



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

November 8, 2023

Gary Ray
Genesee Manor, Inc.
30002 Saint Martins
Livonia, MI 48152

RE: License #: AS820383852
Genesee Manor 2
29825 Joy Road
Westland, MI 48185

Dear Mr. Ray:

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 blue ink, appearing to read "Edith Richardson".

Edith Richardson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-1934

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

I. IDENTIFYING INFORMATION

License #: AS820383852

Licensee Name: Genesee Manor, Inc.

Licensee Address: 30002 Saint Martins
Livonia, MI 48152

Licensee Telephone #: (131) 344-9689

Licensee/Licensee Designee: Gary Ray & Michele Ray

Administrator: Michele Ray

Name of Facility: Genesee Manor 2

Facility Address: 29825 Joy Road
Westland, MI 48185

Facility Telephone #: (313) 949-2501

Original Issuance Date: 05/04/2017

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
TRAUMATICALLY BRAIN INJURED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/25/2023 & 10/31/2023

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 6

No. of others interviewed [redacted] Role: [redacted]

- 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.
N/A
- 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 400.14103 Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.

An applicant for an adult foster care small group home license shall make available at the facility, or arrange for the department's inspection and copying of all of the following items:

(d) A current floor plan of each level and basement of the entire structure, including the interior layout of foster care areas and room descriptions and specifics as to use, the number of beds, and the dimensions of floor space.

The floor plan that was submitted to the Department does not include the basement.

The first floor, floor plan that was submitted to the Department does not include the measurements of each room.

R 400.14103 Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.

(5) An applicant or licensee shall give written notice to the department of any changes in information that was previously submitted in or with an application for a license, including any changes in the household and in personnel-related information, within 5 business days after the change occurs.

The licensee failed to inform the Department of the following changes to the household:

The room that has the second approved means of egress, which includes the second wheelchair ramp has been converted into a resident bedroom.

Another exterior door was added to the home.

R 400.14204

Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.
- (b) First aid.
- (c) Cardiopulmonary resuscitation.
- (d) Personal care, supervision, and protection.
- (e) Resident rights.
- (f) Safety and fire prevention.
- (g) Prevention and containment of communicable diseases.

Direct care staff (DCS) was not competent before performing assigned task.

DCS Keanna Allen's date of hire is 06/07/2023. Ms. Allen's date of training is 06/28/2023. The licensee designee/administrator Michele Ray stated she thought Ms. Allen could work with a lead staff without training for 30 days.

Note, it is okay if this individual is not included in the staff to client ratio and this individual cannot work alone. Provide documentation to show she was not included in the staffing ratio.

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.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

DCS did not obtain a physician statement within 30 days of employment.

DCS Jade Alby's date of hire is 02/20/2023. Ms. Alby obtained a physician statement on 04/20/2023.

DCS Keanna Allen's date of hire is 06/07/2023. Ms. Allen obtained a physician statement on 05/26/2023.

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.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

DCS Jade Alby and Keanna Allen did not obtain a current TB test prior to employment.

DCS Jade Alby's date of hire is 02/20/2023. Ms. Alby's TB test date is 04/26/2023.

R 400.14403

Maintenance of the premises

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of the occupants.

The Genesee 2 Adult Foster Care (AFC) home accommodates residents who regularly require wheelchairs. The home is currently not arranged to provide adequately for the health, safety, and well-being of the occupants. The licensee converted into a resident bedroom, the room which contains the second means of egress and includes a ramp. The licensee added another exterior door to the home. However, this door is not separate and independent; it also leads to the first means of egress/ramp.

R400.14408

Bedroom 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, non-locking-against.

Bedroom # 4 door has locking-against-egress hardware.

The Genesee 2 AFC Home is a duplex that was converted into a single-family dwelling. There are two basements that have two separate and independent stairwells.

R 400. 14502 Interior finishes and materials generally.

(2) Interior finish materials shall be securely attached to, or furred out no more than 1 inch from, walls or ceilings that are dry wall, plaster, masonry, or natural solid wood that is not less than 3 /4 of an inch thick.

The ceiling tiles in the basements are attached to plywood.

R 400. 14503 Interior finishes and materials generally.

(1) Interior finish materials shall be at least class C materials throughout the adult foster care home.

There is a chair railing with paneling in the west basement and both kitchens. The AFC Licensing File does not contain documentation that the chair railing and paneling is Class C or better.

R 400. 14503 Interior finishes and materials generally.

(3) The attaching of interior finish materials, other than dry wall, plaster, or natural solid wood that is not less than 3/4 of an inch thick, directly to wall studs or to floor or ceiling joists is prohibited. Suspended ceilings constructed of a class A material that is 1/4 inch or greater in thickness and installed in accordance with manufacturers specifications shall be permitted.

There is a suspended ceiling in the basements.

The AFC Licensing File does not contain documentation that the suspended ceiling tiles are Class A.

R 400. 14507

Means of egress generally.

(2) A means of egress shall be arranged and maintained to provide free and unobstructed egress from all parts of the group home.

The east rear exit door could not be opened. This is the only door that allows egress from the basement.

R 400.14510

Heat equipment generally.

(3) Where conditions indicate a need for inspection, heat-producing equipment shall be inspected by a qualified 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.

A furnace inspection is needed on each furnace.

R 400.14511

Flame-producing equipment; enclosures.

(1) If the heating plant is located in the basement of a small group home, standard building material may be used for the floor separation. Floor separation shall also include at least 1 3/4-inch solid core wood door or equivalent to create a floor separation between the basement and the first floor.

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware.

(3) A permanent outside vent that cannot be closed shall be incorporated in the design of heating plant rooms so that adequate air for proper combustion is assured.

According to the Original Licensing Study Report, floor separation was achieved by installing a 1 3/4-inch solid core wood door or its equivalent to create a floor separation between each basement and the first floor. However, if the furnaces are in enclosures the enclosure must comply with the enclosure rules.

The heat plant in each basement is in an enclosure.
The west basement consists of 4 rooms and the enclosure.

The enclosures are not 1-hour-fire rated and the doors are not made of 1 3/4-inch solid core wood or its equivalent.
Furthermore, the doors are not equipped with an automatic self-closing device.

There are openings around the ceiling of the west enclosure.
Note, the west enclosure has two doors.

The enclosures do not have a permanent outside vent that cannot be closed so that adequate air for proper combustion is assured.

The east basement contains the laundry room which is also in an enclosure. The home has a gas clothes dryer. A gas dryer is flame-producing equipment. The dryer enclosure is not 1-hour-fire rated and the door is not made of 1 3/4-inch solid core wood or its equivalent. Furthermore, the door is not equipped with an automatic self-closing device.

Note, clothes dryers must be properly vented to the outside with metal (not aluminum or vinyl) duct work.

IV. RECOMMENDATION

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



Edith Richardson
Licensing Consultant

11/08/2023

Date