

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 25, 2022

Abdulaziz Issa Transmed Mobility LLC Suite 6 2900 Golfside Rd Ann Arbor, MI 48108

RE: License #: AS810388893

Transmed Care 57 Edison Ave. Ypsilanti, MI 48197

Dear Mr. Issa:

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,

Vanon Beullin

Vanita C. Bouldin, Licensing Consultant Bureau of Community and Health Systems 22 Center Street Ypsilanti, MI 48198 (734) 395-4037

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

I. IDENTIFYING INFORMATION

License #: AS810388893

Licensee Name: Transmed Mobility LLC

Licensee Address: Suite 6

2900 Golfside Rd Ann Arbor, MI 48108

Licensee Telephone #: (734) 883-8544

Licensee/Licensee Designee: Abdulaziz Issa

Administrator: Abdulaziz Issa

Name of Facility: Transmed Care

Facility Address: 57 Edison Ave.

Ypsilanti, MI 48197

Facility Telephone #: (734) 547-5352

Original Issuance Date: 03/08/2018

Capacity: 5

Program Type: PHYSICALLY HANDICAPPED

AGED

TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/23/2022	
Date of Bureau of Fire Services Inspection if applicable: N/A	
Date of Health Authority Inspection if applicable: N/A	
Inspection Type: ☐ Interview and Observation ☐ Worksheet ☐ Combination ☐ Full Fire Safet	ty
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:	
 Medication pass / simulated pass observed? Yes ☐ No ☒ If no, expl Due to COVID-19. Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no 	
 Resident funds and associated documents reviewed for at least one research Yes ∑ No ☐ If no, explain. Meal preparation / service observed? Yes ☐ No ∑ If no, explain. No meals prepared/served during renewal inspection. Fire drills reviewed? Yes ∑ No ☐ If no, explain. 	ident?
• Fire safety equipment and practices observed? Yes ⊠ No ☐ If no, ex	xplain.
 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 compliance verified? Yes ☐ CAP date/s and ru N/A ☒	le/s:
 Number of excluded employees followed-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:

R 400.14208 Direct care staff and employee records.

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
 - (e) Verification of experience, education, and training.

No documentation of verified experience and education in employee files, BA and LC.

R 400.14208 Direct care staff and employee records.

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
 - (f)Verification of reference checks.

No documentation of verified reference checks for employee files, BA and LC.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(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.

No health care appraisal received at the time of admission for resident RG admitted on 2/28/21.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(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.

No guardian signature on resident, RG, annual written assessment to document guardian review.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

No guardian signature on annual resident care agreement for resident, RG, to document guardian review and approval for form dated 12/1/2021.

R 400.14310

Resident health care.

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

No resident weights submitted for review for residents, BR and RG.

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:
- (a) Be trained in the proper handling and administration of medication.
- (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.
- (c) Record the reason for each administration of medication that is prescribed on an as needed basis.
- (d) Initiate a review process to evaluate a resident's condition if a resident requires the repeated and prolonged use of a medication that is prescribed on an as needed basis. The review process shall include the resident's prescribing physician, the resident or his or her designated representative, and the responsible agency.
- (e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.
- (f) Contact the appropriate health care professional if a medication error occurs or when a resident refuses prescribed medication or procedures and follow and record the instructions given.

Resident, BR, medication administration sheets (computer generated) list the wrong instructions for Vitamin D and Magnesium Oxide. Example for Vitamin D – pharmacy label stated take one tab by mouth every day, the MAR sheet stated take 3 tabs by mouth every day.

Date: 08/25/2022

IV. RECOMMENDATION

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

Vanita C. Bouldin Licensing Consultant

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