

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 3, 2021

Debbie Alger 40317 Pritts Court Clinton Township, MI 48038

RE: License #: AS500393241

Golden Care Group Home 40317 Pritts Court Clinton Township, MI 48038

Dear Ms. Alger:

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,

Kristine Cilluffo, Licensing Consultant

Bureau of Community and Health Systems

4th Floor, Suite 4B

51111 Woodward Avenue

Kristine Cillylo

Pontiac, MI 48342

(248) 285-1703

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

I. IDENTIFYING INFORMATION

License #:	AS500393241
Licensee Name:	Debbie Alger
Licensee Address:	40317 Pritts Court
	Clinton Township, MI 48038
Licensee Telephone #:	(586) 764-8726
Licenses Designed	Dahlia Aluan
Licensee/Licensee Designee:	Debbie Alger
Administrator:	Dobbio Algor
Administrator.	Debbie Alger
Name of Facility:	Golden Care Group Home
	Goldon Gard Group Home
Facility Address:	40317 Pritts Court
-	Clinton Township, MI 48038
Facility Telephone #:	(586) 764-8726
Original Issuance Date:	01/28/2019
Capacity:	6
B T	ACED
Program Type:	AGED

II. METHODS OF INSPECTION

Date	of On-site Inspection(s	s):	07/29/20)21
Date	of Bureau of Fire Serv	rices Inspection if appl	icable:	N/A
Date of Health Authority Inspection if applicable:			N/A	
Inspe	ection Type:	☐ Interview and Obs	servation	Worksheet Full Fire Safety
No. o	of staff interviewed and of residents interviewed of others interviewed		e	2 3
F	 Medication pass / simulated pass observed? Yes ⋈ No ☐ If no, explain. Reviewed medication passing procedures with licensee. 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. Inspection did not occur during a meal preparation. Fire drills reviewed? Yes ⋈ No ☐ If no, explain. 				
• F	Fire safety equipment	and practices observe	d? Yes [⊠ No If no, explain.
ľ	 E-scores reviewed? (Special Certification Only) Yes ☐ No ☐ N/A ☒ If no, explain. Water temperatures checked? Yes ☒ No ☐ If no, explain. 			
• I	Incident report follow-up? Yes ⊠ No □ If no, explain.			
• (Corrective action plan∈ N/A ⊠	compliance verified?	Yes 🗌 (CAP date/s and rule/s:
• 1	Number of excluded er	nployees followed-up?	? 1	N/A 🔀
• \	/ariances? Yes ☐ (pl	ease explain) No 🖂	N/A	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.14204	Direct care staff; qualifications and training.
	(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas: (b) First aid. (c) Cardiopulmonary resuscitation. (d) Personal care, supervision, and protection.
	(g) Prevention and containment of communicable
	diseases.
	cudero, did not have verification of First Aid, CPR, personal /protection and prevention and containment of communicable
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.
Licensee, Debbie	e Alger, did not have current TB test. Her last TB test was
completed in Jur	ne 2018.
R 400.14207	Required personnel policies.
	(2) The written policies and procedures identified in subrule (1) of this rule shall be given to employees and volunteers at the time of appointment. A verification of receipt of the policies and procedures shall be maintained in the personnel records.

Staff, Angelie Escudero, did not have verification of receipt of policies and procedures in employee file.	
R 400.14207	Required personnel policies.
	(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individuals personnel record.
Staff, Angelie Es employee file.	cudero, did not have verification of receipt of a job description in
R 400.14208	Direct care staff and employee records.
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: (f)Verification of reference checks.
Staff, Angelie Es employee file.	cudero, did not have verification of two reference checks in
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.

Resident A did not have a current health care appraisal. He had one health care appraisal form that was not dated. Licensee, Debbie Alger, stated the form was completed in 2019.

Resident B was admitted to the home on 03/03/2021. Her health care appraisal was not completed until 06/15/2021.

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.
	ne assessment plan in file that was not signed or dated. An needs to be completed annually.

R 400.14301

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

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Resident A did not have a current resident care agreement. His resident care agreement was dated 09/25/2019. A resident care agreement should be updated annually.

R 400.14312	Resident medications.
	(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

Resident B had Seroquel 25 mg that was not listed on medication log. Licensee, Debbie Alger, stated that the medication has been discontinued. The medication should be disposed of if no longer required.

IV. RECOMMENDATION

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

Kristine Cillufo

Kristine Cilluffo

Licensing Consultant

Date