



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 2, 2023

Takeisha Zeigler
Ann Cook Center LLC
22525 E. 8 Mile Road
St. Clair Shores, MI 48080

RE: License #: AS500402370
Ann Cook Center
22525 E. 8 Mile Road
St. Clair Shores, MI 48080

Dear Ms. Zeigler:

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 and a date.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(586) 676-2877

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

I. IDENTIFYING INFORMATION

License#:	AS500402370
Licensee Name:	Ann Cook Center LLC
Licensee Address:	22525 E. 8 Mile Road St. Clair Shores, MI 48080
Licensee Telephone #:	(313) 451-0405
Licensee/Licensee Designee:	Takeisha Zeigler
Administrator:	Takeisha Zeigler
Name of Facility:	Ann Cook Center
Facility Address:	22525 E. 8 Mile Road St. Clair Shores, MI 48080
Facility Telephone #:	(313) 451-0405
Original Issuance Date:	01/07/2020
Capacity:	6
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/01/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 0

No. of others interviewed 0 Role: N/A

- Medication pass / simulated pass observed? Yes No If no, explain.
There are no residents in care.
- 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. There were no residents funds obtained.
- Meal preparation / service observed? Yes No If no, explain.
There are no residents in care.
- 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:
MCL 400.734b (3)(4); R 400.14315(b); R 400.14301 (6)(a-l) 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:

MCL 400.734b	Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.
	<p>(3) An individual who applies for employment either as an employee or as an independent contractor with an adult foster care facility or staffing agency and who has not been the subject of a criminal history check conducted in compliance with this section shall give written consent at the time of application for the department of state police to conduct a criminal history check under this section, along with identification acceptable to the department of state police. If the individual has been the subject of a criminal history check conducted in compliance with this section, the individual shall give written consent at the time of application for the adult foster care facility or staffing agency to obtain the criminal history record information as prescribed in subsection (4) or (5) from the relevant licensing or regulatory department and for the department of state police to conduct a criminal history check under this section if the requirements of subsection (11) are not met and a request to the federal bureau of investigation to make a determination of the existence of any national criminal history pertaining to the individual is necessary, along with identification acceptable to the department of state police. Upon receipt of the written consent to obtain the criminal history record information and identification required under this subsection, the adult foster care facility or staffing agency that has made a good faith offer of employment or an independent contract to the individual shall request the criminal history record information from the relevant licensing or regulatory department and shall make a request regarding that individual to the relevant licensing or regulatory department to conduct a check of all relevant registries in the manner required in subsection (4). If the requirements of subsection (11) are not met and a request to the federal bureau of investigation to make a subsequent determination of the existence of any national criminal history pertaining to the individual is necessary, the adult foster care facility or staffing agency shall proceed in the</p>

	<p>manner required in subsection (5). A staffing agency that employs an individual who regularly has direct access to or provides direct services to residents under an independent contract with an adult foster care facility shall submit information regarding the criminal history check conducted by the staffing agency to the adult foster care facility that has made a good faith offer of independent contract to that applicant.</p>
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Direct care staff, DeAngelo Zeigler Sr. did not have a consent application completed for fingerprinting.

REPEAT VIOLATION ESTABLISHED

Reference LSR dated 02/08/2021, CAP dated 02/08/2021.

<p>MCL 400.734b</p>	<p>Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.</p>
	<p>(4) Upon receipt of the written consent to conduct a criminal history check and identification required under subsection (3), the adult foster care facility or staffing agency that has made a good faith offer of employment or independent contract to the individual shall make a request to the department of state police to conduct a criminal history check on the individual and input the individual's fingerprints into the automated fingerprint identification system database, and shall make a request to the relevant licensing or regulatory department to perform a check of all relevant registries established according to federal and state law and regulations for any substantiated findings of abuse, neglect, or misappropriation of property. The request shall be made in a manner prescribed by the department of state police and the relevant licensing or regulatory department or agency. The adult foster care facility or staffing agency shall make the written consent and identification available to the department of state police and the relevant licensing or regulatory department or agency. If the department of state police or the federal bureau of investigation charges a fee for conducting the criminal history check, the charge shall be paid by or reimbursed by the department. The adult foster care facility or staffing agency shall not seek reimbursement for a charge imposed by the department of state police or the federal</p>

	bureau of investigation from the individual who is the subject of the criminal history check. The department of state police shall conduct a criminal history check on the individual named in the request. The department of state police shall provide the department with a written report of the criminal history check conducted under this subsection. The report shall contain any criminal history record information on the individual maintained by the department of state police.
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Direct care staff, DeAngelo Zeigler Sr. does not have required fingerprinting documents approved by the department.

REPEAT VIOLATION ESTABLISHED

Reference LSR dated 02/08/2021, CAP dated 02/08/2021.

R 400.14204	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.

I observed that the staff schedules listed two direct care staff, A.Z and D.Z. who are both under the age of 18 years.

R 400.14204	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.

Direct care staff, DeAngelo Zeigler Sr. did not have record of Reporting requirements training in the employee record.

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.
	(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.

Direct care staff, DeAngelo Zeigler Sr. did not have a physician's statement within 30 days of hire for review in the employee record.

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.

Direct care staff, DeAngelo Zeigler Sr. did not have an annual health review in the employee record for 2021 and 2022.

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: (d) Verification of the age requirement. (e) Verification of experience, education, and training. (f) Verification of reference checks.

Direct care staff, DeAngelo Zeigler Sr. did not have verification of age, experience, education and two reference checks in the employee record.

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.

Resident A did not have a *Health Care Appraisal* no later than 30 days in the resident record after admission or 90 days prior to admission.

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: (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

I observed that Resident A's Seroquel 25mg medication was initialed on the medication administration record (MAR) on 04/07/2022 at bedtime as administered however, Resident A was hospitalized prior to that time.

R 400.14312	Resident medications.
	(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

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During the onsite, I observed over 20 medication blister packs for Resident A in the home. Resident A was discharged from the home on 04/30/2022.

R 400.14316	Resident records.
	<p>(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:</p> <ul style="list-style-type: none"> (a) Identifying information, including, at a minimum, all of the following: <ul style="list-style-type: none"> (iv) Name, address, and telephone number of the next of kin or the designated representative. (vi) Name, address, and telephone number of the preferred physician and hospital. (viii) Funeral provisions and preferences. (ix) Resident's religious preference information.

Resident A's *Resident Identification* form did not have the contact information completed for the next of kin, preferred physician, funeral provisions, and religious preferences.

R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	<p>(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.</p>

During the onsite, I observed that there was no evening or sleeping hour fire drills conducted the first quarter of 2022.

R 400.14401	Environmental health.
	<p>(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.</p>

During the onsite, I observed that the kitchen faucet registered at 136.8 degrees Fahrenheit.

R 400.14408	Bedrooms generally.
	(7) Bedrooms shall have at least 1 easily openable window.

During the onsite, I observed that bedroom #2 did not have one easily openable window.

On 02/02/2023, I conducted an exit conference with Takeisha Zeigler, licensee designee. Ms. Zeigler was informed of the recommendation and the provisional license process. Ms. Zeigler agreed with the recommendation.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a 1st provisional license is recommended.

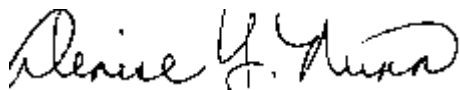


02/01/2023

LaShonda Reed
Licensing Consultant

Date

Approved by:



02/02/2023

Denise Y. Nunn
Area Manager

Date