

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 22, 2021

Tema Pefok Precious AFC Home, Inc. 7435 Silver leaf Lane West Bloomfield, MI 48322

> RE: License #: AS630283763 Harding 21930 Harding Oak Park, MI 48237

Dear Mrs. Pefok:

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 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,

Cindy Ber

Cindy Berry, Licensing Consultant Bureau of Community and Health Systems 4th Floor, Suite 4B 51111 Woodward Avenue Pontiac, MI 48342 (248) 860-4475

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

I. IDENTIFYING INFORMATION

License #:	AS630283763	
Licensee Name:	Precious AFC Home, Inc.	
Licensee Address:	7435 Silver leaf Lane West Bloomfield, MI 48322	
Licensee Telephone #:	(248) 506-5329	
Licensee Designee:	Tema Pefok	
Administrator:	Tema Pefok	
Name of Facility:	Harding	
Facility Address:	21930 Harding Oak Park, MI 48237	
Facility Telephone #:	(248) 506-5329	
Original Issuance Date:	10/10/2006	
Capacity:	6	
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL	

II. METHODS OF INSPECTION

Date	Date of On-site Inspection(s):		09/20/2021
Date of Bureau of Fire Services Inspection if applicable: N/A			N/A
Date of Health Authority Inspection if applicable:		N/A	
Insp	ection Type:	Interview and Observation	n ⊠ Worksheet □ Full Fire Safety
No.	of staff interviewed and of residents interviewed of others interviewed		2 4
•	Medication pass / simu	ılated pass observed? Yes $igtimes$	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 X No I If no, explain. Meal preparation / service observed? Yes X No I If no, explain. 		
•	● Fire drills reviewed? Yes ⊠ No □ If no, explain.		
•	Fire safety equipment and practices observed? Yes $oxtimes$ No $oxtimes$ If no, explain.		
•	 E-scores reviewed? (Special Certification Only) Yes X No X/A If no, explain. Water temperatures checked? Yes X No I If no, explain. 		
•	Incident report follow-up? Yes 🖂 No 🗌 If no, explain.		
•	12/20/2019 R 400.144	· · · —	CAP date/s and rule/s: N/A 🔀
•	Variances? Yes 🗌 (pl	lease 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.

There were no current first aid certificates contained in staff members Kia Fleors, Dennis Tchinde and Ford Chimasam staff files.

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:

(c) Cardiopulmonary resuscitation.

There was no current cardiopulmonary resuscitation certificate contained in staff member Kia Fleors staff file.

R 400.14313 Resident nutrition.

(2) Meals shall meet the nutritional allowances recommended pursuant to the provisions of "Appendix I: Recommended Dietary Allowances, Revised 1980" contained in the publication entitled "Basic Nutrition Facts: A Nutrition Reference," Michigan Department of Public Health publication no. H-808, 1/89. This publication may be obtained at cost from The Division of Research and Development, Michigan Department of Public Health, P.O. Box 30195, Lansing, Michigan 48909. Some of the breakfast meals listed on the menus reviewed during the on-site inspection only documented a muffin and milk for breakfast.

R 400.14402 Food service.

(6) Household and cooking appliances shall be properly installed according to the manufacturer's recommended safety practices. Where metal hoods or canopies are provided, they shall be equipped with filters. The filters shall be maintained in an efficient condition and kept clean at all times. All food preparation surfaces and areas shall be kept clean and in good repair.

The stove hood contained grease build-up.

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.

- The screen located on the front door was broken.
- The pipe underneath the washtub in the basement was leaking.

R 400.14408 Bedrooms generally.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, nonlocking-against-egress hardware.

The lock on bedroom #2's door was missing.

R 400.14510 Heating equipment generally.

(3) Where conditions indicate a need for inspection, heatproducing equipment shall be inspected by a qualified inspection service. A copy of the written approval from the qualified inspection service shall be submitted to the department and a copy shall be maintained in the adult foster care small group home and shall be available for department review.

There was water on the floor around the furnace and hot water heater.

IV. RECOMMENDATION

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

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9/22/2021

Cindy Berry Licensing Consultant Date