



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 9, 2021

Charlene McNeal
Irvine Head Injury Home Inc
30066 Ponds View Dr
Franklin, MI 48025

RE: License #: AS630012783
Irvine Head Injury Home
13531 Irvine
Oak Park, MI 48237

Dear Mrs. McNeal:

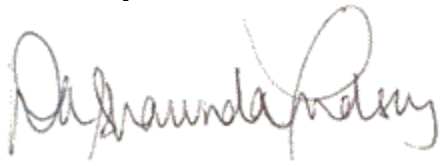
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 "DaShawnda Lindsey". The signature is fluid and cursive, with the first name being more prominent.

DaShawnda Lindsey, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 505-8036

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

I. IDENTIFYING INFORMATION

License #:	AS630012783
Licensee Name:	Irvine Head Injury Home Inc
Licensee Address:	30066 Ponds View Dr Franklin, MI 48025
Licensee Telephone #:	(248)867-4189
Licensee/Licensee Designee:	Charlene McNeal
Administrator:	Charlene McNeal
Name of Facility:	Irvine Head Injury Home
Facility Address:	13531 Irvine Oak Park, MI 48237
Facility Telephone #:	(248) 542-4423
Original Issuance Date:	12/30/1992
Capacity:	6
Program Type:	MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/25/2021

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 0
No. of others interviewed 3 Role: Licensee designee, HR, hiring

- 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 inspection did not occur during a meal time.
- 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:
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:	
MCL 400.734b	Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; 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.
Staff Torri Grubbs was fingerprinted under a different license (AL630094857). Ms. Grubbs must be fingerprinted under the license where she works.	

R 400.14203	Licensee and administrator training requirements.
	<p>(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:</p> <p>(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.</p>
<p>There was no verification licensee designee Charlene McNeal completed at least 16 hours of training in 2019.</p>	
R 400.14204	Direct care staff; qualifications and training.
	<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>(b) First aid.</p> <p>(c) Cardiopulmonary resuscitation.</p>
<p>There was no verification staff Taylor Avery has a current First Aid and CPR certification.</p>	
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.
	<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>There was no verification staff Gloria McLaurin completed a health review in 2020 and 2021.</p>	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	<p>(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the</p>

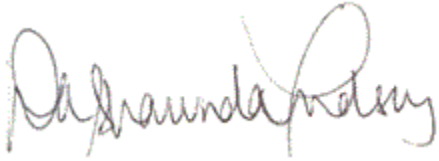
	resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
<p>Resident T's assessment plan for 2020 was incomplete. In Section II, items I and J were blank. In addition, the entire Section III was blank. His plan for 2020 and 2021 were not signed by the guardian. In addition, Ms. McNeal did not sign the 2021 plan.</p> <p>Ms. McNeal also did not sign Resident C's and Resident H's assessment plan in 2020 or 2021.</p>	
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.
<p>Resident T's resident care agreement for 2021 were not signed by the guardian or Ms. McNeal. Ms. McNeal also did not sign the agreement for 2020.</p> <p>Ms. McNeal also did not sign Resident C's and Resident H's resident care agreement in 2020 or 2021.</p>	
R 400.14312	Resident medications.
	<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>(b) Complete an individual medication log that contains all of the following information:</p> <ul style="list-style-type: none"> (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given. (vi) A resident's refusal to accept prescribed medication or procedures.
<p>Staff did not initial Resident T's medication administration record (MAR) to show administration of two drops of half peroxide half distill water in each ear at 8pm on 05/13/2021 and 05/14/2021.</p>	

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.
<p>Staff did not document the reason for administration of PRN Enulose 10GM/15 Sol to Resident H at 8pm on 05/01/2021, 05/02/2021, 05/04/2021, 05/06/2021, 05/07/2021, 05/10/2021, 05/12/2021, 05/13/2021, 05/15/2021-05/17/2021.</p> <p>Staff did not document the reason for administration of PRN Loperamide HCL 2mg on 05/07/2021 and 05/24/2021.</p>	
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.
<p>Resident T's Resident Funds Part II form was not up to date. All transactions were not listed. Per the form, Resident T has \$226.50, but Resident T had \$325.35 in the facility.</p>	
R 400.14316	Resident records.
	(1) A licensee shall complete, and maintain in the home, 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: (a) Identifying information, including, at a minimum, all of the following: (vii) Medical insurance. (viii) Funeral provisions and preferences. (ix) Resident's religious preference information.
<p>Resident C's information and identification form was not completed. There were no burial provisions, insurance information or religious preference listed.</p>	
R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least

	once per quarter. A record of the practices shall be maintained and be available for department review.
There was no verification a fire drill was conducted during the afternoon shift in the 3 rd and 4 th quarter of 2020 or during the midnight shift in the 4 th quarter of 2020.	
R 400.14312	Resident medications.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
Resident C is prescribed Enulose 10GM/15 Sol as needed every other day. Staff administered the medication at 8pm on the following days: 05/01/2021, 05/02/2021, 05/04/2021, 05/06/2021, 05/07/2021, 05/10/2021, 05/12/2021, 05/13/2021, 05/15/2021-05/17/2021. Sometimes staff administered the medication to Resident C on consecutive days.	
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.
There was no verification staff Torri Grubbs was tested for TB within the last three-year period.	
R 400.14315	Handling of resident funds and valuables.
	(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.
Resident T had \$325.35 in the facility.	

IV. RECOMMENDATION

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



06/08/2021

Date

Licensing Consultant