



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 13, 2021

Roza Tesfaye
Koni's AFC Home Inc.
P.O. Box 1094
Bloomfield Hills, MI 48303

RE: License #: AS630304602
Investigation #: 2021A0991017
Koni's AFC Home Inc. III

Dear Ms. Tesfaye:

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Kristen Donnay". The signature is written in black ink and is positioned below the word "Sincerely,".

Kristen Donnay, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 296-2783

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT
THIS REPORT CONTAINS QUOTED PROFANITY**

I. IDENTIFYING INFORMATION

License #:	AS630304602
Investigation #:	2021A0991017
Complaint Receipt Date:	03/31/2021
Investigation Initiation Date:	04/01/2021
Report Due Date:	05/30/2021
Licensee Name:	Koni's AFC Home Inc.
Licensee Address:	371 Voorheis Pontiac, MI 48341
Licensee Telephone #:	(248) 396-2973
Licensee Designee:	Roza Tesfaye
Name of Facility:	Koni's AFC Home Inc. III
Facility Address:	379 Voorhies Pontiac, MI 48341
Facility Telephone #:	(248) 499-9084
Original Issuance Date:	11/16/2010
License Status:	REGULAR
Effective Date:	07/01/2019
Expiration Date:	06/30/2021
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Direct care worker, Miles, swore at Resident A, which made Resident A nervous and scared in fear of retaliation.	Yes
There is an infestation of mice and ants at the facility. Resident A's personal belongings had mouse droppings in them.	No
Additional Findings	Yes

III. METHODOLOGY

03/31/2021	Special Investigation Intake 2021A0991017
04/01/2021	APS Referral Received from Adult Protective Services (APS) - denied for investigation.
04/01/2021	Special Investigation Initiated - Telephone Call to complainant
04/01/2021	Contact - Telephone call made Interviewed Resident A via telephone
05/05/2021	Inspection Completed On-site Unannounced onsite inspection- interviewed residents and licensee designee
05/05/2021	Contact - Telephone call made Left message for staff, Miles Towns
05/11/2021	Contact - Telephone call made Left message for staff, Miles Towns
05/11/2021	Contact - Telephone call made Interviewed staff, Lydia Dereje, via telephone
05/11/2021	Contact - Telephone call made Interviewed staff, Chris Dunleavy, via telephone
05/11/2021	Contact - Telephone call made Left message for staff, Elsabet Amena

05/12/2021	Contact - Telephone call received Interviewed staff, Miles Towns, via telephone
05/13/2021	Exit Conference Via telephone with licensee designee, Roza Tesfaye

ALLEGATION:

Direct care worker, Miles, swore at Resident A, which made Resident A nervous and scared in fear of retaliation.

INVESTIGATION:

On 03/31/21, I received a complaint from Adult Protective Services (APS), alleging that Koni's AFC Home Inc. III is infested with mice and ants. Resident A had mouse droppings in his personal belongings. It was also alleged that staff, Miles, was verbally abusive to Resident A, which intimidated Resident A and made him fearful of retaliation. The complaint was denied by APS.

I initiated my investigation on 04/01/21 by contacting the complainant. The complainant indicated that Resident A was recently discharged from Koni's AFC III. He did not feel comfortable speaking up about the issues at the home while he was residing there, because he was fearful of retaliation. The complainant stated that there is a staff person in the home named Miles who yelled and cussed at Resident A. Resident A was afraid of making Miles mad and did not want to say anything. He said that Miles would get angry if they said anything, so he did not want to report it to the owner. Resident A told the complainant that Miles grounded him from having coffee. There was no medical reason why Resident A could not have coffee.

On 04/01/21, I interviewed Resident A via telephone. Resident A stated that Miles is very mean. Miles yells and swears at the residents. He uses the "F word" and every cuss word imaginable. He gets mad if the residents do not do what he says. He calls everybody "asshole" and "fucker." This is usually directed at Resident A or the other residents in the home. Resident A stated that Miles is not a good person, and he should be fired. Miles never hit him or did anything physical, he just hollers and cusses. Miles told Resident A that he could not have coffee because it was too much cholesterol. Resident A stated that he never told anybody about this because he was afraid of Miles. He stated that Miles would cuss him out if he reported it. Resident A stated that the other staff in the home were nice and treated him well.

