



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 3, 2025

Willie George
23021 Radcliff
Oak Park, MI 48237

RE: License #: AF630080656
Florence CTH
23021 Radcliff
Oak Park, MI 48237

Dear Willie George:

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,

A handwritten signature in black ink, appearing to read "Sara Shaughnessy". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Sara Shaughnessy, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(248) 320-3721

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

I. IDENTIFYING INFORMATION

License #: AF630080656

Licensee Name: Willie George

Licensee Address: 23021 Radcliff
Oak Park, MI 48237

Licensee Telephone #: (248) 967-1178

Licensee/Licensee Designee: N/A

Administrator:

Name of Facility: Florence CTH

Facility Address: 23021 Radcliff
Oak Park, MI 48237

Facility Telephone #: (248) 967-1178

Original Issuance Date: 09/10/1998

Capacity: 3

Program Type: DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/27/2025

Date of Bureau of Fire Services Inspection if applicable: NA

Date of Health Authority Inspection if applicable: NA

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 1

No. of others interviewed 2 Role: Licensee and her daughter.

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
The onsite inspection did not take place during a mealtime, adequate food was observed.
- Fire drills reviewed? Yes No If no, explain.
- Fire safety equipment and practices observed? Yes No If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
06/14/2022, R 330.1803, R 400.1405, 400.1407, R 400.1418 N/A
- Number of excluded employees followed-up? 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:

R 400.1418	Resident Medications
	(2) Medication shall be given pursuant to label instructions.
<p>Resident A has a prescription for ferrous sulfate 325 mg, 2 times per day. She was not being administered her second dose. Resident B has a prescription for ferrous sulfate 325 mg, 3 times per day. She was not being administered her second and third doses.</p>	
R 400.1438	Emergency preparedness; evacuation plan; emergency transportation.
	(4) Fire drills shall be conducted 4 times a year. Two of the 4 required fire drills shall be conducted during sleeping hours. A record of the fire drills shall be incorporated with the evacuation plan
<p>During the onsite inspection, it was discovered that there was one fire drill conducted in 2023 and there were not any conducted in 2024.</p>	
R 400.1440	Heat-producing equipment.
	(6) Heat-producing equipment located in a basement shall be separated from the remainder of the home by means of a floor separation. Standard building material shall be sufficient for the floor separation and shall include at least a 1 3/4-inch solid wood core door or equivalent which is installed in a substantially fully stopped wood or steel frame and which is so constructed to effectively stop the spread of smoke and fire. The door shall be equipped with an automatic self-closing device and positive-latching hardware.
<p>During the onsite inspection, the door to the room containing heat producing equipment did not latch closed.</p>	
R 400.1422	Resident records.
	Rule 22. (1) A licensee shall complete and maintain a separate record for each

	<p>resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:</p> <p>(i) Health care appraisals.</p>
<p>Resident B is missing a health care appraisal in 2023.</p>	
<p>REPEAT VIOLATION ESTABLISHED. Reference LSR 06/14/2022, CAP 06/14/2022 and LSR dated 01/30/2023, CAP 01/25/2023.</p>	
R 400.1405	<p>Health of a licensee, responsible person, and member of the household.</p>
	<p>(3) A licensee shall provide the department with written evidence that he or she and each responsible person in the home is free from communicable tuberculosis. Verification shall be within the 3-year period before employment and verification shall occur every 3 years thereafter.</p>
<p>The licensee did not have verification of a negative tuberculosis test.</p>	
R 400.1422	<p>Resident records.</p>
	<p>Rule 22. (1) A licensee shall complete and maintain 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:</p> <p>(e) Resident care agreement.</p>
<p>Resident A's resident care agreement for 2024 was not signed by her guardian.</p>	

IV. RECOMMENDATION

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



03/03/2025

Sara Shaughnessy
Licensing Consultant

Date