



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 2, 2022

Satara McMillian  
2115 Francis Ave.  
Grand Rapids, MI 49507

RE: License #: AS410389803  
Investigation #: 2022A0467028  
Home Of Hearts

Dear Ms. McMillian:

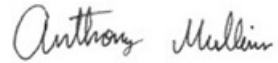
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in cursive script that reads "Anthony Mullins".

Anthony Mullins, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
SPECIAL INVESTIGATION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS410389803
<b>Investigation #:</b>	2022A0467028
<b>Complaint Receipt Date:</b>	03/22/2022
<b>Investigation Initiation Date:</b>	03/22/2022
<b>Report Due Date:</b>	05/21/2022
<b>Licensee Name:</b>	Satara McMillian
<b>Licensee Address:</b>	2115 Francis Ave. Grand Rapids, MI 49507
<b>Licensee Telephone #:</b>	(616) 633-3953
<b>Administrator:</b>	Satara McMillian
<b>Licensee Designee:</b>	Satara McMillian
<b>Name of Facility:</b>	Home Of Hearts
<b>Facility Address:</b>	2115 Francis Grand Rapids, MI 49507
<b>Facility Telephone #:</b>	(616) 633-3953
<b>Original Issuance Date:</b>	11/13/2017
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	05/13/2020
<b>Expiration Date:</b>	05/12/2022
<b>Capacity:</b>	4
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Resident A’s bedroom ceiling is falling apart and caving in. The bedroom wall is also cracked.	Yes
The home smells like gas.	Yes
The licensee is not providing specific foods that Resident A is requesting.	No
Additional Findings	Yes

**III. METHODOLOGY**

03/22/2022	Special Investigation Intake 2022A0467028
03/22/2022	Special Investigation Initiated - Telephone
03/23/2022	Inspection Completed On-site
4/27/2022	APS Referral completed – (this complaint was received from APS)
04/28/2022	Exit conference completed with licensee designee, Satara McMillian

**ALLEGATION: Resident A’s bedroom ceiling is falling apart and caving in. The bedroom wall is also cracked.**

**INVESTIGATION:** On 3/22/22, I received a denied Adult Protective Services (APS) complaint from the BCAL online complaint system. The complaint stated that the ceiling in Resident A’s room is falling apart and caving in and there are many things that are broken in the home that are not being fixed. On 3/22/22, I commenced the investigation by speaking to the complainant. The complainant stated Resident A relayed this issue to her today.

On 3/23/22, I made an unannounced onsite investigation. Upon arrival, introductions were made with live-in staff, Sharon Bruce-Carey and she allowed entry into the home. I met with Resident A inside the home and she agreed to discuss the allegations at the dining room table. It should be noted that Ms. Bruce-Carey was present during the interview at the request of Resident A.

Resident A was asked if she knew why I was at the home to speak to her. Resident A stated yes and explained that it was due to issues within the home. Resident A expanded on her statement by saying that the ceiling in her bedroom is coming down/caving in. Resident A stated that she has lived in the home for approximately one-and-a-half years and she noticed the issue with the ceiling since then. However, the ceiling has gotten worse in the last month above her roommate’s bed. Resident

A stated that she did not speak to Ms. Bruce-Carey about this concern as she feels that this is the responsibility of Satara McMillian since she is the owner of the home. However, Resident A stated that she did speak to her guardian about this concern, and he was planning to call Ms. McMillian. Resident A is unsure if this has occurred yet.

Resident A was asked if she has any additional concerns regarding the home. Resident A stated that the drain in the bathroom tub needs to be unclogged. Her dad reportedly offered to give her a “snake” to do it or send someone over to make sure there were no issues with the pipes. Resident A acknowledged that she hasn’t really discussed this with Ms. Bruce-Carey much but stated she (Ms. Bruce-Carey) knows about the concern. Ms. Bruce-Carey agreed to ask Ms. McMillian for a snake to unclog the drain in the bathroom.

