

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

September 27, 2023

William Phillips and Christine Phillips 623 Whites Kalamazoo, MI 49008

RE: License #: AF390016150

Phillips AFC 623 Whites Rd

Kalamazoo, MI 49008

Dear William Phillips and Christine Phillips:

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 (517) 284-9730.

Sincerely,

Cathy Cushman, Licensing Consultant Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664 Lansing, MI 48909 (269) 615-5190

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

I. IDENTIFYING INFORMATION

License #: AF390016150

Licensee Name: William Phillips and Christine Phillips

Licensee Address: 623 Whites

Kalamazoo, MI 49008

Licensee Telephone #: (269) 382-6549

Licensee Designee: N/A

Administrator: N/A

Name of Facility: Phillips AFC

Facility Address: 623 Whites Rd

Kalamazoo, MI 49008

Facility Telephone #: (269) 382-6549

Original Issuance Date: 03/16/1995

Capacity: 5

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Date	e of On-site Inspection: 09/26/2023	
Date	e of Bureau of Fire Services Inspection if applicable:	N/A
Date	e of Health Authority Inspection if applicable: N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed N/A Role:	2 2
•	Medication pass / simulated pass observed? Yes \boxtimes	No ☐ If no, explain.
•	Medication(s) and medication record(s) reviewed? Ye	es 🗵 No 🗌 If no, explain
•	Resident funds and associated documents reviewed f Yes ⊠ No ☐ If no, explain. Meal preparation / service observed? Yes ⊠ No ☐	
•	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 [If no, explain. Water temperatures checked? Yes No If no, explain.	
•	Incident report follow-up? Yes ⊠ No □ If no, expla	in.
•	Corrective action plan compliance verified? Yes ☐ C	CAP date/s and rule/s:
•		N/A ⊠
•	Variances? Yes ☐ (please explain) No ☒ N/A ☐ Variance for R. 400.1404(9) is no longer applicable.	

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.

(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

FINDING: Per the licensee, Ms. Phillips, the responsible person, Jesselyn Coleman, was not listed as working in the facility on the Workforce Background Check website. Ms. Coleman needs to be listed on the facility's WBC website as eligible to work in the facility and an eligibility letter placed in her file.

R 330.1806 Staffing levels and qualifications.

- (2) All staff who work independently and staff who function as lead workers with clients shall have successfully completed a course of training which imparts basic concepts required in providing specialized dependent care and which measures staff comprehension and competencies to deliver each client's individual plan of service as written. Basic training shall address all of the following areas:
- (a) An introduction to community residential services and the role of direct care staff.
- (b) An introduction to the special needs of clients who have developmental disabilities or have been diagnosed as having a mental illness. Training shall be specific to the needs of clients to be served by the home.
- (c) Basic interventions for maintaining and caring for a client's health, for example, personal hygiene, infection control, food preparation, nutrition and special diets, and recognizing signs of illness.
 - (d) Basic first aid and cardiopulmonary resuscitation
- (e) Proper precautions and procedures for administering prescriptive and nonprescriptive medications.
- (f) Preventing, preparing for, and responding to environmental emergencies, for example, power failures, fires, and tornados.
- (g) Protecting and respecting the rights of clients, including providing client orientation with respect to the written policies and procedures of the licensed facility.
- (h) Non-aversive techniques for the prevention and treatment of challenging behavior of clients.

FINDING: There was no verification of training for responsible person, Jesselyn Coleman.

R 400.1405 Health of a licensee, responsible person, and member of the household.

(2) A licensee shall have on file with the department a statement signed by a licensed physician or his or her designee with regard to his or her knowledge of the physical health of the licensee and each responsible person. The statement shall be signed within 6 months before the issuance of a license and at any other time requested by the department.

FINDING: There was no verification of a statement signed by a licensed physician for responsible person, Jesselyn Coleman, attesting to his or her knowledge of Ms. Coleman's physical health.

R 400.1405

Health of a licensee, responsible person, and member of the household.

(3) A licensee shall provide the department with written evidence that he or she and each responsible person in the home is free from communicable tuberculosis. Verification shall be within the 3-year period before employment and verification shall occur every 3 years thereafter.

FINDING: There was no verification responsible person, Jesselyn Coleman, had a TB test within the last three years, as required.

R 400.1407

Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(6) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency at least annually or more often if necessary.

FINDING: Upon review of Resident B's Resident Care Agreement (RCA), dated 11/04/2022, the licensee was charging \$954.50 per month for basic fees with the indication the fee would increase January 2023; however, the RCA was not updated January 2023 to reflect this rate increase.

R 400.1440 Heat producing equipment.

(6) Heat-producing equipment located in a basement shall be separated from the remainder of the home by means of a floor separation. Standard building material shall be sufficient for the floor separation and shall include at least a 1 3/4-inch solid wood core door or equivalent which is installed in a substantially fully stopped wood or steel frame and which is so constructed to effectively stop the spread of smoke and fire. The door shall be equipped with

an automatic self-closing device and positive-latching hardware.

FINDING: The fire door at the top of the basement stairs was not self closing when opened all the way, as required.

IV. RECOMMENDATION

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

Cathy Cuchman		
0	09/26/23	
Cathy Cushman Licensing Consultant		Date