

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

February 10, 2025

Thomas Szafran Advanced Care AFC Home LLC 50155 Uptown Ave. Canton, MI 48187

> RE: License #: AS630386128 Investigation #: 2025A0991008

> > Advanced Care AFC Home LLC

Dear Thomas Szafran:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

Kristen Donnay, Licensing Consultant Bureau of Community and Health Systems

Cadillac Place 3026 W. Grand Blvd. Ste 9-100 Detroit, MI 48202 (248) 296-2783

Kisten Domay

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS630386128
Investigation #:	2025A0991008
Complaint Dessint Date:	04/00/2005
Complaint Receipt Date:	01/02/2025
Investigation Initiation Date:	01/03/2025
mvestigation initiation bate.	01700/2020
Report Due Date:	03/03/2025
•	
Licensee Name:	Advanced Care AFC Home LLC
Licensee Address:	50155 Uptown Ave.
	Canton, MI 48187
Licensee Telephone #:	(313) 549-2708
Licence releptions #1	(010) 010 2100
Licensee Designee:	Thomas Szafran
Name of Facility:	Advanced Care AFC Home LLC
Facility Address:	8696 Crosby Lake Rd Clarkston, MI 48346
	Clarkston, Wii 40340
Facility Telephone #:	(313) 549-2708
Talemay recoprision	(6.6) 6.6 21.66
Original Issuance Date:	01/18/2018
License Status:	REGULAR
Effective Date:	07/49/2024
Effective Date:	07/18/2024
Expiration Date:	07/17/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED
	AGED
	ALZHEIMERS

II. ALLEGATION(S)

Violation Established?

Residents are being denied necessary medical treatment.	No
Meals lack nutritional value.	No
The owner has failed to maintain the property and the cleanliness of the home falls short of standards for hospice care.	Yes

III. METHODOLOGY

01/02/2025	Special Investigation Intake 2025A0991008
01/03/2025	Special Investigation Initiated - Telephone Referred to Adult Protective Services (APS) Centralized Intake
01/03/2025	APS Referral Referred to APS Centralized Intake - denied for investigation
01/08/2025	Inspection Completed On-site Unannounced onsite inspection - interviewed licensee designee, residents, and staff
01/08/2025	Contact - Document Received Received and reviewed menus, daily shift duties
01/09/2025	Contact - Telephone call made Interviewed Resident A's relative
01/09/2025	Contact - Telephone call made Interviewed Resident A's relative
01/09/2025	Contact - Telephone call made Interviewed Resident B's relative
01/09/2025	Contact - Telephone call made Interviewed Resident C's relative
01/09/2025	Contact - Telephone call made Interviewed nurse practitioner, Tamber Townsend

02/10/2025	Exit Conference
	Via telephone with licensee designee, Tom Szafran

ALLEGATION:

Residents are being denied necessary medical treatment.

INVESTIGATION:

On 01/02/25, I received an anonymous complaint alleging that the residents at Advanced Care AFC Home are denied medical care. I initiated my investigation on 01/03/25 by making a referral to Adult Protective Services (APS) Centralized Intake. The complaint was not assigned for investigation by APS.

On 01/08/25, I conducted an unannounced onsite inspection at Advanced Care AFC Home. I interviewed the licensee designee/owner, Tom Szafran. Mr. Szafran stated that the home has a nurse practitioner, Tamber Townsend, who comes to see the residents for their medical needs. She comes out at least once a month, or more often if necessary. Resident B receives medical care through Hospice of Michigan. Mr. Szafran was not aware of any of the residents being denied medical care. He stated that Resident D's hand was swollen recently, so they called Tamber Townsend. She came out and did a doppler and x-ray, which was clear. Resident A also had pneumonia recently and was coughing a lot. Resident A's family does not like her to be sent to the hospital, as she usually declines after being hospitalized, so Tamber Townsend sent out a chest x-ray and prescribed her antibiotics. Mr. Szafran stated that Resident E's medical appointments are scheduled through the VA (Veterans Affairs). Mr. Szafran has been setting up Resident E's appointments and transports him to the appointments at the VA in Detroit.

On 01/08/25, I interviewed direct care worker, Brittani Benjamin. Ms. Benjamin stated that she was not aware of any residents not receiving medical care. She stated that Tamber Townsend comes out if anyone is having a medical issue. She responds quickly any time there is a medical problem. Resident D's hand was recently swollen, so Tamber Townsend ordered x-rays. It was determined that the swelling was from arthritis, which was activated by the cold. He was prescribed Tylenol, and the swelling went down.