After speaking to Resident A, I spoke to live-in staff, Ms. Bruce-Carey. Ms. Bruce-Carey stated that she was unaware of the ceiling caving in inside of Resident A’s room as this information was not relayed to her. Ms. Bruce-Carey and Resident A escorted me upstairs to Resident A’s room to show me the ceiling. Upon entry, I immediately noticed that the ceiling was sagging and a crack approximately 2 to 3 feet long was present in the drywall next to the ceiling. I took pictures of the ceiling and wall for my records.

On 3/29/22, I spoke to the owner/designee, Satara McMillian regarding Resident A’s ceiling. Ms. McMillian stated that Resident A’s new guardian informed her about the issue after her brain surgery. Ms. McMillian did not have a chance to respond to the issue until 3/22/22 due to recovering from her surgery. Ms. McMillian stated that she had Ms. Bruce-Carey take a picture of the ceiling and send it to her. It appeared that the ceiling had old dry spots from a leak and Ms. McMillian acknowledged that there was a leak a long time ago. It should be noted that a wall was cracked in the room as well. Ms. McMillian stated that the drop ceiling and the wall were fixed a few days ago. Ms. McMillian sent me a text message photo of the drop ceiling and the drywall, confirming both have been fixed.

On 4/27/22, I conducted an onsite inspection to the facility. During this inspection, I was able to confirm in-person that the ceiling and the drywall in Resident A’s room has been repaired.

On 04/28/22, I conducted an exit conference with licensee designee, Ms. McMillian. She was informed of the investigative findings and agreed to complete a corrective action plan.

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

<b>ANALYSIS:</b>	<p>An allegation was received that the ceiling in Resident A's room was caving in. I made an unannounced onsite investigation and confirmed the ceiling was sagging and a crack approximately 2 to 3 feet long was present in the drywall next to the ceiling. Live-in staff Ms. Bruce-Carey and the owner, Ms. McMillian were reportedly unaware of this as Resident A had not relayed the issue to anyone.</p> <p>Ms. Bruce-Carey's husband addressed the issue within days of it being brought to her attention. Due to the bedroom ceiling and drywall not being in good repair for an unknown amount of time, a preponderance of evidence does exist to support the allegation.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ALLEGATION:** The home smells like gas.

**INVESTIGATION:** On 3/22/22, I received a denied APS complaint from the BCAL complaint system. The complaint stated that the home smells like gas. On 3/22/22, I spoke to the complainant who confirmed the allegation.

On 3/23/22, I made an unannounced onsite investigation. Upon arrival, introductions were made with live-in staff, Sharon Bruce-Carey and she allowed entry into the home. I met with Resident A inside the home and she agreed to discuss the allegations at the dining room table. It should be noted that Ms. Bruce-Carey was present during the interview at the request of Resident A.

Resident A stated that the home smells like gas. Resident A stated that she did discuss the gas odor in the home with her father and with Ms. Bruce-Carey. Resident A stated that her father sent someone out to the home to see what the issue was. However, Resident A is unsure as to what exactly they did or reviewed while they were here. Resident A stated that the gas odor started in the home approximately 3 weeks ago. It should be noted that I could smell the gas odor throughout the home while wearing a mask.

After speaking to Resident A, I spoke to live-staff, Ms. Bruce-Carey. Ms. Bruce-Carey acknowledged the gas smell in the home for the last couple of weeks. As a result of the gas smell, Ms. Bruce-Carey stated that DTE was contacted and sent an employee to the home to assess the situation. The first DTE staff member sprayed some type of liquid on the pipes that reportedly showed there was a leak due to the liquid bubbling. Ms. Bruce-Carey stated that she sent some pictures to Ms. McMillian regarding this situation and Ms. McMillian stated that she would have her brother assess the situation. Ms. Bruce-Carey is unsure if Ms. McMillian's brother has assessed the situation yet. After the first staff member at DTE completed his

assessment, a second staff member was sent out to the home. The 2<sup>nd</sup> staff member assessed the situation as well and reportedly stated that the home did not have a leak and instead, it was reportedly a combustion furnace. During the second assessment, DTE reportedly stated that the gas meter was not functioning properly and replaced the old one. The gas had to be turned off for one-and-a-half days to allow DTE to complete their assessments.

