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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 6, 2022

Reeta Smith
Redwood Inc
PO Box 684
Oxford, MI 48371

RE: License #:	AM440290998 Brookhaven A.F.C. 4521 Stanley Rd Columbiaville, MI 48421-8421
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Dear Ms. Smith:

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) 643-7960.

Sincerely,

A handwritten signature in black ink that reads "Susan Hutchinson". The signature is written in a cursive, flowing style.

Susan Hutchinson, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(989) 293-5222

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

I. IDENTIFYING INFORMATION

License #:	AM440290998
Licensee Name:	Redwood Inc
Licensee Address:	3280 Trillium Lane Oxford, MI 48371
Licensee Telephone #:	(248) 625-1280
Licensee/Licensee Designee:	Reeta Smith
Administrator:	Reeta Smith
Name of Facility:	Brookhaven A.F.C.
Facility Address:	4521 Stanley Rd Columbiaville, MI 48421-8421
Facility Telephone #:	(810) 793-7060
Original Issuance Date:	06/09/2008
Capacity:	11
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/04/2022

Date of Bureau of Fire Services Inspection if applicable: 07/15/2022

Date of Health Authority Inspection if applicable: Needed

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 7

No. of others interviewed 1 Role: Hospice nurse

- Medication pass / simulated pass observed? 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 reviewed? Yes ☒ No ☐ If no, explain.
- Fire safety equipment and practices observed? Yes ☒ No ☐ If no, explain.
- 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 rule/s:
10/18/21, 7/22/21, 2/03/21 N/A ☐
- 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 400.14103	Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.
	<p>(1) An applicant for an adult foster care small group home license shall make available at the facility, or arrange for the department's inspection and copying of all of the following items:</p> <p>(e) A current financial statement and a proposed biennial budget.</p>
On 9/13/22 and 10/03/22, I asked the licensee designee, Reeta Smith, for a copy of the current budget for Brookhaven AFC. As of 10/05/22, Ms. Smith failed to provide me with this information.	
R 400.14201	Qualifications of administrator, direct care staff, licensee, and members of the household; provision of names of employee, volunteer, or member of the household on parole or probation or convicted of felony; food service staff.
	<p>(9) A licensee and the administrator shall possess all of the following qualifications:</p> <p>(b) Be capable of appropriately handling emergency situations.</p>
According to the documentation I received from Ms. Smith, her CPR and First Aid certificates expired on 9/15/22.	
R 400.14311	Investigation and reporting of incidents, accidents, illnesses, absences, and death.
	<p>(1) A licensee shall make a reasonable attempt to contact the resident's designated representative and responsible agency by telephone and shall follow the attempt with a written report to the resident's designated representative, responsible agency, and the adult foster care licensing division with 48 hours of any of the following:</p> <p>(c) Incidents that involved any of the following:</p> <p>(i) Displays of serious hostility.</p> <p>(II) Hospitalization.</p> <p>(iii) Attempts at self-inflicted harm or harm to others.</p>

	(iv) Instances of destruction to property.
<p>REPEAT VIOLATION ESTABLISHED. Regarding SIR 2021A0872043 dated 11/05/21. Licensee failed to send IR regarding a resident's injury and hospitalization. CAP dated 11/10/21 states "Home manager will fax or email the IR's..."</p> <p>During my onsite inspection, I examined several of the Incident/Accident Reports (IR) kept on file for Resident A. I noted that several IR's contained information about Resident A displaying serious hostility and/or attempts of harm to others. However, the licensee designee did not send these IR's to me as required by this rule.</p>	
R 400.14312	Resident medications
	<p>Rule 312. (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 S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.</p> <p>At the time of my inspection, I examined the medications and medication logs for Resident A. I noted that the medication packets/bubble packs were not issued by a doctor or pharmacy. I learned from staff that Resident A's family picks up his prescriptions from a pharmacy, takes them home, and packages the medication in bubble packs that they purchased online. There is no way to know if the medications in the bubble packets supplied by the family are the actual medications prescribed by Resident A's doctor. All prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident.</p>
R 400.14401	Environmental health.
	<p>(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.</p> <p>At the time of my onsite inspection, I observed a large number of rodent droppings in several areas of the basement. A rodent control program shall be maintained to protect the health of the residents.</p>
R 400.14401	Environmental health.
	<p>(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.</p>

At the time of my onsite inspection, I noted that there were poisons and/or caustics being kept in the cabinet under the kitchen sink. All poisons, caustics, and dangerous materials shall be stored in non-food preparation storage areas.	
R 400.14402	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.
At the time of my inspection, I noted that two of the resident's personal refrigerators were not equipped with thermometers. All refrigerators and freezers shall be equipped with approved thermometers.	
R 400.14403	Maintenance of premises.
	(10) Scatter or throw rugs on hard finished floors shall have a nonskid backing.
At the time of my inspection, I noted that there were several rugs on the floors which were not equipped with nonskid backing. All scatter or throw rugs must have a nonskid backing.	
R 400.14403	Maintenance of premises.
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.
<p>At the time of my inspection, I noted the following:</p> <ul style="list-style-type: none"> • The sliding glass door leading to the backyard was not working properly. It must be repaired or replaced and maintained in good repair • The basement smelled of mildew/mold and the source of the odor is unknown • There is a half door in the basement that leads to a crawl space. The door was locked, and I was unable to inspect it for safety • There is a large hole in the basement cement wall near the sub pump. The hole leads directly to the outside and it must be repaired 	
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.

<p>At the time of my inspection, I noted the following:</p> <ul style="list-style-type: none"> • There is a large hole/tear in the carpet in resident room #6 which could pose a tripping hazard. The carpet must be replaced for the resident's safety • In the basement, there are several missing ceiling tiles in the drop-down ceiling. The ceiling tiles must be replaced • In the basement, there is a missing ceiling vent that must be replaced • There is a large hole in the basement furnace room ceiling that must be repaired • There are several holes approximately two inches from the ground in the wall of the basement furnace room. These holes need to be repaired • There is evidence of rust/water damage on the carpet in the basement near the sub pump. The carpet must be replaced, and the source of the water damage needs to be determined 	
R 400.14410	Bedroom furnishings.
	(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a waterbed is not prohibited by this rule.
<p>At the time of my inspection, I noted that several of the resident mattresses were not equipped with mattress protectors to insure they are well protected. All mattresses shall be equipped with mattress protectors.</p>	
R 400.14507	Means of egress generally.
	(6) Occupied room door hardware shall be equipped with positive-latching, non-locking-against-egress hardware.
<p>At the time of my inspection, I noted that the door leading to the home manager's office was not equipped with positive-latching, non-locking-against-egress hardware. All occupied door hardware shall be equipped with appropriate hardware.</p>	

On 10/06/22, I conducted an exit conference with the licensee designee, Reeta Smith. I reviewed the findings of my inspection and explained which rule violations I am substantiating. Ms. Smith agreed to complete and submit a corrective action plan upon the receipt of my renewal licensing study report.

IV. RECOMMENDATION

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

Susan Hutchinson

October 6, 2022

Susan Hutchinson Licensing Consultant	Date
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