On 01/08/25, I interviewed direct care worker, Genesis (Gen) Hartman. Ms. Hartman stated that she was not aware of any residents missing medical appointments or not receiving needed medical care. She stated that the nurse practitioner, Tamber Townsend, comes to the home once a month or as needed. They also have a foot doctor who comes out once a month. Resident B has a hospice nurse who comes to the

home once a week, a shower aide who comes twice a week, and a doctor who comes monthly. Ms. Hartman stated that she was not aware of any complaints from family members about medical needs not being met. She did not feel that anyone's medical needs were being neglected.

On 01/08/25, I attempted to interview Resident A. Resident A had somewhat limited verbal/cognitive abilities. She stated that she has not been to the doctor recently. She stated that the doctor comes to the house.

On 01/08/25, I interviewed Resident C. Resident C stated that all of his medical needs are being met at the home. He stated that the doctor comes out to the house and fixes him. He is good and does not have any health issues.

On 01/08/25, I interviewed Resident D. Resident D stated that his medications are always in the home. He sees Tamber Townsend once a month. He felt all of his medical needs were being met in the home.

On 01/08/25, I interviewed Resident E. Resident E stated that he has a primary care physician through the VA and he goes to the VA for all of his medical appointments. He stated that the licensee designee, Tom, drives him to his appointments. He stated that he had some concerns about the care that he was receiving through the VA, as he did not feel they were addressing his medical concerns.

On 01/09/25, Resident A's daughters, Relative 1A and Relative 2A, were interviewed via telephone. Relative 1A stated that Resident A is usually taken to the doctor's office by Relative 1A or her siblings. However, there are times when Resident A is ill, and the nurse practitioner, Tamber Townsend is contacted. The nurse practitioner responds quickly and does everything she can to prevent Resident A from going to the hospital. Relative 1A stated that when Resident A is hospitalized, she always seems to decline so she is happy the nurse is called and can provide care when needed. Relative 1A stated, "I'm overall pretty satisfied with the care my mom gets at this home." Relative 2A also stated that she or her siblings take Resident A to the doctor, but the nurse practitioner is sometimes contacted when needed. Resident A's medical needs are always met by either Resident A's doctor or the nurse practitioner.

On 01/09/25, Resident B's daughter, Relative 1B, was interviewed via telephone. She stated that Resident B is on hospice. Hospice provides all medical care for Resident B. A registered nurse, an aide, and a social worker visit Resident B at the home once or twice weekly. Hospice has not reported any concerns to Relative 1B regarding the medical care of Resident B.

On 01/09/25, Resident C's daughter, Relative 1C, was interviewed via telephone. Relative 1C stated that Resident C is seen by the nurse practitioner monthly. The staff take very good care of Resident C. About two months ago, Resident C had issues with

his foot. The podiatrist came out to the home and examined Resident C. Resident C was prescribed medication for his foot and is doing fine now. All of Resident C's medical needs are being met at the home. Relative 1C is very happy with the care he is receiving and has no concerns.

On 01/09/25, the nurse practitioner, Tamber Townsend, was interviewed via telephone. She stated that she receives calls from staff about two to three times a month regarding the residents. If a resident stubs their toe, she is contacted. All the medical needs of the residents are being met and she had no concerns to report.

APPLICABLE RULE	
R 400.14310	Resident health care.
	(1) A licensee, with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician or other health care professional with regard to such items as any of the following: (d) Other resident health care needs that can be provided in the home. The refusal to follow the instructions and recommendations shall be recorded in the resident's record.
ANALYSIS:	Based on the information gathered through my investigation, there is insufficient evidence to conclude that the residents are being denied medical treatment. The home has a nurse practitioner, Tamber Townsend, who comes to the home at least monthly to visit the residents, except for Resident B who receives medical care through hospice, and Resident E who receives medical care through the VA. None of the staff, residents, or relatives who were interviewed had any concerns about residents not receiving medical care as required.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Meals lack nutritional value.

INVESTIGATION:

The complaint also alleged that the meals lack nutritional value. On 01/08/25, I interviewed the licensee designee, Tom Szafran. Mr. Szafran stated that he does not feel the meals lack nutrition. He stated that all of the residents are on a regular diet and they follow a menu in the home. They cook homemade meals and desserts for the residents. They have fresh fruit available, including watermelon, blueberries, and bananas. They serve fresh or canned vegetables. He stated that one family member of

a resident had some complaints about the food, but nobody else has complained. The visiting physician has not expressed any concerns about the residents' diets. None of the residents are losing weight.

