

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 31, 2023

Appolonia Okonkwo Tender Hearts, Inc. 2708 Oakman Court Detroit, MI 48238

> RE: License #: AS820400485 Phipps Manor 27229 Phipps Street Inkster, MI 48141

Dear Mrs. Okonkwo:

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,

Denasha Walker, Licensing Consultant Bureau of Community and Health Systems Cadillac PI. 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 #:	AS820400485
Licensee Name:	Tender Hearts, Inc.
Licensee Address:	2708 Oakman Court Detroit, MI 48238
Licensee Telephone #:	(248) 240-4413
Licensee/Licensee Designee:	Appolonia Okonkwo
Administrator:	Appolonia Okonkwo
Name of Facility:	Phipps Manor
Facility Address:	27229 Phipps Street Inkster, MI 48141
Facility Telephone #:	(313) 451-8771
Original Issuance Date:	10/23/2020
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

### **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):

05/30/2023

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed1No. of residents interviewed and/or observed2No. of others interviewed1Role:Licensee Designee

- Medication(s) and medication record(s) reviewed? Yes  $\boxtimes$  No  $\square$  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  $\boxtimes$  No  $\square$  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 04/22/2021 R 330.1803 (6) N/A □
- Number of excluded employees followed-up? N/A  $\boxtimes$
- 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 400.14205 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.

At the time of inspection, direct care staff Liza Cole employee file did not contain 2021, 2022, or 2023 annual health review verification.

### R 400.14315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection, Residents B's resident funds and valuables transaction form part II was not thoroughly completed and did not reflect accurate transaction and accounting information.

Resident B's transaction form did not reflect the correct social security income (SSI) amount received monthly from 01/2023 to present. The SSI amount documented was \$980.00; cost of care \$900.00 and personal allowance \$80.00. Resident B's SSI documents were not available. Bennett Okonkwo accessed Resident B's electronic banking information and Resident B's last SSI deposit was \$1052.00.

### 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.

At the time of inspection:

• The paint was buckling on the ceiling in the rear of the home above the exit door and not in good repair.

• The paint on the wall was buckling above the window in the resident bedroom #2.

## **IV. RECOMMENDATION**

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

4U2 05/31/2023

Date

**Licensing Consultant**