

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

June 6, 2024

Michael Mwathi Canfield Care Manor 1606 South Huron #972804 Ypsilanti, MI 48197

RE: License #: AS630394866

Canfield Care Manor 23065 Canfield Ave Farmington Hills, MI 48336

Dear Michael Mwathi:

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 (248) 975-5053.

Sincerely,

Frodet Dawisha, Licensing Consultant Bureau of Community and Health Systems

Irrodet Navisha

3026 W. Grand Blvd Cadillac Place, Ste 9-100 Detroit, MI 48202

(248) 303-6348

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

I. IDENTIFYING INFORMATION

License #:	AS630394866
Licensee Name:	Canfield Care Manor
Licensee Address:	23065 Canfield Ave
	Farmington Hills, MI 48336
	(0.10) 170 1000
Licensee Telephone #:	(248) 470-4862
Administrator/Licensee Designee:	Michael Mwathi
Administrator/Licensee Designee.	Michael Mwathi
Name of Facility:	Canfield Care Manor
Facility Address:	23065 Canfield Ave
	Farmington Hills, MI 48336
Facility Telephone #:	(248) 470-4862
,	
Original Issuance Date:	05/17/2019
Capacity:	6
Due conserve Transport	
Program Type:	ALZHEIMERS
	AGED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	06/06/2	024
Date	e of Bureau of Fire Services Inspection if appl	icable:	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 1 Role: licensee	designe	1 3 ee
•	Medication pass / simulated pass observed?	Yes 🛚	No ☐ If no, explain.
•	Medication(s) and medication record(s) revie	wed? Y	es 🗵 No 🗌 If no, explain.
•	Resident funds and associated documents refer Yes No I fno, explain. Meal preparation / service observed? Yes Did not occur during inspection Fire drills reviewed? Yes No I fno, explain.]No ⊠	
•	Fire safety equipment and practices observe	d? Yes	⊠ No If no, explain.
•	E-scores reviewed? (Special Certification On If no, explain. Water temperatures checked? Yes ⊠ No □		
•	Incident report follow-up? Yes ⊠ No ☐ If i	no, expla	ain.
•	Corrective action plan compliance verified? 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:

MCL 400.734b

Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; 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.

During the on-site inspection on 06/06/2024, direct care staff Stephanie Weatherspoon did not have her eligibility letter for her fingerprints in her employee file.

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.

During the on-site inspection on 06/06/2024, licensee designee Michael Mwathi did not provide notice to the department within 5 business days after he admitted Resident A into this home. The population served according to the program statement is aged and Alzheimer's; however, Resident A is not aged and has a diagnosis of mental illness, which is not one of the populations served by this home.

R 400.14205 Health of a licensee, direct care staff, administrator, oth 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 physician's 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.

During the on-site inspection on 06/06/2024, direct care staff Stephanie Weatherspoon did not have a statement that is signed by a licensed physician attesting to the physician's knowledge of the physical health within 30 days of her hire date of 07/18/2018.

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.
	(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

During the on-site inspection on 06/06/2024, direct care staff Rhonda Rowser and direct care staff Stephanie Weatherspoon did not have their annual health reviews completed for 2023.

R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

During the on-site inspection on 06/06/2024, Resident A did not have their health care appraisal completed within 90 days of admission. Resident A was admitted into the home on 11/17/2023, but his health care appraisal was completed on 04/17/2024.

R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(11) A licensee shall contact a resident's physician for instructions as to the care of the resident if the resident requires the care of a physician while living in the home. A licensee shall record, in the resident's record, any instructions for the care of the resident.

During the on-site inspection on 06/06/2024, Resident A did not have physician instructions and contacts in his resident file.

R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written

assessment of the resident and determined that the resident is
suitable pursuant to all of the following provisions:
(c) The resident appears to be compatible with other
residents and members of the household.

During the on-site inspection on 06/06/2024, I reviewed Resident A's file and Resident A does not appear to be compatible with the other residents at this home. This home's population is aged and Alzheimer's. Resident A is 37 years old with a diagnosis of mental illness.

R 400.14312	Resident medications.	
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.	

During the on-site inspection on 06/06/2024, I reviewed Resident A's medications and medication logs and found the following errors:

- Ibuprofen 200MG: take two tablets by mouth every six hours as needed for headache was given at 3PM on 03/08/2024, at 8:30AM on 01/13/2024, at 12PM on 01/18/2024, but staff did not record the reason for this as needed medication.
- Tramadol 50MG: take one tablet by mouth every six hours as needed for pain was given 23 times in 12/2023, 19 times in 11/2023, but staff did not record the reason for this as needed medication.

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.	

During the on-site inspection on 06/06/2024, I observed the dryer's metal vent hose had separated from the rear of the dryer.

IV. RECOMMENDATION

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

Irodet Navisha 06/06/2024

Frodet Dawisha Date

Licensing Consultant