

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

August 5, 2024

Wendy Briggs
Angelic Homes For The Elderly L.L.C.
25014 Trombley St
Harrison Twp, MI 48045

RE: License #: AS500417358

Angelic Homes 25014 Trombley St Harrison Twp, MI 48045

Dear Ms. Briggs:

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.

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 within 15 days.

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,

Kristine Cilluffo, Licensing Consultant

Bureau of Community and Health Systems

Cadillac Place

3026 West Grand Blvd Ste 9-100

Kristine Cillyfo

Detroit, MI 48202 (248) 285-1703

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

## I. IDENTIFYING INFORMATION

License #:	AS500417358
	7.0000111000
Licensee Name:	Angelic Homes For The Elderly L.L.C.
Licensee Address:	25014 Trombley St Harrison Twp, MI 48045
Licensee Telephone #:	(586) 252-0288
Licensee/Licensee Designee:	Wendy Briggs
Administrator:	Wendy Briggs
Name of Facility:	Angelic Homes
Facility Address:	25014 Trombley St Harrison Twp, MI 48045
Facility Telephone #:	(586) 252-0288
Original Issuance Date:	01/18/2024
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED ALZHEIMERS AGED

## **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):	07/16/2024		
Date of Bureau of Fire Services Inspection if app	olicable: N/A		
Date of Health Authority Inspection if applicable:	N/A		
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed  1 Role: License	1 2 ee Designee		
<ul> <li>Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. Reviewed medications with licensee designee.</li> <li>Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain</li> </ul>			
<ul> <li>Resident funds and associated documents reviewed for at least one resident? Yes ⋈ No ☐ If no, explain.</li> <li>Meal preparation / service observed? Yes ☐ No ⋈ If no, explain. Inspection did not occur during a meal preparation.</li> <li>Fire drills reviewed? Yes ⋈ No ☐ If no, explain.</li> </ul>			
Fire safety equipment and practices observe	ed? Yes ⊠ No □ If no, explain.		
<ul> <li>E-scores reviewed? (Special Certification Only) Yes ☐ No ☐ N/A ☐ If no, explain.</li> <li>Water temperatures checked? Yes ☐ No ☐ If no, explain.</li> </ul>			
Incident report follow-up? Yes ⊠ No ☐ If no, explain.			
<ul> <li>Corrective action plan compliance verified?         N/A ☒</li> <li>Number of excluded employees followed-up</li> </ul>	<del>_</del>		
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:

	(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
R 400.14204	Direct care staff; qualifications and training.
Staff, Dakota Kleiner, did not have a workforce background check completed during the time of inspection. Mr. Kleiner had documentation in his file that he was incorrectly registered for Livescan fingerprinting as a licensee designee. Licensee provided a workforce background check for Mr. Kleiner on 07/25/2024.	
	(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and(11), the department shall issue or renew a license if satisfied as to all of the following:  (e) The good moral character of the licensee or licensee designee, owner, partner, director, and person responsible for the daily operation of the facility. The applicant is responsible for assessing the good moral character of the employees of the facility. The person responsible for the daily operation of the facility shall be not less than 18 years of age.
MCL 400.713	License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.

performing assigned tasks, which shall include being competent in all of the following areas:  (a) Reporting requirements.  (d) Personal care, supervision, and protection.  (e) Resident rights.  Staff, Dakota Kleiner, did not have verification of training for reporting requirements,		
personal care, supervision, and protection and resident rights.		
R 400.14207	Required personnel policies.	
	(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record.	
Licensee Designee, Wendy Briggs, stated that her nephew, Dakota Kleiner, is assisting her with resident care and is unpaid. Mr. Kleiner signed a job description for a Certified Nursing Assistant (CNA) dated 03/29/2024. Mr. Kleiner stated during the onsite inspection that he is not a CNA. Ms. Briggs provided copy of updated job description for Mr. Kleiner on 07/24/2024.		
R 400.14208	Direct care staff and employee records.	
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:  (f) Verification of reference checks.	
Staff, Dakota Kleiner, did not have verification of reference checks.		
R 400.14210	Resident register.	
	A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:  (a) Date of admission.  (b) Date of discharge.  (c) Place and address to which the resident moved, if known.	

