



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 18, 2023

Lidra Walker
P.O. Box 20264
Ferndale, MI 48220

RE: License #: AF630249565
Lidra Walker AFC
24200 Gardner
Oak Park, MI 48237

Dear Ms. Walker:

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 (248) 975-5053.

Sincerely,

A handwritten signature in black ink that reads "Cindy Berry". The signature is written in a cursive style with a large, looping "C" and "B".

Cindy Berry, Licensing Consultant
Bureau of Community and Health Systems
3026 West Grand Blvd
Cadillac Place, Ste 9-100
Detroit, MI 48202
(248) 860-4475

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

I. IDENTIFYING INFORMATION

License #:	AF630249565
Licensee Name:	Lidra Walker
Licensee Address:	24200 Gardner Oak Park, MI 48237
Licensee Telephone #:	(248) 543-0086
Licensee:	Lidra Walker
Administrator:	N/A
Name of Facility:	Lidra Walker AFC
Facility Address:	24200 Gardner Oak Park, MI 48237
Facility Telephone #:	(248) 818-5220
Original Issuance Date:	01/14/2003
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/18/2023

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 2

No. of residents interviewed and/or observed 4

No. of others interviewed 0 Role: N/A

- 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.
There was no meal service provided at the time the on-site was conducted.
- 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.
There were no incident reports requiring follow-up.
-
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
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 400.1407 Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians' instructions; health care appraisal.

(9) If a resident is not under the care of a physician at the time of the resident's admission to the home, the licensee shall require that the resident or the resident's designated representative provide a written health care appraisal completed within the 90-day period before the resident's admission to the home. If a written health care appraisal is not available, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.

Resident C moved into the facility on 7/27/2022 without a completed health care appraisal. A health care appraisal was not completed until 12/19/2022.

R 400.1416 Resident health care.

(2) A licensee shall maintain a health care appraisal on file for not less than 2 years from the resident's admission to the home.

- There were no health care appraisals contained in Resident A and Resident D's resident file for 2021 or 2022.
- There was no health care appraisal contained in Resident B's resident file for 2022.

R 400.1418 Resident medications.

(2) Medication shall be given pursuant to label instructions.

- Resident A's bedtime medication Simvastatin 40 mg and Olanzapine 20 mg were not listed on the medication log.
- On 1/18/2023 Resident B's morning medication, Amantadine HCL 100 mg, Finasteride 5 mg, Metformin HCL 500 mg, Tamsulosin 0.4 mg, and Trazodone HCL 100 mg dated 1/05/2023 through 1/07/2023 and on 1/18/2023 were still in the medication box. These same medications were not in the box for 1/19/2023 through 1/24/2023
- On 1/18/2023 Resident B's bedtime medication, Amantadine HCL 100 mg, Atorvastatin 40 mg, Divalproex DR 500 mg, Melatonin 10 mg and Risperidone 3 mg dated 1/05/2023 through 1/07/2023 and on 1/17/2023 were still in the medication box. These same medications were not in the medication box for 1/19/2023 through 1/23/2023.

R 400.1418 Resident medications.

(4) When a licensee or responsible person supervises the taking of medication by a resident, the licensee or responsible person shall comply with the following provisions:

(a) Maintain a record as to the time and amount of any prescription medication given or applied. Records of prescription medication shall be maintained on file in the home for a period of not less than 2 years.

- Resident A's evening medications, Simvastatin 40 mg and Olanzapine 20 mg were not listed on the medication log.
- There were no staff signatures on Resident C's evening medication, Buspirone HCL 5 mg on 1/16/2023 and 1/17/2023.
- Resident C's evening medication, Eliquis 5 mg was signed as administered on 1/18/2023 in the morning.
- There were no staff signatures on Resident C's morning medication, Entresto 24 mg/26 mg on 1/18/2023
- Resident C's medication, Ibuprofen 200 mg was listed on the medication log and signed as administered 1/01/2023 through 1/18/2023 but the licensee could not locate this medication.
- There were no staff signatures on Resident D's medication, Zyprexa 20 mg on 1/12/2023 through 1/17/2023.

- Resident D's medication, Norvasc 10 mg was signed as administered on 1/01/2023 through 1/18/2023 but the licensee could not locate this medication.


R 400.1426 Maintenance of premises.

(1) The premises shall be maintained in a clean and safe condition.

- The hot water in the kitchen and bathroom had a temperature reading of 141 degrees Fahrenheit which is beyond the safe hot water temperature of 105 – 120 degrees Fahrenheit.
- The baseboards in bedroom #1 were missing.

IV. RECOMMENDATION

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



01/18/2023

Cindy Berry
Licensing Consultant

Date