

GRETCHEN WHITMER GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 2, 2022

Janet McCarver Creative Images Inc PO Box 253 Southfield, MI 48037

RE: License #: AS820399426

Bringard Home 16132 Ryland Redford, MI 48239

Dear Ms. McCarver:

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 (313) 456-0380.

Sincerely,

Denasha Walker, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 300-9922

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820399426

Licensee Name: Creative Images Inc

**Licensee Address:** 28125 7 Mile Rd

Livonia, MI 48152

**Licensee Telephone #:** (313) 527-1098

**Licensee/Licensee Designee:** Janet McCarver

Administrator: Shannon McCormick

Name of Facility: Bringard Home

Facility Address: 16132 Ryland

Redford, MI 48239

**Facility Telephone #:** (313) 766-4308

Original Issuance Date: 09/27/2019

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

# **II. METHODS OF INSPECTION**

Date	ate of On-site Inspection(s):			02/22/2022	
Date	e of Bureau of Fire Serv	rices Inspection if appl	licable:		
Date	e of Environmental/Heal	Ith Inspection if applica	able:		
Insp	pection Type:	☐ Interview and Obs	servation		
No. of staff interviewed and No. of residents interviewed No. of others interviewed				3 5	
•	Medication pass / simu	lated pass observed?	Yes 🖂	No ☐ If no, explain.	
•	Medication(s) and med	lication record(s) revie	wed? Yo	es 🗵 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.				
•	Fire drills reviewed? Y	es 🛛 No 🗌 If no, ex	xplain.		
•	Fire safety equipment a	and practices observe	d? Yes[	⊠ No □ If no, explain.	
•	E-scores reviewed? (S If no, explain. Water temperatures ch		_		
•	Incident report follow-u	p? Yes⊠ No ☐ If	no, expla	in.	
•	Corrective action plan of CAP Dated 05/05/2020			CAP date/s and rule/s: (6), R 400.14410 (2) N/A	
•	Number of excluded er	mployees followed-up'	? 1	N/A ⊠	
•	Variances? 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 400.14203 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.

At the time of inspection, Janet McCarver failed to participate in, and successfully complete, 16 hours of training and/or 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.

#### R 400.14306 Use of assistive devices.

(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

At the time of inspection, a shower chair was observed in the shower for use without an authorization, in writing, by a licensed physician.

#### R 400.14312 Resident medications.

(2) Medication shall be given, taken, or applied pursuant to label instructions.

At the time of inspection, I was unable to determine that Resident B's medications were given, taken, or applied pursuant to label instructions. The following medications were in her medication bin and being administered according to the home manager, Darlene Stewart but not listed on the medication administration records (MARs)sheet. The medication was as follows:

- Cetaphil Gentle Cleanser to Liq; wash affected area once daily as directed by physician.
- Benztropine Mesylate 1 MG PO TAB/Cogentin; take 1 tablet by mouth once daily

#### 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.
- (vi) A resident's refusal to accept prescribed medication or procedures.

At the time of inspection, Resident B's Clozapine TAB 100MG, take 2 tablets by mouth twice day (in the morning and at noon) and take 1 tablet by mouth at bedtime was not initialed on 2/4/2022 or on 2/13/2022 at noon.

#### R 400.14403 Maintenance of premises.

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

At the time of inspection, the living room furniture was not in good condition; the leather material is worn, and the cushion material is exposed.

## 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.

At the time of inspection, the flooring in the living room and the kitchen is not in good repair, the finish is worn in some areas.

#### IV. RECOMMENDATION

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

(1410-	3/02/2022	
Denasha Walker		Date
Licensing Consultant		