkwo

Name of Facility: Phipps Manor

Facility Address: 27229 Phipps Street

Inkster, MI 48141

**Facility Telephone #:** (313) 296-6468

Original Issuance Date: 10/23/2020

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

## **II. METHODS OF INSPECTION**

Pate of On-site Inspection(s):		04/19/2021				
Date of Bureau of Fire Services Inspection if applicable:						
Date of Health Authority Ins	spection if applicable:					
Inspection Type:	☐ Interview and Obs	servation 🔀 Worksheet Full Fire Safety				
No. of staff interviewed and/or observed 1 No. of residents interviewed and/or observed 2 No. of others interviewed 1 Role: licensee designee						
<ul> <li>Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. A full worksheet inspection was completed.</li> <li>Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain.</li> </ul>						
<ul> <li>Resident funds and associated documents reviewed for at least one resident? Yes ⋈ No ⋈ If no, explain.</li> <li>Meal preparation / service observed? Yes ⋈ No ⋈ If no, explain. Breakfast was served prior to inspection. A meal was not prepared/service observed at the time of inspeciton.</li> <li>Fire drills reviewed? Yes ⋈ No ⋈ If no, explain.</li> </ul>						
Fire safety equipment :	and practices observed	d? Yes ⊠ No □ If no, explain.				
E-scores reviewed? (Special Certification Only) Yes ⊠ No □ N/A □ If no, explain.  Water temperatures checked? Yes ⊠ No □ If no, explain.						
Incident report follow-u	ıp? Yes⊠ No 🗌 If r	no, explain.				
<ul> <li>Corrective action plan N/A ⊠</li> <li>Number of excluded en</li> </ul>	•	Yes ☐ CAP date/s and rule/s:				
Variances? Yes ☐ (pl	<u> </u>	N/A 🗵				

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 330.1803 Facility environment; fire safety.

- (6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 month from the date of the finding to either of the following:
- (a) Improve the score to at least the "slow" category.
- (b) Bring the home into compliance with the physical plant standards for "Impractical" homes contained in chapter 21 of the 1985 life safety code of the national fire protection association, which are adopted by reference in these rules and which may be obtained from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost, or from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of the chapter 21 standards. A price quote for copying of these pages may be obtained from the national fire protection association.

At the time of inspection, evacuation assessments(E-Scores) were not completed within 30 days of Resident A and B's admission; Resident A and B were admitted on 2/6/2021, E-Scores were dated 4/2/2021.

### IV. RECOMMENDATION

Contingent upon red	ceipt of an accept	table corrective	action plan, rei	newal of the li	cense
is recommended.					

Denasha Walker Date Licensing Consultant