On 05/05/21, I conducted an unannounced onsite inspection at the home. I interviewed Resident B, Resident C, and Resident D. Resident B stated that the staff in the home are nice, but they nag sometimes. As an example, he stated that the staff tell the residents not to urinate in the bushes. Resident B reported that Miles is "alright." He stated that Miles might swear sometimes. He can be verbally aggressive, but it is on a

rare occasion. He will say, "Get your mother fucking ass in here." He stated that Miles is never physically aggressive, but occasionally he will swear and yell. After he swears, he can be humorous and will laugh and joke around with the residents. Resident B did not know if Miles got along with Resident A.

Resident C and Resident D stated that they had no issues with any of the staff in the home. They did not have anything to complain about. Resident C stated that Miles can talk loudly and will raise his voice, but he is not being threatening. That is just how he is, and he does not mean anything by it. Resident D stated that Miles is easy going and he never heard of him yelling or swearing at anybody. Resident C and Resident D never witnessed Miles yelling or swearing at Resident A.

On 05/05/21, I interviewed the licensee designee, Roza Tesfaye. Ms. Tesfaye indicated that Miles Towns works the midnight shift. She was aware of one incident when Mr. Towns got into an argument with Resident B. This was because Resident B was saying the "n word" to Mr. Towns. They addressed this with Resident B's case manager. He stated that sometimes Mr. Towns and Resident B go back and forth arguing, but Resident B says it is fine and they are just joking.

On 05/11/21, I interviewed direct care workers, Lydia Dereje and Chris Dunleavy, via telephone. They indicated that they do not typically work shifts with Miles Towns, as he works the midnight shift. They never heard of Mr. Towns or any other staff person being verbally aggressive towards the residents. They stated that Resident A never complained about Mr. Towns or anyone else mistreating him. Ms. Dereje stated that sometimes they limit the residents to two cups of coffee in the morning so that there is enough for everyone. She was not aware of staff ever restricting coffee as a punishment. Ms. Dunleavy had no knowledge of staff restricting coffee from the residents.

On 05/12/21, I interviewed direct care worker, Miles Towns, via telephone. Mr. Towns indicated that he has worked in the home for five years. He denied yelling or swearing at the residents. Mr. Towns had no knowledge of any other staff person yelling or swearing at the residents in the home. He stated that the residents curse more than anything. He gets along well with the residents in the home, and they usually joke around. The worst thing he would ever say is "damn." Mr. Towns indicated that there was an incident when Resident B was "calling me out my name." Resident B was very hyper and was upset that he could not get more coffee. He called Mr. Towns the "N word." Mr. Towns stated that he did not swear or yell at Resident B. He redirected Resident B and told him that his name is Miles and that is what Resident B should call him. Mr. Towns stated that he never had an issue with Resident A. He never told Resident A that he could not have coffee as a punishment. Mr. Towns stated that they do not allow the residents to have more coffee until everyone has had their first cup of coffee to ensure that there is enough for everybody.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following: (f) Subject a resident to any of the following: (ii) Verbal abuse.
ANALYSIS:	Based on the information gathered through my investigation, there is substantial information to conclude that direct care worker, Miles Towns, yelled and cussed at the residents. Both Resident A and Resident B reported that Mr. Towns was verbally aggressive towards them. They stated that Mr. Towns swore and yelled. Resident C also stated that sometimes Mr. Towns raises his voice and talks loudly. Resident A was fearful of reporting this information to anyone in the home due to a fear of retaliation.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

There is an infestation of mice and ants at the facility. Resident A's personal belongings had mouse droppings in them.

