



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 20, 2020

Fatima Mayo
813 S. Bond St
Saginaw, MI 48601

RE: License #: AS730396181
Investigation #: 2020A0501019
A Place Called Home

Dear Ms. Mayo:

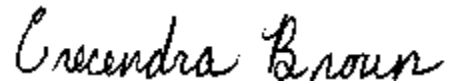
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (810) 787-7031.

Sincerely,

A handwritten signature in black ink that reads "Crecendra Brown". The script is cursive and fluid.

Crecendra Brown, Licensing Consultant
Bureau of Community and Health Systems
4809 Clio Road
Flint, MI 48504
(810) 931-0965

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS730396181
Investigation #:	2020A0501019
Complaint Receipt Date:	01/30/2020
Investigation Initiation Date:	01/30/2020
Report Due Date:	03/30/2020
Licensee Name:	Fatima Mayo
Licensee Address:	813 S. Bond St Saginaw, MI 48601
Licensee Telephone #:	(989) 482-8989
Administrator:	Fatima Mayo
Licensee Designee:	N/A
Name of Facility:	A Place Called Home
Facility Address:	440 S. 10th Street Saginaw, MI 48601
Facility Telephone #:	(989) 482-8989
Original Issuance Date:	07/09/2019
License Status:	REGULAR
Effective Date:	01/09/2020
Expiration Date:	01/08/2022
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Staff Teisha Henley is not administering Resident A's prescribed Coumadin medication as prescribed by her doctor.	No
Additional Findings	Yes

III. METHODOLOGY

01/30/2020	Special Investigation Intake 2020A0501019
01/30/2020	Special Investigation Initiated - Letter
01/30/2020	APS Referral Saginaw County Adult Protective Services Rebecca Robelin.
02/07/2020	Inspection Completed On-site Licensee Fatima Mayo and Resident A.
02/07/2020	Contact - Telephone call made Staff Teisha Henley.
02/07/2020	Exit Conference Licensee Fatima Mayo.

ALLEGATION:

Staff Teisha Henley is not administering Resident A's prescribed Coumadin medication as prescribed by her doctor.

INVESTIGATION:

On February 7, 2020, I conducted an onsite investigation at A Place Called Home. Licensee Fatima Mayo and Resident A.

Licensee Fatima Mayo stated that Adult Protective Services had been out to the facility and checked everything. Licensee Mayo stated that Resident A had been receiving her medications as prescribed. Licensee Mayo stated that that she has been following the

instructions for all the residents' medications. Licensee Mayo stated that she makes sure all the doctor's instructions are followed for Resident A's Coumadin prescription. Licensee Mayo stated that Staff Teisha Henley only transports the residents. Licensee Mayo stated that Resident A is her own guardian.

I reviewed Resident A's medications and medication logs. Resident A is prescribed Coumadin Warfarin Sodium 2MG daily. Resident A's medication log shows that she has been receiving the medication daily.

Resident A stated that she has been doing well. Resident A stated that she has never heard the allegation before. Resident A stated that Staff Teisha Henley gives her all her medications almost every day and sometimes Licensee Mayo gives her the medications. Resident A stated that Staff Teisha Henley transports her to some of her medical appointments. Resident A stated that she had no other concerns and she has been getting her medications as prescribed as far as she knows.

On February 7, 2020, February 18, 2020 and February 21, 2020, I made several attempts to contact Staff Teisha Henley on the phone. I left a voice message to call me back each time I called Staff Teisha Henley. To date, I have not received a return phone call from Staff Teisha Henley.

APPLICABLE RULE	
R 400.14312	Resident medications.
	<p>Resident medications.</p> <p>(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 {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.</p> <p>(2) Medication shall be given, taken, or applied pursuant to label instructions.</p> <p>(3) Unless a resident's physician specifically states otherwise in writing, the giving, taking, or applying of prescription medications shall be supervised by the licensee, administrator, or direct care staff.</p>

ANALYSIS:	<p>Licensee Fatima Mayo and Resident A stated that Resident A has been receiving her medication as prescribed.</p> <p>I reviewed Resident A's medications and medication logs. Resident A is prescribed Coumadin Warfarin Sodium 2MG daily. Resident A's medication log shows that she has been receiving the medication daily.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On February 7, 2020, I conducted an onsite investigation at A Place Called Home. Licensee Fatima Mayo and Resident A.

