

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

July 12, 2022

Cavel Young Comfort Living Home L.L.C.#3 2111 North Drake Kalamazoo, MI 49006

RE: License #: AM140409800

Comfort Living Home L.L.C. #3

50253 M-51 N

Dowagiac, MI 49047

Dear Ms. Young:

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 (517) 284-9730.

Sincerely,

We Khaberry, LMSW

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

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

I. IDENTIFYING INFORMATION

License #: AM140409800

Licensee Name: Comfort Living Home L.L.C.#3

Licensee Address: 2111 North Drake

Kalamazoo, MI 49006

Licensee Telephone #: (269) 760-1182

Licensee/Licensee Designee: Cavel Young, Designee

Administrator: Cavel Young

Name of Facility: Comfort Living Home L.L.C. #3

Facility Address: 50253 M-51 N

Dowagiac, MI 49047

Facility Telephone #: (269) 760-1182

Original Issuance Date: 02/02/2022

Capacity: 10

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

TRAUMATICALLY BRAIN INJURED

ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		07/11/2	07/11/2022		
Date of Bureau	of Fire Services Inspection	on if applicable:			
Date of Health A	authority Inspection if app	olicable:			
Inspection Type	:	and Observation tion	⊠ Worksheet □ Full Fire Safety		
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:					
• Medication	pass / simulated pass ob	served? Yes 🛚	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 ☐ No ☒ If no, explain. Meal preparation / service observed? Yes ☒ No ☐ If no, explain. 					
Fire drills re	▶ Fire drills reviewed? Yes ⊠ No □ If no, explain.				
Fire safety 6	Fire safety equipment and practices observed? Yes $oximes$ No $oximes$ If no, explain.				
If no, explai	E-scores reviewed? (Special Certification Only) Yes ⊠ No □ N/A □ If no, explain. Water temperatures checked? Yes ⊠ No □ If no, explain.				
 Incident rep 	Incident report follow-up? Yes ⊠ No □ If no, explain.				
N/A					
Number of 6	excluded employees follo	owed-up?	N/A 🔀		
Variances?	Yes (please explain)	No □ N/A ⊠			

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

Criminal Background Check.

Except as otherwise provided in subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents after April 1, 2006 until the adult foster care facility conducts a criminal history check in compliance with subsections (4) and (5). 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. Beginning April 1, 2009, an individual who is exempt under this subsection 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 (12). 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. That individual may transfer to another adult foster care facility that is under the same ownership with which he or she was employed or under contract. If that individual wishes to transfer to an adult foster care facility that is not under the same ownership, he or she may do so provided that a criminal history check is conducted by the new facility in accordance with subsection (4). If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) through (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 subsection (1)(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

FINDING: There were no staff files to review, please submit staff files to me for review.

Direct care staff; qualifications and training.

(1) Direct care staff shall not be less than 18 years of age and shall be able to complete required reports and follow written and oral instructions that are related to the care and supervision of residents.

FINDING: There were no staff files to review, please submit staff files to me for review

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:
 - (a) Reporting requirements.
 - (b) First aid.
 - (c) Cardiopulmonary resuscitation.
 - (d) Personal care, supervision, and protection.
 - (e) Resident rights.
 - (f) Safety and fire prevention.
 - (g) Prevention and containment of communicable diseases.

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

FINDING: There were no staff files to review, please submit staff files to me for review

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

FINDING: There were no staff files to review, please submit staff files to me for review

Direct care staff and employee records.

- (3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information:
- (a) Names of all staff on duty and those volunteers who are under the direction of the licensee.
 - (b) Job titles.
 - (c) Hours or shifts worked.
 - (d) Date of schedule.
 - (e) Any scheduling changes.

FINDING: There were no staff schedule for me to review, please submit monthly staff schedule.

Environmental health.

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

FINDING: There were no window screens for bedrooms 1, 2,3,4. Please install screens and send pictures of screens for my review.

Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

FINDING: There were no thermometers in refrigerator or freezer. Please put them in and send pictures for my review.

Maintenance of premises.

(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.

FINDING: The toilet in bedroom 2 did not flush properly. Please fix and send pictures/video of repairs for my review.

Heating equipment generally.

(2) A furnace, water heater, heating appliances, pipes, woodburning stoves and furnaces, and other flame-or heat producing equipment shall be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and shall be maintained in a safe condition.

FINDING: The dryer vent was not attached. Please attach and send pictures for my review.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

We Khaberry, LMSW	7/12/2022
Nile Khabeiry	Date
Licensing Consultant	