

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

February 11, 2025

Chinyelu Anwunah Gracious Hands Services, LLC 46908 Wareham Dr. Canton, MI 48187

RE: License #: AS820383000

Grace Gardens 6573 Deering Street Garden City, MI 48135

Dear Chinyelu Anwunah:

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 (313) 456-0380.

Sincerely,

Regina Buchanan, Licensing Consultant Bureau of Community and Health Systems

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

Regina Buchanon

(313) 949-3029

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

I. IDENTIFYING INFORMATION

License #: AS820383000

Licensee Name: Gracious Hands Services, LLC

Licensee Address: 46908 Wareham Dr.

Canton, MI 48187

Licensee Telephone #: (313) 408-3227

Licensee/Licensee Designee: Chinyelu Anwunah

Administrator: Chinyelu Anwunah

Name of Facility: Grace Gardens

Facility Address: 6573 Deering Street

Garden City, MI 48135

Facility Telephone #: (734) 338-9986

Original Issuance Date: 11/29/2017

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODS OF INSPECTION

Date o	of On-site Inspection(s):	02/11/2	025
Date c	of Bureau of Fire Services Inspection if appl	icable:	N/A
Date c	of Health Authority Inspection if applicable:		N/A
No. of	staff interviewed and/or observed residents interviewed and/or observed others interviewed 0 Role: N/A		2 4
• M	ledication pass / simulated pass observed?	Yes 🖂	No 🗌 If no, explain.
• M	ledication(s) and medication record(s) revie	wed? Y	es ⊠ No □ If no, explain.
• M	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \square No \boxtimes If no, explain. Residents had already eaten Fire drills reviewed? Yes \boxtimes No \square If no, explain.		
• Fi	ire safety equipment and practices observe	d? Yes	⊠ No □ If no, explain.
lf	-scores reviewed? (Special Certification On no, explain. /ater temperatures checked? Yes ⊠ No [•	
N	ncident report follow-up? Yes No If i one orrective action plan compliance verified?	•	
• N	N/A umber of excluded employees followed-up?	?	N/A 🖂
• Va	ariances? 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 400.14105 Licensed capacity.

(1) The number of residents cared for in a home and the number of resident beds shall not be more than the capacity that is authorized by the license.

The number of beds in the facility exceeded the licensed capacity. The facility is licensed for six and seven beds were observed.

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.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

Staff, Eugene Unaegbu, did not have on file verification of TB testing and results.

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.

The resident register was not maintained. I was shown two registers. One of them included Resident B but she was crossed out on the other one. There was also discrepancy regarding her discharge date.

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.

Medication was observed in the refrigerator that was not stored in a locked container.

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:
- (a) Be trained in the proper handling and administration of medication.
- (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.
- (c) Record the reason for each administration of medication that is prescribed on an as needed basis.
- (d) Initiate a review process to evaluate a resident's condition if a resident requires the repeated and prolonged use of a medication that is prescribed on an as needed basis. The review process shall include the resident's

prescribing physician, the resident or his or her designated representative, and the responsible agency.

- (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.
- (f) Contact the appropriate health care professional if a medication error occurs or when a resident refuses prescribed medication or procedures and follow and record the instructions given.

Resident B's Eliquis was prescribed to be taken twice daily and was filled in two separate pharmacy supplied bubble packs, one for morning and one for bedtime. Although they were filled on the same day, with a month supply of pills, the morning bubble pack was empty.

Several blank spaces were observed on Resident B's medication log sheets during the months August 2024-October 2024.

REPEAT VIOLATION {RENEWAL INSPECTION 03/03/2023}

R 400.14316 Resident records.

(2) Resident records shall be kept on file in the home for 2 years after the date of a resident's discharge from a home.

Requested file for discharged resident was not available in the facility.

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 hot water temperature was 157 degrees Fahrenheit.

R 400.14402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are

necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

The refrigerator and freezer were not equipped with thermometers.

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.

The floor in the entry way to Bedroom #5 was lifting.

REPEAT VIOLATION {RENEWAL INSPECTION 03/03/2023}

IV. RECOMMENDATION

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

02/11/2025

Date

Regina Buchanan Licensing Consultant

Regina Buchanon