

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 29, 2022

Adesuwa Iyoha Victory Homes Management Inc P.O. Box 3011 Ann Arbor, MI 48106

RE: License #: AS820317289

Victory Homes Management Inc #3

35033 Lynn Dr Romulus, MI 48174

Dear Ms. Iyoha:

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 #: AS820317289

Licensee Name: Victory Homes Management Inc

Licensee Address: 4648 Pond Run

Canton, MI 48188

Licensee Telephone #: (734) 846-7884

Licensee/Licensee Designee: Adesuwa Iyoha

Administrator: Adesuwa Iyoha

Name of Facility: Victory Homes Management Inc #3

Facility Address: 35033 Lynn Dr

Romulus, MI 48174

Facility Telephone #: (734) 992-3152

Original Issuance Date: 04/11/2012

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		08/26/2	08/26/2022		
Date of Bureau of Fire Services Inspection if applicable:					
Date of Health Authority Inspection if applicable:					
Inspection Typ	pe: ☐ Interview ☐ Combinat		n ⊠ Worksheet □ Full Fire Safety		
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 1 Role: Licensee Designee					
A full worl	n pass / simulated pass ob ssheet inspection was com n(s) and medication record	oleted.	No ⊠ If no, explain. Yes ⊠ No □ If no, explain.		
Yes 🛛 N	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.				
• Fire drills	reviewed? Yes ⊠ No □	If no, explain.			
Fire safet	y equipment and practices	observed? Yes	No ☐ If no, explain.		
If no, expl	reviewed? (Special Certifica ain. nperatures checked? Yes [
 Incident re 	eport follow-up? Yes 🖂 N	o 🗌 If no, exp	ain.		
CAP Date 440.1440	e action plan compliance ve ed 09/21/2020 R 330.1803 (2 (4); R 400.14403 (6) N/A f excluded employees follo	6), R 400.1420			
 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 400.14205

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

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

At the time of inspection, direct care staff Godwin Ighodaro employee file did not contain verification of annual 2021 health review.

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.

At the time of inspection, Resident A's resident file did not contain an annual 2021 health care appraisal.

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.

At the time if inspection:

- Resident A's resident file did not contain annual resident care agreements for 2020, 2021 or 2022.
- Resident B's 2021 resident care agreement was not signed by her designated representative at the time of admission.
- Resident B's resident file did not contain an annual 2022 resident care agreement.

R 400.14312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

At the time of inspection, I observed Triamcinolone Acetonide Ointment USP 0.025% medication in Resident B's bedroom; the medication was not in a locked cabinet or drawer.

R 400.14312 Resident medications.

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

At the time of inspection, Resident B's medications were not given, taken, or applied pursuant to label instructions.

Latuda 40mg PO TAB, take 1 tablet by mouth in the evening for 31 days with food. According to the medication administration records (MARs) the medication is given daily at 8:00 p.m. On 8/26/2022 (day of inspection) the MAR was prematurely initialed in the A.M. prior to the inspection which commenced at 11:00 a.m.

Resident B's medication bin contained Acetaminophen Extra Strength 500mg PO TAB, take 1 tablet by mouth every 4 hours (not to exceed 3000mg within 24 hours). The medication was not listed on the MARs. Adesuwa Iyoha, licensee designee asked Resident B about the medication, and she stated she takes the medication as needed.

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 MAR was initialed on 8/26/2022 (day of inspection) at 8:00 a.m. for Vitamin D3 50000 unit, take 1 tablet by mouth once weekly; the medication was not observed in the medication bin. Adesuwa Iyoha, licensee designee asked Resident B about the medication, and she stated the medication been discontinued and she did not receive it today. The MAR had been initialed by direct care staff Willie Goodloe. He said he thought he initialed Resident B's Cetrizine HCL medication, which was been initialed. The error was not documented on the MAR.

R 400.14315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A

department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection, Resident A's resident file did not contain a completed resident's funds and valuable's part I or II form.

IV. RECOMMENDATION

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

all	08/29/2022	
Licensing Consultant		Date