Ms. Bruce-Carey stated that after the gas meter was replaced, the odor went away in the home for a brief period prior to returning. Ms. Bruce-Carey was asked if DTE left any documentation or reports explaining the results of their assessment. She did not believe any documentation was left so she called her husband, Christopher Carey who also resides in the home and asked him. Ms. Bruce-Carey put her phone on speaker while talking to her husband. Mr. Carey stated that the 2<sup>nd</sup> DTE employee who came to the home said that the gas meter was leaking, which led to them replacing it. Except for this, there were no other reported issues. Ms. Bruce-Carey stated that Resident B's guardian was in the home approximately 3 weeks ago and stated that she could smell gas inside and outside the home as well, which is when Ms. Bruce-Carey called DTE. Ms. Bruce-Carey plans to contact DTE again to address the concern. She also plans to ask them for any documentation explaining the status of their two assessments. If and when she obtains said documents, she plans to notify me.

Resident A was asked if she had any other concerns. Resident A's other concern is that although there is heat upstairs in the home, it is still cold because Ms. McMillian does not want the air conditioning units removed from the window, which she stated makes the room cold from the air getting inside. This has been an issue since this winter when it gets really cold outside. I observed the thermostat in the home to be set to 74 degrees Fahrenheit, which is within the licensing limit. Ms. Bruce-Carey stated that she did speak to Ms. McMillian about Resident A concern of her room being too cold. Ms. McMillian reportedly responded by stating that the air conditioning unit stays in the window and if anyone removes them, they will have to replace them.

Resident A also added that the home does not have any carbon monoxide detectors. All of the rooms in the upstairs of the home were observed to have smoke detectors. It is unknown if the smoke detectors have carbon monoxide detectors built in as well. I did see a standalone carbon monoxide detector in the dining room on a stand. I also observed a smoke detector on the same stand.

On 3/24/22, I received a call from Ms. Bruce-Carey. She informed me that she contacted DTE and they told her that they do not have any documentation or notes that they could give her regarding their two assessments. Ms. Bruce-Carey stated that staff at DTE told her that they would only have documentation if they needed to do further work. DTE would not provide Ms. Bruce-Carey with further information since she is not the owner of the home. Therefore, Ms. Bruce-Carey stated that she texted Ms. McMillian to have her contact DTE directly.

On 3/29/22, I spoke to the owner/designee, Ms. McMillian. Ms. McMillian stated that she's aware of the home smelling like gas. When this was brought to her attention, Ms. McMillian stated that the live-in staff member, Ms. Bruce-Carey called DTE to have them come to the home to inspect the issue. The first time DTE came to the home, Ms. McMillian stated that they supposedly used a tool that detected a leak in the home. The 2<sup>nd</sup> time DTE came out, they didn't find a leak. Instead, DTE stated that when the heat is turned on, the smell is coming from the combustion in the furnace. I explained to Ms. McMillian that Ms. Bruce-Carey stated that the gas meter was replaced when DTE was at the home. Ms. McMillian stated that the gas meter was replaced in January, 2022 so she is unsure why it needed to be replaced again. Ms. McMillian was unaware of the gas meter being replaced while DTE was at the home until I relayed this information to her. Ms. McMillian stated that she has a service plan on all appliances in the home, including the furnace with consumers energy. Ms. McMillian plans to call consumers to have them check the furnace as well.

