



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 24, 2023

Nicole Deneweth  
Homes of Opportunity Inc  
P.O. Box 190179  
Burton, MI 48519

RE: License #: AS820014663  
**Jackson AFC Home**  
**14434 Jackson**  
**Taylor, MI 48180**

Dear Ms. Deneweth:

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 cursive script, appearing to read "D Walker".

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 #:** AS820014663

**Licensee Name:** Homes of Opportunity Inc

**Licensee Address:** Suite C  
1110 Eldon Baker Drive  
Flint, MI 48507

**Licensee Telephone #:** (586) 675-0651

**Licensee/Licensee Designee:** Nicole Deneweth

**Administrator:** LaShawn Jackson

**Name of Facility:** Jackson AFC Home

**Facility Address:** 14434 Jackson  
Taylor, MI 48180

**Facility Telephone #:** (734) 281-6452

**Original Issuance Date:**

**Capacity:** 4

**Program Type:** DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/19/2023

Date of Bureau of Fire Services Inspection if applicable:

Date of Environmental/Health Inspection if applicable:

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 3

No. of others interviewed 1 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.
- 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:  
CAP Dated 06/09/2021 R 400.14301 (10), R 400.14301 (9), R 400.14312 (4)(b),  
R 400.14507 (5) 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 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

(a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.

(b) A description of services to be provided and the fee for the service.

(c) A description of additional costs in addition to the basic fee that is charged.

(d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.

(e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.

(f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.

(g) An agreement by the resident to follow the house rules that are provided to him or her.

(h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.

(i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.

(j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.14315.

(k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.

(l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.

At the time of inspection, Resident A's resident file did not contain a 2022 resident care agreement at the time of admission.

**\*REPEAT VIOLATION ESTABLISHED\* LSR DATED 05/25/2021; CAP DATED 06/09/2021.**

**R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

At the time of inspection, Resident A's resident file did not contain a 2022 written assessment plan at the time of admission.

**R 400.14306 Use of assistive devices.**

(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

At the time of inspection, I observed a walker in Resident A's bedroom and a shower chair in the bathroom without written authorization from a licensed physician.

**R 400.14310 Resident health care.**

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

At the time of inspection, Resident A's resident file did not contain weights from 11/2022 through 04/2023.

**R 400.14313      Resident nutrition.**

(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.

At the time of inspection, the menu posted was not up-to-date. LaShawn Jackson, administrator stated she failed to update the menu for 05/2023.

**R 400.14318      Emergency preparedness; evacuation plan; emergency transportation.**

(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.

At the time inspection, the fire drills were not thoroughly completed. The following fire drills did not contain the time the drills were conducted.

- 11/07/2021, evening drill during the 4<sup>th</sup> quarter.
- 01/06/2022, day drill during the 1<sup>st</sup> quarter.
- 02/10/2022, evening drill during the 1<sup>st</sup> quarter.
- 05/02/2022, evening drill during the 2<sup>nd</sup> quarter.
- 07/12/2022, day drill during the 3<sup>rd</sup> quarter.
- 08/04/2022, evening drill during the 3<sup>rd</sup> quarter.
- 11/08/2022, evening drill during the 4<sup>th</sup> quarter.
- 12/08/2022, sleep drill during the 4<sup>th</sup> quarter.

**R 400.14408      Bedrooms generally.**

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, nonlocking-against-egress hardware.

At the time of inspection, Resident A's bedroom door was not equipped with nonlocking-against-egress hardware.

#### IV. RECOMMENDATION

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



05/24/2023

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Denasha Walker  
Licensing Consultant

Date