

RICK SNYDER GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

March 2, 2018

Okechuku Wachuku Midwest AFC Homes Inc. 21880 Farmington Road Farmington, MI 48336

RE: License #: AS820382166

**Abbot Manor** 

19385 Woodworth Street

Redford, MI 48239

Dear Mr. Wachuku:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

An on-site inspection will be conducted.

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,

K. Robinson, LMSW, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100

K. Robinson

3026 W. Grand Blvd Detroit, MI 48202 (313) 919-0574

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820382166

**Licensee Name:** Midwest AFC Homes Inc.

**Licensee Address:** 21880 Farmington Road

Farmington, MI 48336

**Licensee Telephone #:** (734) 365-4707

Licensee/Licensee Designee: Okechuku Wachuku, Designee

**Administrator:** 

Name of Facility: Abbot Manor

Facility Address: 19385 Woodworth Street

Redford, MI 48239

**Facility Telephone #:** (313) 543-3021

Original Issuance Date: 08/08/2017

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

## **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):			02/21/2018		
Date of Bureau of Fire Services Inspection if applicable:					
Date of Health Authority Inspection if applicable:					
Inspection Ty	oe:	☐ Interview and Obs	servation		
No. of staff interviewed and/or observed 01 No. of residents interviewed and/or observed 02 No. of others interviewed 01 Role: licensee designee					
Medication	on pass / simu	lated pass observed?	Yes 🖂	No ☐ If no, explain.	
Medication	Medication(s) and medication record(s) reviewed? Yes $\boxtimes$ No $\square$ If no, explain.				
Yes ⊠ N • Meal preposition with residual value of the second valu	with resident assistance				
Fire safet	Fire safety equipment and practices observed? Yes $\square$ No $\boxtimes$ If no, explain.				
If no, exp	E-scores reviewed? (Special Certification Only) Yes \( \subseteq \text{No} \subseteq \text{N/A} \subseteq \text{N/A} \subseteq \text{If no, explain.} SC app submitted at time of renewal Water temperatures checked? Yes \( \subseteq \text{No} \subseteq \text{If no, explain.} \)				
• Incident r	eport follow-u	p? Yes⊠ No 🗌 If ı	no, expla	in.	
	e action plan ∈ A ⊠	compliance verified? `	Yes 🗌 (	CAP date/s and rule/s:	
	_	nployees followed-up?	? 1	N/A 🖂	
<ul> <li>Variances</li> </ul>	s? Yes 🗌 (pl	ease explain) No 🗌	N/A 🖂		

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

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.

Direct care worker, Adjarartou Niang does not have verification of 1<sup>st</sup> Aid training.

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:

(d) Personal care, supervision, and protection.

Direct care worker, Adjaratou Niang does not have verification of training in Personal care, supervision, and protection.

#### 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.

2 of 2 employee records reviewed didn't have verification of receipt of personnel policies and procedures.

### 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.

Observed the heat vent in Bedroom #1 was damaged by a former client. Repair required.

A corrective action plan was requested and approved on 02/21/2018. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

#### IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

K. Robinson 3/5/18

Kara Robinson Date

Licensing Consultant