On 4/15/22, I spoke to an individual who wished to remain anonymous regarding her concern at the AFC home. The anonymous caller stated that the home has been without a furnace for a week or two. The anonymous caller reportedly found out about this earlier this week and stated that residents in the home are currently using portable heaters. She also explained that she was told that Ms. McMillian has been obtaining quotes from people to have the furnace fixed. The anonymous caller has not observed the heaters in the home herself. However, she stated that she has smelled gas in the home in the past. I explained to the anonymous caller that I will follow-up with the owner regarding this issue.

On 4/15/22, I spoke to Ms. McMillian. Ms. McMillian stated that she had Consumers Energy complete an inspection on the furnace. Consumers Energy reportedly found an issue with the furnace and have since turned it off. Ms. McMillian stated that the part that the furnace needs is no longer made and therefore, the furnace will have to be replaced. Ms. McMillian confirmed that her home has been without a furnace for approximately one week. Ms. McMillian stated that she is waiting to receive quotes back from Bel-Aire Heating and Cooling and One Legacy Heating and Cooling to determine the price of replacing the furnace. In the interim, Ms. McMillian has been using portable space heaters, the ones that turn off automatically if they were to tip over. Ms. McMillian checked her email while on the phone and confirmed she received a quote from One Legacy Heating and Cooling. Ms. McMillian is now working with the company to confirm an installation date. Ms. McMillian agreed to have a new furnace in place by next week Friday.

On 4/15/22, Ms. McMillian sent me a text message of a furnace quote from 1 Legacy Heating and Cooling, confirming that she is actively working to replace it. On the same day, I informed Ms. McMillian that her furnace needed to be replaced by the end of next week, to which she agreed. On 4/18/22, I received a call from the same anonymous caller from 4/15/22. The anonymous caller informed me that the facility



still did not have a furnace. I explained to the caller that I'm aware of the concern and that I have to give the facility time to address the issue.

On 4/21/22, I spoke to Ms. McMillian via phone. She explained that the original plan was for the furnace to be installed tomorrow, 4/22/22. However, she has since worked with Pro-Tech Heating and Cooling and they are able to install the furnace on Monday, 4/25/22 at a less expense rate. Ms. McMillian sent me an email from Pro-Tech, confirming the install would take place on 4/25/22.

On 4/25/22, Ms. McMillian texted me that the furnace installation was completed.

On 4/27/22, I made an unannounced onsite visit to the facility. Upon arrival, I spoke to the live-in staff, Ms. Bruce-Carey. Ms. Carey assisted me to the basement where I was able to confirm that the furnace was installed on 4/25/22 by Pro-Tech. Ms. Bruce-Carey stated that the gas smell was no longer present in the home. I noticed that the home was a lot warmer than it was during a previous onsite visit and the issue of the home smelling of gas was rectified.

On 04/28/22, I conducted an exit conference with licensee designee, Ms. McMillian. She was informed of the investigative findings and agreed to complete a corrective action plan.

<b>APPLICABLE RULE</b>	
<b>R 400.14510</b>	<b>Heating equipment generally.</b>
	<b>(3) Where conditions indicate a need for inspection, heat-producing 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.</b>
<b>ANALYSIS:</b>	Resident A, Ms. Bruce-Carey, Ms. McMillian, and an anonymous caller all confirmed that the home smelled like gas. During my onsite inspection on 3/23/22, I smelled gas in the home as well. DTE completed two evaluations at the home and Consumers Energy completed one.  DTE replaced the gas meter due to a reported leak. Per Ms. McMillian, Consumers Energy found an issue during their inspection and recommend that the furnace be replaced. The furnace was turned off after their inspection. Ms. McMillian used temporary space heaters for two weeks.

	Ms. McMillian had the furnace replaced on 4/25/22 after obtaining several quotes. On 4/27/22, I made an onsite inspection and confirmed the furnace was replaced by Pro-Tech Heating and Cooling. Ms. Bruce-Carey stated that the home no longer smells like gas. Due to home having a gas odor and the home not having heat for two weeks, there is a preponderance of evidence to support the allegation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ALLEGATION:** The licensee is not providing specific foods that Resident A is requesting.

