

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 8, 2021

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

RE: License #: AS630012534

Camelot

7474 Camelot

West Bloomfield, MI 48322

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 designee 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,

Kristen Donnay, Licensing Consultant Bureau of Community and Health Systems 4th Floor, Suite 4B

Kisten Donnay

51111 Woodward Avenue Pontiac, MI 48342 (248) 296-2783

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

I. IDENTIFYING INFORMATION

License #:	AS630012534
Licensee Name:	Freedom Adult Foster Care Corp.
Licensee Address:	3990 Bird Road
	Clarkston, MI 48348
Licensee Telephone #:	(248) 625-7923
Licensee Designee:	David Call
Name of Facility:	Camelot
- ····	7474.0
Facility Address:	7474 Camelot
	West Bloomfield, MI 48322
Facility Tolonhone #:	(249) 661 1201
Facility Telephone #:	(248) 661-1291
Original Issuance Date:	
Original issuance bate.	
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED
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II. METHODS OF INSPECTION

Dat	e of On-site Inspection(s): 09/08/2021
Dat	e of Bureau of Fire Services Inspection if applicable: N/A
Dat	e of Environmental/Health Inspection if applicable: N/A
Insp	pection Type: ☐ Interview and Observation ☐ Worksheet ☐ Combination ☐ Full Fire Safety
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:
•	Medication pass / simulated pass observed? Yes \boxtimes No \square 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 \square No \square If no, explain. Meal preparation / service observed? Yes \square No \boxtimes If no, explain. Inspection did not occur during meal time Fire drills reviewed? Yes \boxtimes No \square If no, explain.
•	Fire safety equipment and practices observed? Yes $igtimes$ No $igcup$ If no, explain.
•	E-scores reviewed? (Special Certification Only) Yes No N/A In 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: N/A Number of excluded employees followed-up? N/A
•	Variances? Yes ☐ (please explain) No ☐ N/A ☒
•	variatioes: i.e. \square (bicase explain) into \square into \square

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

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.

During the onsite inspection, Resident B's file did not contain a resident care agreement that was reviewed annually in 2020.

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: (b) Complete an individual medication log that contains all of the following information: (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

During the onsite inspection, I reviewed Resident B and Resident K's medication administration records (MARs) and noted the following:

- Resident B's August 2021 MAR was not initialed for the 8:00pm medications on 08/31/21.
- Resident B's July 2021 MAR was not initialed for the 8:00pm medications on 07/31/21.
- The label instructions for Resident B's Lorazepam 1mg PRN did not match
 the instructions on the September 2021 MAR. The prescription label stated
 take 1 tablet by mouth as needed if develops seizure. The MAR instructions
 stated take 1 tablet daily as needed- may take 1 additional tab if develops
 seizure.
- Resident K's August 2021 MAR could not be located during the onsite inspection.

 The label instructions for Resident K's Clonazepam PRN did not match the instructions on the September 2021 MAR. The prescription label stated take 1 tab one time daily as needed. The MAR instructions stated take 1 tab every 4 hours as needed (no more than 3 tabs in 24 hours).

REPEAT VIOLATION ESTABLISHED: Renewal Licensing Study Report Dated: 10/01/2019; CAP Dated: 10/15/2019

R 400.14401	Environmental health.
	(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.

During the onsite inspection, the garbage can in the kitchen did not have a lid.

R 400.14401	Environmental health.
	(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.

During the onsite inspection, cleaning supplies were being stored in an unlocked cabinet in the laundry room.

R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the onsite inspection:

- The light in the kitchen dining area was not working.
- The wooden doorframes in bedroom #1 and bedroom #3 were damaged and splintering.
- The toilet tank lid in the upstairs bathroom was cracked.
- The drawers in the bathroom attached to bedroom #1 were broken.

R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

During the onsite inspection, the sofa cushions in the living room and front room were worn and torn.

R 400.14403	Maintenance of premises.
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

During the onsite inspection:

- There were holes in the walls in the living room, hallway, and bedroom #1.
- There were holes in the closet doors in bedroom #1.
- The tile floor in the half bathroom was cracked.

R 400.14407	Bathrooms.
	(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

During the onsite inspection, the upstairs bathroom door was not equipped with non-locking against egress hardware.

REPEAT VIOLATION ESTABLISHED: Renewal Licensing Study Report Dated: 10/01/2019; CAP Dated: 10/15/2019

IV. RECOMMENDATION

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

09/08/2021

Kristen Donnay Licensing Consultant Date