INVESTIGATION:

On 04/01/21, I interviewed the complainant via telephone. The complainant stated that Resident A had mouse droppings in his dresser drawers. There were ants crawling on his dresser. The owner's husband, DJ, blamed Resident A for the ants on the dresser and told him he could not have food in his room. The complainant stated that she did not take pictures of the ants or mouse droppings.

On 04/01/21, I interviewed Resident A via telephone. Resident A stated that there were mouse droppings in his dresser drawer. He never saw any mice in his bedroom. There were also ants on his dresser. This was in the summertime. Resident A's guardian told staff to clean the dresser, but a few months later there were mouse droppings.

On 05/05/21, I conducted an unannounced onsite inspection at the home. I interviewed Resident B, Resident C, and Resident D. The residents denied seeing any mice or mouse droppings in the home. Resident B stated that he did observe big carpenter ants on the floor in the bedroom, but they are gone now. He did not know if staff did anything to get rid of them. Resident C stated that he observed ants in the kitchen, but they have been gone for a while. He stated that staff sprayed or did something to get rid of them.

Resident D denied seeing any ants in the home. All of the residents stated that staff keep the home clean.

On 05/05/21, I interviewed the licensee designee, Roza Tesfaye. Ms. Tesfaye stated that she never saw any mice or mouse droppings in the home. None of the residents have ever mentioned seeing mice or mouse droppings. Ms. Tesfaye stated that there are occasionally ants in the home, but they use spray to get rid of them.

During my unannounced onsite inspection, I did a walk-through of the facility. I did not observe any ants or any evidence of mice in the facility.

On 05/11/21, I interviewed direct care workers, Lydia Dereje and Chris Dunleavy, via telephone. Ms. Dereje and Ms. Dunleavy both denied seeing ants or mice in the home. They never heard any of the residents complain about ants or mouse droppings. They stated that the home is kept clean and the manager will get on staff about keeping the home clean. The residents are responsible for keeping their rooms tidy.

On 05/12/21, I interviewed direct care worker, Miles Towns, via telephone. Mr. Towns stated that he never saw mouse droppings or mice in the home. He never saw any ants in the home. The home is usually clean because he keeps it clean. Mr. Towns stated that if there were rodents or pests in the home, the owner would address the issue.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.
ANALYSIS:	Based on the information gathered through my investigation, there is insufficient evidence to conclude that there was a mouse or ant infestation at the home. Resident A indicated that he had mouse droppings and ants in his room, however, I did not observe any evidence of ants or mice in the home during an unannounced onsite inspection. The other residents denied seeing any mouse droppings. They indicated that there are sometimes ants, but they are gone now. The staff noted that the facility is kept clean and the owner addresses any issues with pests.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

During the onsite inspection, I observed a large gap at the bottom of the screen door which could allow insects or debris into the facility if the front door is open.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.
ANALYSIS:	During my onsite inspection, the screen door was not weathertight or in good repair, as there was a large gap at the bottom of the screen door.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

During the onsite inspection, I observed that the tile floor throughout the facility was worn and damaged. Some of the floor tiles in the living room area were separated.

On 05/13/21, I conducted an exit conference via telephone with the licensee designee, Roza Tesfaye. Ms. Tesfaye indicated that her husband was already in the process of repairing the floors at the facility. She stated that they issued a 30-day discharge notice for Resident A due to him having behavioral issues and not getting along with other residents in the home. She felt this complaint might have been made in retaliation. Ms. Tesfaye indicated that she would speak with staff about being more mindful of how they interact and speak with the residents and she would remind the residents that they can come to her if they ever have any issues or concerns with staff or other residents in the home.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

ANALYSIS:	During my onsite inspection, the floors throughout the facility were worn and the living room floor was damaged.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED Renewal Licensing Study Report Dated: 06/10/19; CAP Dated: 06/20/19.

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, I recommend no change to the status of the license.



05/13/21

Kristen Donnay
Licensing Consultant

Date

Approved By:



05/13/2021

Denise Y. Nunn
Area Manager

Date