**INVESTIGATION:** On 3/22/22, I received a denied APS complaint from the BCAL complaint system. The complaint stated that Resident A is sensitive to certain foods and the home has not purchased specific foods that she has requested.

On 3/22/22, I spoke to the complainant. The complainant stated that Resident A has mentioned in the past that she wasn't being fed at the home. The complainant stated that she later found out Resident A was being fed but the food options that were provided to her weren't sufficient. The complainant stated that Resident A has met with a dietician and was given recommendations on food. Resident A reportedly struggles with eating as she has a restricting and binge history. The complainant denied that Resident A has any specific eating disorder diagnosis.

On 3/23/22, I made an unannounced onsite investigation. Upon arrival, introductions were made with live-in staff, Sharon Bruce-Carey and she allowed entry into the home. I met with Resident A inside the home and she agreed to discuss case allegations at the dining room table. It should be noted that Ms. Bruce-Carey was present during the interview at the request of Resident A.

Regarding the allegation, Resident A stated that she does not have a special diet, but she struggles with "disordered eating". Resident A stated that she does not have a medical diagnosis, but she does struggle with anorexia at times. This has been ongoing for a couple of years and has gotten worse the last couple of months. Resident A stated that Ms. Bruce-Carey makes meals daily for the home. Sometimes, Resident A skips meals due to the disordered eating. Resident A stated that she has spoken to Ms. Bruce-Carey about this and they've discussed that she will grocery shop for alternative foods. Resident A stated that she has a hard time with Ms. McMillian because she controls the money for the home. Resident A stated that if she asks Ms. McMillian for healthier food options, she's slow to get a response from her. Resident A stated that Ms. McMillian is either "really busy or doesn't care" about the residents.

After speaking to Resident A, I spoke to live-in staff Ms. Bruce-Carey. I asked Ms. Bruce-Carey about Resident A's concern regarding not having healthier food options in the home. Ms. Bruce-Carey acknowledged that Resident A has come to her with this concern. Ms. Bruce-Carey denied getting push back from Ms. McMillian about this because she hasn't really talked to her about this due to not going grocery shopping this month. However, Ms. Bruce-Carey stated that she will let Ms. McMillian know that they need healthier snacks and food for Resident A. Ms. Bruce-Carey then shared that Ms. McMillian has not provided her with money to buy groceries for the residents since the first week of February, which was only \$60. Instead, Ms. Bruce-Carey has had to use her own money to buy food and share it with residents. Ms. Bruce-Carey confirmed that residents always have meals available, despite not receiving money from Ms. McMillian to pay for it. I asked Ms. Bruce-Carey to review Resident A's assessment plan and healthcare appraisal to see if there was anything documented requiring staff to provide Resident A with specific foods. The documents were reviewed and did not indicate any special diets for Resident A.

On 3/29/22, I spoke to the owner/designee, Ms. McMillian. Regarding Resident A's diet, Ms. McMillian stated that she does not have a special diet and she is not anorexic. Ms. McMillian stated that Resident A's medication was changed recently, which she feels has caused the change in Resident A's behavior. Ms. McMillian describes Resident A as typically "laid back." However, since the medication change, Ms. McMillian feels that Resident A "wants to do whatever she can," such as being independent although she feels that Resident A is not quite ready for that. Ms. McMillian stated that she makes sure the house is always full of food. A week or two prior to the food running out, Ms. McMillian replaces items as needed. Ms. McMillian stated that when she buys food, she sticks to the menu that she creates and Ms. Bruce-Carey goes outside of the menu at times. Ms. McMillian is okay with Ms. Bruce-Carey going outside of the menu at times. However, it shouldn't change what she spends on groceries. I explained to Ms. McMillian that Ms. Bruce-Carey stated that she has only given her money for food during the first week of February, totaling \$60. Ms. McMillian stated that she has reimbursed Ms. Bruce-Carey for the food she bought. Due to Ms. Bruce-Carey and Resident A stating that there is food to eat daily, this is not a licensing issue and will need to be addressed between Ms. McMillian and Ms. Bruce-Carey.

