

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

May 10, 2024

Jennifer Bhaskaran Alternative Services Inc. Suite 10 32625 W Seven Mile Rd Livonia, MI 48152

RE: License #: AS250249113

Beecher Road Home G 4225 Beecher Road Flint, MI 48532

Dear Jennifer Bhaskaran:

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. To verify your implementation and compliance with this corrective action plan: *(choose one or more)*

- You are to submit documentation of compliance.
- An on-site inspection will be conducted.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license and special certification are 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 (517) 643-7960.

Sincerely,

Christopher Holvey, Licensing Consultant Bureau of Community and Health Systems

Christolin A. Holvey

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Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #: AS250249113

Licensee Name: Alternative Services Inc.

Licensee Address: Suite 10

32625 W Seven Mile Rd

Livonia, MI 48152

Licensee Telephone #: (248) 471-4880

Licensee/Licensee Designee: Jennifer Bhaskaran, Designee

Administrator: Will Paige

Name of Facility: Beecher Road Home

Facility Address: G 4225 Beecher Road

Flint, MI 48532

Facility Telephone #: (239) 989-2919

Original Issuance Date: 09/12/2002

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

Special Certification: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	05/08/2024	
Date	e of Bureau of Fire Services Inspection if applicable:	N/A	
Date	e of Health Authority Inspection if applicable:	05/08/2024	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role:	2 3	
•	Medication pass / simulated pass observed? Yes ⊠	No ☐ If no, explain.	
•	Medication(s) and medication record(s) reviewed? Y	es 🗵 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. Home was viewed to have an adequate supply of food. 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 \boxtimes No \square If no,		
•	Incident report follow-up? Yes ⊠ No ☐ If no, expla	ain.	
•	Corrective action plan compliance verified? Yes ☐ N/A ☒ Number of excluded employees followed-up?	CAP date/s and rule/s: 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 400.14401 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.

The home's water temperature was found to be above 120 degrees maximum allowed.

R 400.14401 Environmental health.

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

The home had several bedroom/bathroom windows that had screens that were in poor condition and/or not secured to windows properly.

R 400.14507 Means of egress generally.

(5) A door that forms a part of a required means of egress shall not be less than 30 inches wide and shall be equipped with positive latching, non-locking-against-egress hardware.

Multiple entrance/exits of the home that form a part of a required means of egress had dead bolt locks on them, which are not non-locking-against-egress hardware.

A corrective action plan was requested and approved on 05/08/2024. 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 and special certification is recommended.

5/10/2024

Christopher Holvey Date Licensing Consultant

Christolin A. Holvey