On 01/08/25, I interviewed direct care worker, Brittani Benjamin. Ms. Benjamin stated that the residents are served nutritious food. She stated that they make everything homemade, and they do not use a lot of frozen, boxed, or canned foods. She stated that she does a lot of the cooking and baking in the home. The residents get fresh fruit and vegetables. She stated that they follow the menus in the home, but they occasionally go out and get pizza. She was not aware of anyone complaining about the food. She stated that Resident B's daughter sometimes brings in cultural foods Resident B as substitutes.

On 01/08/25, I interviewed direct care worker, Genesis (Gen) Hartman. Ms. Hartman stated that the residents receive nutritious meals. They get fresh fruit, including bananas, oranges, strawberries, and watermelon. They have vegetables including carrots, cucumbers, tomatoes, and potatoes. She stated that they also have canned fruits and vegetables. They follow the menu in the home. She stated that they had eggs, sausage, and toast for breakfast. They had grilled cheese and tomato soup for lunch, and yesterday they had rigatoni with ground beef and vegetables for dinner. Ms. Hartman stated that nobody ever complains about the food in the house and the residents seem happy with their meals. Resident E tells her everyday that he loves her cooking.

On 01/08/25, I attempted to interview Resident A. Resident A had somewhat limited verbal/cognitive abilities. She stated that the food is okay. She stated that they get fruits and vegetables with their meals.

On 01/08/25, I interviewed Resident C. Resident C stated that the food is amazing. He stated that they get fruit, vegetables, and all kinds of things. He could not believe that anyone would complain about the food in the home.

On 01/08/25, I interviewed Resident D. Resident D stated that the food in the home is pretty good. They usually get a big breakfast like eggs with cheese, sausage, and toast. He stated that they eat chicken tenders and fries for lunch. He stated that they usually get canned fruits and vegetables. He would like it if there was more fresh fruit. He stated that the licensee designee, Tom, does the shopping and he does the best he can with what is available in the store. He stated that Tom does not buy too much soda. They usually have juice, but he would like to have Coke more often, as he likes the carbonation.

On 01/08/25, I interviewed Resident E. Resident E stated that the menu at the home is not bad. There was one staff who was not following the menu. She would give them two

slices of bread and some potato salad with water. He stated that he posted it on Facebook, and the owner, Tom, got wind of it and fired that staff person. He stated that the food has improved since that time, but they do serve a lot of processed food. He stated that he does not have any issues with the staff who are working in the home now.

During the onsite inspection, I observed an adequate supply of nutritious food in the home. The home had fresh and canned fruits and vegetables. I reviewed the menus of the home, which showed a variety of meals being served. The residents were having a taco pasta meal with Spanish rice and mixed vegetables for dinner on the date of my onsite inspection. The meal was prepared and in the refrigerator.

On 01/09/25, Resident A's daughters, Relative 1A and Relative 2A, were interviewed via telephone. Relative 1A stated that on 01/06/25, after Resident A returned to the home from getting her blood drawn, Genesis had pizza and pasta ready for Resident A to eat. Relative 1A had no concerns about the food and reported that the food appears to be nutritious. Resident A has never complained about the food and gets plenty to eat. Relative 2A stated that when she visits, Resident A is usually eating breakfast or lunch, and the meals are nutritious. There have not been any complaints by Resident A regarding the food.

On, 01/09/25, Resident B's daughter, Relative 1B, was interviewed via telephone. She stated that she has some concerns about the food served at the home. Resident B has gained weight since moving into the home. Relative 1B stated that she has spoken to staff about not feeding Resident B processed foods, but the menu still includes hot dogs, hamburgers, and pasta. Resident B is fed too many carbohydrate foods instead of fruits and vegetables and meats. Relative 1B stated that she felt the meals were not up to par due to new staff in the home.

On 01/09/25, Resident C's daughter, Relative 1C, was interviewed via telephone. Relative 1C had no concerns about the food Resident C is eating at the home. She stated that Resident C has not complained to her about the food.

On 01/09/25, the nurse practitioner, Tamber Townsend, was interviewed via telephone. She stated that she typically visits the home during the morning, and she has observed residents eating oatmeal, eggs, and cottage cheese for breakfast. The residents she provides care for have not lost weight and there are no concerns about the breakfast not being nutritious. She stated that she cannot speak to lunch or dinner.