Ms. McMillian stated that she makes healthier foods, as she often likes to bake and provide fruits for snacks. She stated she has also bought salad that the residents allowed to go to waste. Even after providing healthier options, Ms. McMillian stated that residents refused to eat at times. Ms. McMillian recently received a grocery list from Ms. Bruce-Carey. On this list, Resident A reportedly requested to have yogurt. Ms. McMillian stated that she is buying the yogurt. However, the yogurt will be for all residents and not just Resident A. Ms. McMillian stated that Resident A has also requested cranberry juice, which she did not buy as she stated she is not required to. Despite Resident A stating that she has reached out to Ms. McMillian directly regarding food, Ms. McMillian denied this claim. Ms. McMillian plans to buy meals

and snacks based on the menu she creates. Ms. McMillian stated that Resident A is able to buy any additional snacks or drinks with her own money. However, she is not required to do so as Resident A does not have a special diet prescribed by a physician. In fact, Ms. McMillian stated that she doesn't accept residents that require a special diet because she likes to stick to the menu she creates.

On 04/28/22, I conducted an exit conference with licensee designee, Ms. McMillian. She was informed of the investigative findings and denied having any questions.

<b>APPLICABLE RULE</b>	
<b>R 400.14313</b>	<b>Resident nutrition.</b>
	<b>(3) Special diets shall be prescribed only by a physician. A resident who has been prescribed a special diet shall be provided such a diet.</b>
<b>ANALYSIS:</b>	<p>Resident A listed concerns regarding the lack of alternative food options due to her struggles with disordered eating. Resident A acknowledged that she does not have a medical diagnosis but stated she struggles with anorexia.</p> <p>Ms. McMillian stated that Resident A does not have a special diet prescribed by a physician. In fact, Ms. McMillian stated that she does not accept residents with special diets.</p> <p>Resident A's assessment plan and healthcare appraisal do not indicate that Resident A has been prescribed a special diet. Therefore, a preponderance of evidence does not exist to support the allegation.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:** During the process of investigating the above allegations, I observed Resident A's assessment plan and I noticed it had not been updated since 11/30/2000.

Ms. McMillian stated that Resident A's assessment plan was updated in February 2022 and she is waiting to hear back from Network 180. At the conclusion of this report, I have not received a copy of an updated assessment plan.

On 04/28/22, I conducted an exit conference with licensee designee, Ms. McMillian. She was informed of the investigative findings and agreed to complete a corrective action plan.

<b>APPLICABLE RULE</b>	
<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	<b>(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.</b>
<b>ANALYSIS:</b>	Resident A's assessment plan has not been updated since 11/30/20. However, this form is required to be completed annually. Therefore, a preponderance of evidence does exist to support the allegation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:** During the process of this investigation, I noted that Resident A's healthcare appraisal has not been update since 11/19/20. Ms. McMillian stated that she was unaware that this form was required to be completed annually.

On 04/28/22, I conducted an exit conference with licensee designee, Ms. McMllian. She was informed of the investigative findings and agreed to complete a corrective action plan.

<b>APPLICABLE RULE</b>	
<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	<b>(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.</b>

<b>ANALYSIS:</b>	Resident A's healthcare appraisal has not been updated since 11/19/20. Therefore, a preponderance of evidence exists to support the allegation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, I recommend no change to the current license status.

*Anthony Mullins*

04/28/2022

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Anthony Mullins  
Licensing Consultant

Date

Approved By:

*Jerry Hendrick*

05/02/2022

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Jerry Hendrick  
Area Manager

Date