Licensee Fatima Mayo stated that Staff Teisha Henley only transports the residents. Licensee Mayo stated that she does not have any employee records on Staff Teisha Henley. Licensee Mayo stated that Staff Teisha Henley has not been fingerprinted and she does not have a TB Test or physical on her. Licensee Mayo stated that she did not have any documentation of any training for Staff Teisha Henley.

Resident A stated that she has been doing well. Resident A stated that Staff Teisha Henley gives her all her medications almost every day and sometimes Licensee Mayo gives her the medications. Resident A stated that Staff Teisha Henley transports her to some of her medical appointments. Resident A stated that Staff Teisha Henley works at the home every week during the day and some evenings.

On February 7, 2020, February 18, 2020 and February 21, 2020, I made several attempts to contact Staff Teisha Henley on the phone. I left a voice message to call me back each time I called Staff Teisha Henley. To date, I have not received a return phone call from Staff Teisha Henley.

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	(1) Direct care staff shall not be less than 18 years of age and shall be able to complete required reports and follow written and oral instructions that are related to the care and supervision of residents.

	<p>(2) Direct care staff shall possess all of the following qualifications:</p> <p>(a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.</p> <p>(b) Be capable of appropriately handling emergency situations.</p> <p>(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:</p> <p>(a) Reporting requirements.</p> <p>(b) First aid.</p> <p>(c) Cardiopulmonary resuscitation.</p> <p>(d) Personal care, supervision, and protection.</p> <p>(e) Resident rights.</p> <p>(f) Safety and fire prevention.</p> <p>(g) Prevention and containment of communicable diseases.</p>
ANALYSIS:	<p>Resident A and Licensee Fatima Mayo stated that Staff Teisha Henley transports residents. Resident A stated that Staff Teisha Henley gives her medications and works in the home weekly.</p> <p>Licensee Fatima Mayo stated that she does not have an employee file on Staff Teisha Henley, Staff Teisha Henley has not been fingerprinted and she does not have training on file for Staff Teisha Henley.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
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.
	(1) A licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household shall be in such physical and mental health so as not to negatively affect either the health of the resident or the quality of his or her care.

	<p>(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 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.</p> <p>(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.</p> <p>(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.</p> <p>(7) A licensee shall obtain certification from a volunteer that the volunteer is free from communicable disease and that the volunteers physical and mental health will not negatively affect either the health of the resident or the quality of the resident's care.</p>
ANALYSIS:	Licensee Fatima Mayo stated that she does not have an employee file on Staff Teisha Henley, Staff Teisha Henley has not been fingerprinted and she does not have a physical or TB test on file for Staff Teisha Henley.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14208	Direct care staff and employee records.
	<p>(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:</p> <p>(a) Name, address, telephone number, and social security number.</p>

	<p>(b) The professional or vocational license, certification, or registration number, if applicable.</p> <p>(c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.</p> <p>(d) Verification of the age requirement.</p> <p>(e) Verification of experience, education, and training.</p> <p>(f) Verification of reference checks.</p> <p>(g) Beginning and ending dates of employment.</p> <p>(h) Medical information, as required.</p> <p>(i) Required verification of the receipt of personnel policies and job descriptions.</p> <p>(2) The records identified in subrule (1) of this rule shall be maintained for not less than 3 years after the direct care staff member's or employee's ending date of employment.</p>
ANALYSIS:	Licensee Fatima Mayo stated that she does not have an employee file on Staff Teisha Henley.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14312	Resident medications.
	<p>Resident medications.</p> <p>(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:</p> <p>(a) Be trained in the proper handling and administration of medication.</p>
ANALYSIS:	Resident A stated that Staff Teisha Henley had been giving her all of her medications. Licensee Fatima Mayo stated that she did not have any documentation of any training for Staff Teisha Henley.
CONCLUSION:	VIOLATION ESTABLISHED

On February 7, 2020, I conducted an exit conference with Licensee Fatima Mayo. I informed Ms. Mayo that a corrective action plan would be requested for the violations. Ms. Mayo stated that she would be completing the corrective action plan.

IV. RECOMMENDATION

Upon the receipt of an acceptable and approved corrective action plan, no change to the license status is recommended.

Crecendra Brown

March 20, 2020

Crecendra Brown
Licensing Consultant

Date

Approved By:

Mary Holton

March 20, 2020

Mary E Holton
Area Manager

Date