APPLICABLE RULE	
R 400.14313 Resident nutrition.	
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and

	temperature. Not more than 14 hours shall elapse between the evening and morning meal.
ANALYSIS:	Based on the information gathered through my investigation, there is insufficient information to conclude that the facility is not serving three nutritious meals daily. Resident E and Resident B's relative expressed some concern regarding processed foods being served; however, none of the other residents, relatives, or staff had concerns about the food in the home. I observed an adequate supply of food in the home, which included fresh, canned, and frozen fruits and vegetables. The menu for the home reflected a variety of well-balanced meals being served.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

The owner has failed to maintain the property and the cleanliness of the home falls short of standards for hospice care.

INVESTIGATION:

The complaint also alleged that the homeowner has failed to maintain the property and the cleanliness falls short of the standards for hospice care. On 01/08/25, I conducted an unannounced onsite inspection at Advanced Care AFC Home. I interviewed the owner/licensee designee, Tom Szafran. Mr. Szafran stated that he tries to address all maintenance issues that come up in the home. There is currently an electrical outlet that blew out in the front wall in the living room, so nothing can be plugged in. Mr. Szafran stated that this happened about two months ago. He had someone come out to look at it a couple of weeks ago and someone came out today, but it is not yet repaired. He stated that he had someone he knew come out, so he did not receive an invoice or any documentation of their visit. Mr. Szafran stated that the front door also swells when it is cold and is sometimes hard to close. Mr. Szafran stated that the house is always clean. They have a cleaning schedule with household duties divided by shift. The midnight staff cleans the bathrooms. The bedding is washed at least once a week. None of the hospice staff who visit the home have complained about the cleanliness.

On 01/08/25, I interviewed direct care worker, Brittani Benjamin. Ms. Benjamin stated that she has been working in the home since March 2024. She covers all shifts at the home. Ms. Benjamin stated that the home is well-maintained. She stated that someone comes out "in a heartbeat" if anything is broken. She was not aware of any safety concerns related to maintenance in the home. Ms. Benjamin stated that if something is broken, staff tell the licensee designee, Tom, and he has a maintenance person come out to fix it. She was not aware of anyone getting injured due to maintenance issues.

Ms. Benjamin stated that the home is kept clean. All of the staff are assigned chores on their shifts. The night shift does a deep cleaning every night, especially in the common areas of the home, such as the living room, dining room, and bathroom. She stated that she never came in for her shift and noticed that the house was dirty. None of the visitors at the home have complained about the home's maintenance or cleanliness.

On 01/08/25, I interviewed direct care worker, Genesis (Gen) Hartman. Ms. Hartman stated that she has worked in the home for approximately two years. She typically works the morning shift from 6:00am-2:00pm. Ms. Hartman stated that she was not aware of any maintenance issues in the home. She stated that any problems get fixed right away. The longest it typically takes to fix something is one week. She stated that staff tell the licensee designee, Tom, and he contacts maintenance. She stated that nothing is currently broken in the home. Ms. Hartman stated that the home is always kept clean. She stated that they sweep and mop four times a day. The staff have a chore sheet, which they follow to make sure all of the rooms are getting deep cleaned at least once a week. She stated that if staff see something that is dirty, they clean it. If staff are busy and something does not get done, they will let the next shift know and it will get done. She stated that this does not happen often, and nine times out of ten staff complete the required tasks during their shifts. Ms. Hartman stated that visitors have never complained about the maintenance or cleanliness of the home.

On 01/08/25, I attempted to interview Resident A. Resident A had somewhat limited verbal/cognitive abilities. She stated that her room is clean and nothing is broken in the home.

On 01/08/25, I interviewed Resident C. Resident C stated that he loves living in this home. He stated that the house is always clean and they fix anything that is broken.

On 01/08/25, I interviewed Resident D. Resident D stated that he has lived in the home for three years. He stated that he likes living in the home. The house is usually very clean. They have a maintenance man who comes to the home to fix issues. He stated that there is an issue with the front door, as it does not close easily and the storm door does not fit well. They are also working on fixing the outlets in the front wall. The outlets are not working, so they ran an extension cord from his room in order to plug in the television.

On 01/08/25, I interviewed Resident E. Resident E stated that the home is usually clean and he has never had an issue with the cleanliness of the home. He stated that sometimes staff complain about other staff not doing what they are supposed to do, but he felt that was a management issue. Resident E stated that there have been some maintenance issues with the home. He stated that the railing on the stairs to the front porch was rotted and fell down, but it is fixed now. They were power washing the front of the house and blew a circuit, so the lights on the porch no longer work. He stated that

the owner recently put up some solar powered lights to address this issue. He stated that an electrician did come out, but the owner could not afford to fix the issue at the time, so it is still broken.

