



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 9, 2021

David Call  
Freedom Adult Foster Care Corp.  
PO Box 1588  
Clarkston, MI 48347

RE: License #: AS630012315  
**Gunn Road Home**  
**895 Gunn Road**  
**Rochester, MI 48306**

Dear Mr. Call:

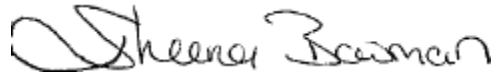
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (248) 975-5053.

Sincerely,

A handwritten signature in black ink that reads "Sheena Bowman". The signature is written in a cursive, flowing style.

Sheena Bowman, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342

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

**I. IDENTIFYING INFORMATION**

**License #:** AS630012315

**Licensee Name:** Freedom Adult Foster Care Corp.

**Licensee Address:** 3990 Bird Road  
Clarkston, MI 48348

**Licensee Telephone #:** (248) 625-7923

**Licensee/Licensee Designee:** David Call

**Administrator:** David Call

**Name of Facility:** Gunn Road Home

**Facility Address:** 895 Gunn Road  
Rochester, MI 48306

**Facility Telephone #:** (248) 923-2833

**Original Issuance Date:** 01/09/1981

**Capacity:** 5

**Program Type:** DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/09/21

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: 06/08/21

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 1  
No. of residents interviewed and/or observed 4  
No. of others interviewed [redacted] Role: [redacted]

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.  
It was not mealtime during the onsite.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? 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-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
LSR 01/24/20, CAP approved 2/25/20; 316(1)(a), 318(5), 410(5)
- LSR 02/08/18, CAP approved 6/13/19; 318(5), 204(3(d), 403(1), 403(5), 403(7)
- SI 11/24/20; 401(4), 313(4), 301(10), 403(1)
- SI 08/29/19; 316(1), 401(5), 403(1)
- SI 3/18/19; 312(4)(b) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in non-compliance with the following applicable rules and statutes.

**R 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party.

A resident care agreement for 2020 was not provided for Resident A. Resident A's 2021 resident care agreement was not signed by his guardian.

**R 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

**REPEAT VIOLATION: Special Investigation 11/24/20; CAP approved 02/04/21**

Resident A was admitted on 09/09/20 and his health care appraisal was completed on 11/28/20.

**R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

Resident A was admitted on 09/09/20 and his assessment plan was completed on 12/15/20. Resident A's guardian did not sign the assessment plan.

An assessment plan for 2019 and 2020 was not provided for Resident B.

**R 400.14312 Resident medications.**

(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:

(e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.

Resident B is prescribed Quetiapine two times a day however; he was only being administered the medication once a day. There were no documents confirming a change to Resident B's prescription.

**R 400.14203 Licensee and administrator training requirements.**

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

The licensee designee, David Call did not complete 16 hours of training for 2019 or 2020.

**R 400.14318      Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

**REPEAT VIOLATION: LSR 01/24/20; CAP approved 02/25/20**

During the first quarter in 2019, a fire drill was not completed during sleeping hours. During the first quarter in 2020, a fire drill was not completed during sleeping hours.

**R 400.14315      Handling of resident funds and valuables.**

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

The transactions for the resident's funds are not being completed on the required BCAL form.

**R 330.1803      Facility environment; fire safety**

(5) The capability of the clients to evacuate a facility in the event of a fire shall be assessed using methods described in appendix f of the 1985 life safety code of the national fire protection association. Appendix f of the 1985 life fire protection association is adopted by reference as part of these rules. A copy of the adopted appendix f is available from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost. A copy of appendix f may also be obtained 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 appendix f. A price quote for copying of these pages may be obtained from the national fire protection association.

The E-scores are not being completed on the required forms.

**R 400.14313      Resident nutrition.**

(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.

**REPEAT VIOLATION: Special Investigation 11/24/20; CAP approved 02/04/21**

The menus are not dated at least 1 week in advanced.

**R 400.14403      Maintenance of premises.**

(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.

The toilet in bathroom #1 was not flushing properly as it was clogged up.

**R 400.14511      Flame-producing equipment; enclosures.**

(1) If the heating plant is located in the basement of a small group home, standard building material may be used for the floor separation. Floor separation shall also include at least 1 3/4-inch solid core wood door or equivalent to create a floor separation between the basement and the first floor.

The heating plant door does not close properly nor was there a self-closing device.

**R 400.14401      Environmental health.**

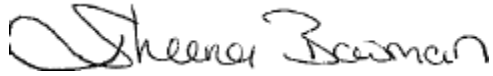
(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.



The water temperature in the kitchen was 123 degrees Fahrenheit.

#### IV. RECOMMENDATION

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



Sheena Bowman  
Licensing Consultant

06/09/21  
Date