GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

October 12, 2023

Ozella Wingate
Richton Home Inc
2440 W. McNichols
Detroit, MI 48221

RE: License #: AM820338943
Investigation #: 2023A0778039
Richton Home

Dear Ms. Wingate:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

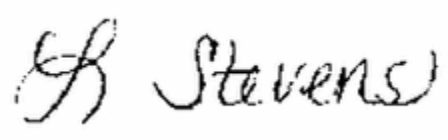
- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.
-

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days.
contract.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (313) 456-0380.

Sincerely,



LaKeitha Stevens, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3055

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AM820338943
Investigation #:	2023A0778039
Complaint Receipt Date:	09/25/2023
Investigation Initiation Date:	09/27/2023
Report Due Date:	11/24/2023
Licensee Name:	Richton Home Inc
Licensee Address:	2945 Richton Detroit, MI 48206
Licensee Telephone #:	(313) 354-1617
Administrator:	Gaylon Wingate
Licensee Designee:	Ozella Wingate
Name of Facility:	Richton Home
Facility Address:	2945 Richton Detroit, MI 48206
Facility Telephone #:	(313) 354-1617
Original Issuance Date:	07/26/2013
License Status:	REGULAR
Effective Date:	04/02/2022
Expiration Date:	04/01/2024
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
The home does not have hot water.	Yes
Half the home does not have power.	Yes
Additional Findings	Yes

III. METHODOLOGY

09/25/2023	Special Investigation Intake 2023A0778039
09/25/2023	APS Referral referral received.
09/27/2023	Special Investigation Initiated - Telephone Telephone call to the complainant
09/27/2023	Referral - Recipient Rights referral generated.
09/28/2023	Inspection Completed On-site
09/28/2023	Contact - Telephone call made. Telephone call made to APS Laneisha Steen
10/02/2023	Inspection Completed On-site
10/02/2023	Inspection Completed-BCAL Sub. Non-Compliance
10/02/2023	Contact - Telephone call made. Telephone call made to licensee designee.

10/02/2023	Exit Conference Telephone exit conference with licensee designee Ozella WIngate

ALLEGATION: The home does not have hot water

INVESTIGATION: On 09/28/2023, I completed an unannounced onsite inspection. I observed the facility to be without hot water on one side of the unit. I observed there to be 2 hot water tanks in the basement. One was connected and the other was not. Staff Walter Wingate stated the home is without hot water on one side of the facility. However, the plumber is scheduled to come and install the new water tank. Hence the reason for 2 tanks being in the basement.

On 09/28/2023, I made a telephone call to Laneisha Stein of Adult Protective Services. I informed her the allegations were true.

On 10/2/2023, I observed a new hot water tank to be connected. However, I was unable to get a thorough check of the water due to additional plumbing issues.

APPLICABLE RULE	
R 400.14403	**Maintenance of premises.**
	(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.
ANALYSIS:	One side of the facility was without hot water.
CONCLUSION:	**VIOLATION ESTABLISHED**

ALLEGATION: Half the home does not have power.

INVESTIGATION: On 09/28/2023 and 10/2/2003, I observed one side of the facility to not have electricity. Staff Walter Wingate stated the bill was paid with DTE, however, there are still complications. He stated an electrician is needed. I observed extension cords throughout the facility in order to give power to certain areas. I informed Mr. Wingate the use of the cords was a hazard.

APPLICABLE RULE	
R 400.14512	**Electrical service.**
	Electrical service. **(1) The electrical service of a home shall be maintained in a safe condition.** **(2) Where conditions indicate a need for inspection, the electrical service shall be inspected by a qualified electrical inspection service. A copy of the written approval from the qualified inspection service shall be submitted to the department and a copy shall be maintained in the adult foster care small group home and shall be available for department review.**
ANALYSIS:	The facility was observed to not have electrical service throughout the entire home. I observed extension cords to be utilized throughout the facility.
CONCLUSION:	**VIOLATION ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION: During my onsite inspection on 10/2/2023, I made a telephone call to Ozella Wingate, licensee designee. I spoke with her regarding the conditions of the facility and asked if she was aware. She stated she had been ill and has not been in the facility. I asked for a health care appraisal. To date, I have not received the requested documentation.

APPLICABLE RULE	
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.**
	(2) A licensee shall have on file with the department, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of the licensee and administrator. The statement shall be signed within 6 months before the issuance of a temporary license and at any other time requested by the department.

ANALYSIS:	I requested a health care appraisal of Ozella Wingate, licensee designee. To date, I have not received a copy.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: On 10/2/2023, I completed an unannounced onsite inspection. When I arrived, the residents were home without staffing. They informed me staff left and went to the gas station. Minutes later Mr. Wingate returned to the home. He stated he only left for a few moments.