During the onsite inspection on 01/08/25, I observed the home to be clean. I reviewed a copy of the daily shift duties assigned to staff and noted that each shift is assigned different rooms to clean or residents' bedding to launder. All of the rooms are to be cleaned, swept, dusted, and mopped weekly. During the onsite inspection, I observed the broken outlet along the front wall of the living room. There was an extension cord running from the living room to an outlet in Resident D's room, which was going across Resident D's doorway posing a potential tripping hazard. The licensee designee, Tom Szafran, moved the extension cord during the onsite inspection, so it was not going across the doorway. I observed that the front door was difficult to open and close. Mr. Szafran stated that the door swells during the cold weather. The walkway to the front porch and ramp were cleared of snow during my onsite inspection.

On 01/09/25, Resident A's daughters, Relative 1A and Relative 2A, were interviewed via telephone regarding the allegations. Relative 1A visits Resident A along with her siblings, so Resident A is seen at least weekly by her children. Relative 1A's last visit was on Monday, 01/06/25. She was picking up Resident A to take her to get her blood drawn. Relative 1A reported the ramp to be a concern at the home. At the bottom of the ramp, there are rubber mats and rubber blocks and then about four to five feet past that, Relative 1A struggles to get Resident A to the car because of the snow. Most of the time the ramp is clear, but other times it is not and there is concern that Resident A will fall with her walker at the end of the ramp. Inside the home, Relative 1A observed staff member, Genesis, mopping the floor the day she was at the home. Relative 1A stated that the home is always clean, and she did not have any concerns. Relative 2A stated that she was at the home about two weekends ago. She also complained about the ramp. She stated, "it seems to need repair because water collects at the bottom." She stated that the home is clean inside and there were no major problems to report.

On 01/09/25, Resident B's daughter, Relative 1B, was interviewed via telephone regarding the allegations. Relative 1B state that she was visiting Resident B every other day before it began snowing. Resident B is bedbound, so Relative 1B does not use the ramp to go into the home, but she noted that the ramp is "always covered with snow," when she goes to the home. When Resident B moved into the home in August 2023, Relative 1B had concerns about the cleanliness of the home, but since then the owner has painted and made some renovations.

On 01/09/25, Resident C's daughter, Relative 1C, was interviewed via telephone. She stated that Resident C has been residing at the home for one year. Relative 1C lives an hour away, so she cannot visit as often as she would like. Her last visit at the home was

on Christmas Eve. The home appeared to be clean, and it was decorated nicely for Christmas. Relative 1C went into Resident C's bedroom and saw that the room was clean, the bed was made, and it smelled nice. She did not express any concerns about the cleanliness or maintenance of the home.

On 01/09/25, the nurse practitioner, Tamber Townsend, was interviewed via telephone regarding the allegations. The nurse practitioner stated that she visits the home monthly, but sometimes twice a month if a resident needs medical care. Whenever she is in the home, it is always clean, the snow is shoveled, and there are no concerns. She has observed staff cleaning while she is at the home.

On 02/10/25, I conducted an exit conference via telephone with the licensee designee, Tom Szafran. Mr. Szafran stated that the broken outlets and front door have been repaired. He stated that they make an effort to shovel the snow and salt the ramp/driveway areas, but it has been a bad winter and they have been icing over a lot. He agreed to submit a corrective action plan to address the violations identified in the investigation.

APPLICABLE RULE	
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.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that the home was not maintained to ensure the safety of the residents. During the onsite inspection, I observed that the electrical outlet in the living room was not functioning properly. The front door was difficult to open and close. Relatives of the residents also reported that the ramp and pathway leading to the ramp are often covered in snow or ice, making it difficult to safely navigate a wheelchair in or out of the home.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	,
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

ANALYSIS:	Based on the information gathered through my investigation, there is insufficient information to conclude that the home has inadequate housekeeping standards. During the onsite inspection, I observed the home to be clean and well-kept. The staff are assigned daily housekeeping duties to complete during each shift. None of the staff, residents, or relatives who were interviewed expressed concerns with the housekeeping standards in the home.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Area Manager

Contingent upon the receipt of an acceptable corrective action plan, I recommend no change to the status of the license.

Kisten Domay	
0,	02/10/2025
Kristen Donnay Licensing Consultant	Date
Approved By:	
Denice G. Hum	02/10/2025
Denise Y. Nunn	Date