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GOVERNOR

### STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 26, 2021

Michael Ojomolade Glamike Cares Inc 31451 Grandview Ave. Westland, MI 48186

RE: License #: AS820386017

Clair Home 710 Clair Street Inkster, MI 48141

### Dear Mr. Ojomolade:

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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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,

Edith Richardson, Licensing Consultant

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Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202

(313) 919-1934

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

### I. IDENTIFYING INFORMATION

**License #:** AS820386017

Licensee Name: Glamike Cares Inc

**Licensee Address:** 31451 Grandview Ave.

Westland, MI 48186

**Licensee Telephone #:** (734) 664-5877

Licensee/Licensee Designee: Michael Ojomolade, Designee

Administrator: Michael Ojomolade

Name of Facility: Clair Home

Facility Address: 710 Clair Street

Inkster, MI 48141

**Facility Telephone #:** (734) 331-9423

Original Issuance Date: 10/30/2017

Capacity: 4

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

### II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/16/2021	
Date of Bureau of Fire Services Inspection if applicable:	
Date of Health Authority Inspection if applicable:	
Inspe	ection Type:  ☐ Interview and Observation ☐ Worksheet ☐ Combination ☐ Full Fire Safety
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:	
•	Medication pass / simulated pass observed? Yes ⊠ No □ If no, explain.
•	Medication(s) and medication record(s) reviewed? Yes $oxtimes$ No $oxtimes$ 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.
•	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 No N/A  If no, explain.  Water temperatures checked? Yes No If no, explain.
	Incident report follow-up? Yes ☐ No ☑ If no, explain. N/A
•	Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s: N/A ⊠
•	Number of excluded employees followed-up? N/A ⊠
•	Variances? Yes ☐ (please explain) No ☐ N/A ☒

### **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

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

### MCL 400.734 (b)

Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.

(4) Upon receipt of the written consent and identification required under subsection(3), the adult foster care facility that has made a good faith offer of employment or independent contract shall make a request to the department of state police to conduct a criminal history check on the individual and input the individual's fingerprints into the automated fingerprint identification system database, and shall make a request to the relevant licensing or regulatory department to perform a check of all relevant registries established according to federal and state law and regulations for any substantiated findings of abuse, neglect, or misappropriation of property. The request shall be made in a manner prescribed by the department of state police and the relevant licensing or regulatory department or agency. The adult foster care facility shall make the written consent and identification available to the department of state police and the relevant licensing or regulatory department or agency. If the department of state police or the federal bureau of investigation charges a fee for conducting the initial criminal history check, the charge shall be paid by or reimbursed by the department. The adult foster care facility shall not seek reimbursement for a charge imposed by the department of state police or the federal bureau of investigation from the individual who is the subject of the initial criminal history check. The department of state police shall conduct an initial criminal history check on the individual named in the request. The department of state police shall provide the department with a written report of the criminal history check conducted under this subsection that contains a criminal record. The report shall contain any criminal history record information on the individual maintained by the department of state police.

The licensee failed to submit documentation to verify fingerprints had been conducted. The licensee failed to submit the Workforce Background Application or its equivalent, the receipt/confirmation and the result letter.

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 failed to complete the annual required training.

### 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.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

The licensee failed to make available for the department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff Olubusayo Gladys Ojomolade, Dominique Kirk and Natasha Coleman.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's

employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

The licensee failed to obtain written evidence of current or subsequent TB test result of direct care staff, Dominique Kirk and Natasha Coleman.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

The licensee failed to make available for the department review verification of annual health review for direct care staff, Dominique Kirk and Natasha Coleman.

### 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.

The licensee failed to maintain in the personnel records verification of receipt of the policies and procedures.

### 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 individual's personnel record.

The licensee failed to maintain in the personnel records verification of receipt of a job description.

### 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:

- (a) Name, address, telephone number, and social security number.
- (b) The professional or vocational license, certification, or registration number, if applicable.
- (c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.
- (d) Verification of the age requirement.
- (e) Verification of experience, education, and training.
- (f) Verification of reference checks.
- (g) Beginning and ending dates of employment.
- (h) Medical information, as required.
- (i) Required verification of the receipt of personnel policies and job descriptions.

The licensee failed to maintain an employee record for direct care staff Dominique Kirk and Natasha Coleman.

On 04/13/2021, I requested the employee records. On 04/15/2021, the licensee forwarded me his and his wife, Gladys', TB test result and training. After reviewing the documents, he submitted, I learned he had two additional staff, Dominique Kirk and Natasha Coleman. I informed the licensee on 04/23/2021, I would be onsite to review Ms. Kirk and Ms. Coleman's employee records. The licensee informed me that the files would not be available until sometime next week.

### R 400.14210 Resident register.

A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:

- (a) Date of admission.
- (b) Date of discharge.
- (c) Place and address to which the resident moved, if known.

The licensee failed to maintain a resident register. I scanned the resident register while in the home. The resident register was not for the Clair Home.

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

(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written

assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions:

- (a) The amount of personal care, supervision, and protection that is required by the resident is available in the home.
- (b) The kinds of services, skills, and physical accommodations that are required of the home to meet the resident's needs are available in the home.
- (c) The resident appears to be compatible with other residents and members of the household.

The licensee accepted and retained Resident B for care and did not complete a written assessment to determine if the home could meet her needs.

#### 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's 2019 assessment plan did not have the signature page.

Resident B's 2020 assessment plan did not have page 3.

#### 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 shall include all of the following:
- (a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.
- (b) A description of services to be provided and the fee for the service.

- (c) A description of additional costs in addition to the basic fee that is charged.
- (d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.
- (e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.
- (f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.
- (g) An agreement by the resident to follow the house rules that are provided to him or her.
- (h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.
- (i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.
- (j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.14315.
- (k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.
- (I) A statement by the licensee that the home is licensed by the department to provide foster care to adults.

Resident A's 2020 and 2021 resident care agreement was missing the first page.

Resident B's 2020 resident care agreement was missing the first page

### R 400.14402 Food service.

(2) All food shall be protected from contamination while being stored, prepared, or served and during transportation to a facility.

The oven was extremely dirty. The refrigerator was not clean.

### R 400.14402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

No thermometers in the refrigerator and freezer.

### R 400.14402 Food service.

(4) All food service equipment and utensils shall be constructed of material and that is nontoxic, easily cleaned and maintained in good repair. All food services equipment and eating and drinking utensils shall be thoroughly cleaned after each use.

The dishwasher was not working.

Two burners on the stove were not working.

The freezer on top of the refrigerator had a buildup of ice. There was so much ice in the freezer it appeared to be an igloo with a small opening to insert and remove small amounts of food.

### R 400.14403 Maintenance of premises.

(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

No non- skid surfacing in the bathtub/shower area.

### R 400.14403 Maintenance of premises.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

Home furnishings and housekeeping standards did not present a comfortable, clean, and orderly appearance. Walls, floors, and doors throughout the home were extremely dirty. A broken chair was observed.

### 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 floor separation door has a hole in the door.

### VI. RECOMMENDATION

I recommend modification of the current status of the license to provisional.

Edith Richardson

Licensing Consultant

05/18/2021 Date

Approved by

05/26/2021

Ardra Hunter Area Manager