APPLICABLE RULE	
R 400.14206	**Staffing requirements.**
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.
ANALYSIS:	There wasn't sufficient staff on duty. I observed the residents to be home without staff.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: During my onsite inspection I observed the refrigerator freezer to be completely empty. The refrigerator was only equipped with 2 cartons of eggs, Cinnabon cereal, a half loaf of bread and baked tofu. When Mr. Wingate was asked about food, he stated he needed to go shopping but had no timeframe on when he would be going. Resident A stated the facility doesn't have food. He stated they get food from the food pantry and Focus Hope.

APPLICABLE RULE	
R 400.14313	**Resident nutrition.**
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.

ANALYSIS:	I observed the facility to not have enough food to prepare a meal for the residents. Staff was uncertain when shopping would occur. Resident A stated the facility doesn't have food. He stated they get food from the food pantry and Focus Hope.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: During my onsite inspection no menus were posted or available for review.

APPLICABLE RULE	
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.
ANALYSIS:	No menus were posted or available for review during my onsite inspection.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: During my onsite inspection, I asked to see Resident records. Mr. Wingate stated he was not aware of the files or where they were located. I made a call and left a voice message for both the administrator and licensee designee requesting files. To date, I have not received a file.

APPLICABLE RULE	
R 400.14316	**Resident records.**
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department.

ANALYSIS:	Resident records were not maintained in the home. During my onsite inspection resident records were not available. I made a call to both the licensee designee and administrator requesting files were sent to me. To date I have not received the files.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: During my 10/2/2023 inspection, I observed white powder around the base boards of the facility that Mr. Wingate did not identify when asked but appeared to be rodent/pest poison. In addition, there was a rodent trap located upstairs that still had a dead rodent on it.

APPLICABLE RULE	
R 400.14401	**Environmental health.**
	(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.
ANALYSIS:	A dead rodent was observed on a trap upstairs. In addition, there was white powder throughout the facility that Mr. Wingate did not identify but appeared to be rodent/pest poison.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: At the time of inspection, I observed the bathroom sink to be clogged. There was standing water in the kitchen. There was standing water in the basement. Two windows in the facility were broken. In addition, there were extension cords being used in both the basement and upstairs of the facility.

APPLICABLE RULE	
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.

ANALYSIS:	The facility was observed to not be constructed in a way to not provide safety for the residents. There was standing water, clogged sinks, broken windows and use of multiple extension cords.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: The facility was observed to need a thorough cleaning. The furniture was dusty. There were cobwebs in the home. The carpet was dirty. The kitchen refrigerator was dirty, the kitchen cabinets were dirty and full of grime.

APPLICABLE RULE	
R 400.14403	**Maintenance of premises.**
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
ANALYSIS:	The facility needs a thorough cleaning. The carpet is dirty, cobwebs, kitchen cabinets and refrigerator were all observed to be dirty and with grime. The home housekeeping standard are not clean and orderly appearance.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: During my onsite inspection I observed the bedroom floor to be unsecure and sunk in.

APPLICABLE RULE	
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.
ANALYSIS:	The bedroom floor of a resident was unsecure and sunk in. The floors are not in good repair.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: During both onsite inspections, I observed Residents and staff traffic through the bedroom of a resident in order to exit the facility.

APPLICABLE RULE	
R 400.14408	**Bedrooms generally.**
	(5) Traffic to and from any room shall not be through a resident bedroom.
ANALYSIS:	I observed traffic to and from a resident bedroom.
CONCLUSION:	**VIOLATION ESTABLISHED**

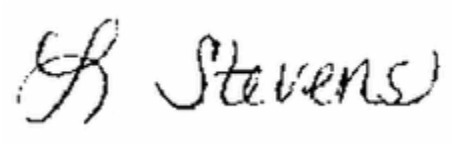
INVESTIGATION: During my onsite inspection I observed bedroom linen to need replacement. I observed blankets to have holes and pillows to be worn.

On 10/2/2023, I completed a telephone exit conference with Ozella Wingate, licensee designee. I informed her of the violations. She stated she was not aware but will work to make the needed corrections. I informed her I was requesting a provisional license.

APPLICABLE RULE	
R 400.14411	**Linens.**
	(1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillowcase, a minimum of 1 blanket, and a bedspread for each bed. Bed linens shall be changed and laundered at least once a week or more often if soiled.
ANALYSIS:	Bedroom linen is not in good condition. I observed blankets to have holes and pillows to be worn.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon submission of an acceptable corrective action plan I recommend the status of the license is changed to provisional.



10/12/2023

LaKeitha Stevens Date
Licensing Consultant

Approved By:

10/12/2023

Ardra Hunter Date
Area Manager