



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 17, 2023

Cajetan Kimfon
Special Care Homes L.L.C
1632 Ashby Street
Westland, MI 48186

RE: License #: AS820402241
Ashby A.F.C
1632 Ashby Street
Westland, MI 48186

Dear Mr. Kimfon:

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,

A handwritten signature in blue ink that reads "K. Robinson". The signature is written in a cursive style with a large, stylized "K" and a clear, legible "Robinson".

K. Robinson, LMSW, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-0574

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

I. IDENTIFYING INFORMATION

License #: AS820402241

Licensee Name: Special Care Homes L.L.C

Licensee Address: 1632 Ashby Street
Westland, MI 48186

Licensee Telephone #: (313) 960-0934

Licensee/Licensee Designee: Cajetan Kimfon, Designee

Administrator: Cajetan Kimfon

Name of Facility: Ashby A.F.C

Facility Address: 1632 Ashby Street
Westland, MI 48186

Facility Telephone #: (734) 589-8891

Original Issuance Date: 04/08/2020

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
TRAUMATICALLY BRAIN INJURED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/14/2023

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 03

No. of residents interviewed and/or observed 04

No. of others interviewed 01 Role: Licensee designee

- 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.
Breakfast served 30 minutes prior to my arrival.
- 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:
3/1/23: 205(3), 207(2), 208(1)(f), 301(4), 311(1), 315(3), 316(1), and 401(8).
- 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 330.1803 Facility environment; fire safety.

(5) The capability of the clients to evacuate a facility in the event of a fire shall be assessed using methods described in appendix f of the 1985 life safety code of the national fire protection association. Appendix f of the 1985 life safety code of the national fire protection association is adopted by reference as part of these rules. A copy of the adopted appendix f is available from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost. A copy of appendix f may also be obtained from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of appendix f. A price quote for copying of these pages may be obtained from the national fire protection association.

E-score calculations are not accurate. Specifically, Individual worksheet Ratings for residents with impaired mobility does not accurately reflect the resident's inability to ambulate. Resident requires total care and cannot transfer in and out of wheelchair without Staff assistance; however, the E-score rating scored her as "slow" #3 instead of "Needs full Assistance or Very slow" #20. As a result, the home's final E-score was impacted with a higher overall rating.

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 worker, TyKeia McCormick was hired to work at the facility on 1/18/23; her at-hire physical is dated 5/4/22 which is approximately 8 months prior to her start date.

This is a **repeat violation**; See Renewal LSR dated 10/6/22 and Interim Confirming Letter dated 2/17/23. The licensee has submitted plans to correct the violation.

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 J.B. entered the home on 9/15/22; her physical on file is dated 4/5/23 which is beyond the 30-day requirement.

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.

Observed Medication Administration Records that do not contain the signatures of the person(s) administering resident medication during the following months: 10/22, 11/22, 01/23, and 03/23.

This is a **repeat violation**; See Renewal LSR dated 10/6/22. The licensee has submitted a plan to correct the violation.

R 400.14403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

Observed wood boards on the backyard deck that are worn, torn, and rotted.

Mr. Kimfon acknowledged the deck needs repair; he stated he has plans to replace the affected boards.

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.

Observed multiple scuff marks on the walls in hallway.

Mr. Kimfon indicated the marks were caused by resident wheelchairs.

R 400.14503 Interior finishes and materials generally.

(1) Interior finish materials shall be at least class C materials throughout the adult foster care small group home.

Observed a peg board covering hole in Bedroom # 2.

R 400.14505 Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions and changes of category.

(4) Detectors shall be tested, examined, and maintained as recommended by the manufacturer.

Smoke detector in the basement was chirping throughout the entire duration of inspection.

IV. RECOMMENDATION

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



04/17/23

Kara Robinson
Licensing Consultant

Date