GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 11, 2025

Roland Awolope
6425 Trotwood Street
Portage, MI 49024

RE: License #: AS390418731
Radiant Adult Foster Care
Kalamazoo
5204 Beech Ave
Kalamazoo, MI 49006

Dear Roland Awolope:

This letter is a follow-up to the Department's findings regarding the interim inspection conducted at your facility on 03/11/2025. The purpose of this inspection was to determine compliance with applicable licensing statutes and administrative rules for an Adult Foster Care small group home.

The violations that were found are:

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.

FINDING: Multiple direct care staff, including Tety Mumararunga and Naza Daudi, did not have eligibility letters from the Workforce Background Check available for review during the interim inspection.

All staff working in the facility are required to have these letters available for review.

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.

FINDING: The facility is over capacity. The licensee moved Resident A from another facility into Radiant Adult Foster Care because Resident A's previous facility caught fire and is uninhabitable. During the inspection, the licensee stated Resident A would be moving within a couple days to another facility. Radiant Adult Foster Care facility being overcapacity was approved by the Department on an emergency and temporary basis.

R 400.14204 Direct care staff; qualifications and training.

(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

performing assigned tasks, which shall include being competent in all of the following areas:

(b) First aid.

(c) Cardiopulmonary resuscitation.

FINDING: Direct care staff, Tety Mumararunga, did not have verification of first aid and CPR in her employee file, as required.

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.

(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.

FINDING: Direct care staff, Tety Mumararunga, did not have verification of an initial medical in her employee file, as required.

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.

FINDING: Multiple direct care staff, including Yinka Enoma and Naza Daudi, did not have verification of TB tests in their employee files, as required.

R 400.14207 Required personnel policies.

(2) The written policies and procedures identified in subrule (1) of this rule shall be given to employees and volunteers

at the time of appointment. A verification of receipt of the policies and procedures shall be maintained in the personnel records.

FINDING: None of the employee files had verification of receipt of the licensee's policies and procedures, as required.

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:

(e) Verification of experience, education, and training.

FINDING: Multiple direct care staff, including Yinka Enoma and Naza Daudi, did not have verification of their experience, education, and/or training in their employee files. For example, there were no job applications in their employee files outlining their experience, education and training.

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.

FINDING: Multiple direct care staff, including Tety Mumararunga, Yinka Enoma, and Naza Daudi, did not have verification of reference checks in their employee files, as required.

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:

(g) Beginning and ending dates of employment.

FINDING: None of the employee records/files had documented beginning dates of employment, as required. This beginning date of employment should be easily identified in the employee files.

R 400.14208 Direct care staff and employee records.

(3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information:

(a) Names of all staff on duty and those volunteers who are under the direction of the licensee.

(b) Job titles.

(c) Hours or shifts worked.

(d) Date of schedule.

(e) Any scheduling changes.

FINDING: A staff schedule was not available during the inspection, as required. The staff schedule should include the required information listed above.

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

FINDING: *Assessment Plans for AFC Residents* were not being signed by either guardians or responsible agencies, as required.

Signatures of the licensee, resident and/or resident’s representative and responsible agency, demonstrate all required persons have participated in the development of the written assessment plan.

If the responsible agency refuses to sign the resident’s written assessment plan, this should be noted on the assessment plan.

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

FINDING: *Resident Care Agreements* (RCA) were not being signed by either guardians or responsible agencies, as required.

Signatures of the licensee, resident and/or resident's representative and responsible agency, demonstrate all required persons are in agreement with the RCA.

If the responsible agency refuses to sign the resident's RCA, this should be noted on the RCA.

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.

FINDING: The reason resident PRN, or as needed, medication was being administered was being documented in chart notes; however, the reason shall be documented on the medication administration record.

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:
(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.

FINDING: A resident's medication was not administered because it was on hold, per the licensee; however, a physician's order or instructions regarding this was not available during the inspection. A licensee shall record all physician instructions in writing.

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.

FINDING: Multiple residents did not have Resident Funds II forms documenting Adult Foster Care payments, as required.

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.

FINDING: An extension cord was observed in a resident bedroom. Extension cords are fire hazards, but power strips are acceptable. The licensee removed the extension cord during the inspection.

Due to the violations identified in the report and prior to a renewal licensing study report being issued, **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.

Please provide verification of all documents to me by 04/01/2025 in order to renew the license for Radiant Adult Foster Care.

The Department provides technical assistance to meet the licensing requirements and consultation to improve services.

Please 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 (517) 284-9730.

Sincerely,

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 615-5190

Enclosures