

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 28, 2021

Christopher Wadley 1629 North Carolina St Saginaw, MI 48602

RE: License #: AF730398732

Promise Land

1629 North Carolina St Saginaw, MI 48602

Dear Mr./Ms. Wadley:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report.

To verify your implementation and compliance with this corrective action plan, you are to submit documentation of compliance by 1/21/22.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 (517) 284-9730.

Sincerely,

Derrick Britton, Licensing Consultant

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(517) 284-9721

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

I. IDENTIFYING INFORMATION

License #: AF730398732

Licensee Name: Christopher Wadley

Licensee Address: 1629 North Carolina St

Saginaw, MI 48602

Licensee Telephone #: (989) 482-6575

Licensee/Licensee Designee: Christopher Wadley

Administrator: N/A

Name of Facility: Promise Land

Facility Address: 1629 North Carolina St

Saginaw, MI 48602

Facility Telephone #: (989) 482-6575

Original Issuance Date: 07/09/2019

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODS OF INSPECTION

Date of On-site Inspection: 12/16/2021				
Date of Bureau of Fire Services Inspection if applicable: N/A				
Date of Health Authority Inspection if applicable: N/A				
Insp	pection Type:	☐ Interview and Observation	on ⊠ Worksheet □ Full Fire Safety	
No.	of staff interviewed and of residents interviewed of others interviewed		2 6	
•	Medication pass / simu	lated pass observed? Yes ∑	☑ No ☐ If no, explain.	
•	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain			
•	Yes ☑ No ☐ If no, explain. • Meal preparation / service observed? Yes ☐ No ☑ If no, explain. Inspection did not occur during meal preparation/service.			
•	Fire safety equipment a	and practices observed? Yes	s ⊠ 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 of N/A ⊠ Number of excluded en	compliance verified? Yes	CAP date/s and rule/s:	
•		ease explain) No 🗌 N/A 🔀		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

MCL 400.734b

Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.

(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

Responsible persons (employees) Lashonda Hollman and Alexis Wadley require fingerprinting to work with residents.

R 400.1421 Handling of resident funds and valuables.

(6) All trust fund account transactions shall require the signature of the resident or the resident's designated representative and the licensee, or prior written approval from the resident or resident's designated representative.

Resident fund transactions require a form with receipts/signatures.

A corrective action plan was requested and approved on 12/16/2021. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Derice Z. Britter 12/28/2021

Derrick Britton Licensing Consultant Date