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.
Designee, Wend	Resident B did not have health care appraisals completed. Licensee ly Briggs, completed health care appraisal form for Resident A, a medical provider.
R 400.14312	Resident medications.
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or
	applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.
#2. Also, I obser	applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if
#2. Also, I obser	applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.  e inspection, I observed prescription creams on counter in Bathroom ved that licensee had plastic cup of pills that were not being taken

- (b) Complete an individual medication log that contains all of the following information:
  - (i) The medication.
  - (ii) The dosage.
  - (iii) Label instructions for use.
  - (iv) Time to be administered.
- (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.
- (vi) A resident's refusal to accept prescribed medication or procedures.
- (e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.

Resident A's medication log did not have correct medication, dosage and instructions. Resident A's medication log listed Divalproex Sod Dr 500 mg- Take 3 tablets by mouth twice daily. The word liquid was written under instructions. Licensee indicated that Resident A is now taking liquid Valproic Acid 250 mg, four times a day, in place of Divalproex tablets. A copy of order discontinuing Divalproex was provided on 07/24/2024.

Resident B's medication log was missing staff initials from 07/01/2024-07/12/2024. Licensee indicated that Resident B had been hospitalized and was given medication packet upon being discharged from hospital, however, these medications were not documented on log.

Resident B's medication log listed Gabapentin 200 mg capsules, take two capsules by mouth three times a day. Licensee indicated that doctor has given verbal instructions to only take medication two times a day. Medication log should be updated to list correct times.

Resident B's medication log listed Albuterol HFA, inhale two pulls three times daily. Log had handwritten note stating only taking as needed. No staff initials were listed on log for Albuterol. Updated order should be obtained if medication is as needed.

R 400.14312	Resident medications.
	(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

Licensee indicated that Resident A is no longer taking Divalproex Sod tablets. Medications no longer required should be properly disposed of after consultation with physician.

During onsite inspection, I observed plastic cup of pills. Licensee indicated that Resident B had dose changes for Gabapentin and Hydrocodone and extra pills were put in cup. She also indicated that there was a pill in cup that Resident B refused. Medication should be kept in their pharmacy supplied containers or disposed of after consultation with a physician.

R 400.14313	Resident nutrition.	
	(3) Special diets shall be prescribed only by a physician. A resident who has been prescribed a special diet shall be provided such a diet.	
Resident A's health care appraisal indicated that he had a keto diet, however, appraisal was not completed by a physician.		
R 400.14315	Handling of resident funds and valuables.	
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.	
Resident A's Funds	s Part 1 form was not signed by licensee designee. Resident B	

Resident A's Funds Part 1 form was not signed by licensee designee. Resident B had Funds form for cash, however, licensee indicated that she does not hold cash for resident.

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. A resident record shall include, at a minimum, all of the following information:  (a) Identifying information, including, at a minimum, all of the following:
	(i) Name. (ii) Social security number, date of birth, case
	number, and marital status.  (iii) Former address.
	(iv) Name, address, and telephone number of the next of kin or the designated representative.

(v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home.
(vi) Name, address, and telephone number of the preferred physician and hospital.  (vii) Medical insurance.  (viii) Funeral provisions and preferences.  (ix) Resident's religious preference information.  (b) Date of admission.

Resident A did not have a completed resident information record. Resident B's resident information record was missing religious preference.

R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.
. •	ep time drills were not completed for the 1 <sup>st</sup> quarter of 2024. A ep time drill were not completed for the 2 <sup>nd</sup> quarter of 2024.

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.
	te inspection, I measured the water temperature with a digital he water temperature in Bathroom #2 only measured 96.6 degrees

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

Kristine Cilluffo	08/02/2024
Kristine Cilluffo	Date
Licensing Consultant	

Approved by:

Denise Y. Nunn Date

Area Manager