

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

April 15, 2024

Antonio Ball 16131 Linwood Detroit, MI 48221

RE: License #: AS820083566

Brianna's Home 16131 Linwood Detroit, MI 48221

Dear Mr. Ball:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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,

LaKeitha Stevens, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100

Stevens)

3026 W. Grand Blvd Detroit, MI 48202 (313) 949-3055

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

I. IDENTIFYING INFORMATION

License #: AS820083566

Licensee Name: Antonio Ball

Licensee Address: 14430 Artesian

Detroit, MI 48223

Licensee Telephone #: (313) 657-4282

Licensee/Licensee Designee: N/A

Administrator:

Name of Facility: Brianna's Home

Facility Address: 16131 Linwood

Detroit, MI 48221

Facility Telephone #: (313) 345-3199

Original Issuance Date: 07/02/1999

Capacity: 5

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	04/10/2024
Date of Bureau of Fire Services Inspection if applicable:	
Date of Health Authority Inspection if applicable:	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed N/A Role:	1 3
 Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. A worksheet inspection was completed. 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. A full worksheet inspection was completed. Fire drills reviewed? Yes ⋈ No ⋈ If no, explain. 	
Fire safety equipment and practices observe	d? Yes ⊠ No □ If no, explain.
 E-scores reviewed? (Special Certification Or If no, explain. Water temperatures checked? Yes ⊠ No □ 	<i>,,</i> – – –
 Incident report follow-up? Yes ☐ No ☒ If no, explain. N/A Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s: LSR Dating 04/19/2022, Rules; 204(3), 205(5), 401(2) 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.

(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 J.B.'s written assessment for 2023 could not be located and was in the file.

R 400.14301

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

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

At the time of inspection resident J.B.'s resident care agreement for 2023 could not be located and was in the file.

R 400.14401 Environmental health.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

At the time of inspection, the water temperature was 142 degrees.

{REPEAT VIOLATION, SEE LSR DATING 04/19/2022}

A corrective action plan was requested and approved on 04/10/2024. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

o4/15/2024

LaKeitha Stevens Licensing Consultant Date