



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 21, 2021

Roger Covill  
North-Oakland Residential Services Inc  
P. O. Box 216  
Oxford, MI 48371

RE: License #: AS630283823  
Horseshoe East Home  
1649 Ray Road  
Oxford, MI 48371

Dear Mr. Covill:

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 designee 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 cursive script that reads "Kristen Donnay". The signature is written in a dark 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

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630283823
<b>Licensee Name:</b>	North-Oakland Residential Services Inc
<b>Licensee Address:</b>	106 S. Washington Oxford, MI 48371
<b>Licensee Telephone #:</b>	(248) 969-2392
<b>Licensee Designee:</b>	Roger Covill
<b>Name of Facility:</b>	Horseshoe East Home
<b>Facility Address:</b>	1649 Ray Road Oxford, MI 48371
<b>Facility Telephone #:</b>	(248) 236-8649
<b>Original Issuance Date:</b>	09/19/2006
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/09/2021

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

Date of Environmental/Health Inspection if applicable: 06/02/2021

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Lic. Designee

- 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.  
Inspection did not occur during 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:

<b>MCL 400.713</b>	<b>License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.</b>
	<p>(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and (11), the department shall issue or renew a license if satisfied as to all of the following:</p> <p>(e) The good moral character of the licensee or licensee designee, owner, partner, director, and person responsible for the daily operation of the facility. The applicant is responsible for assessing the good moral character of the employees of the facility. The person responsible for the daily operation of the facility shall be not less than 18 years of age.</p>

During the onsite inspection, there was no documentation on file showing that direct care worker, Rian Jeans, was fingerprinted through the Michigan Workforce Background Check system. The home manager, Rachel Love, had documentation of fingerprinting on file, but it was not linked to the Horseshoe East Home.

<b>R 330.1803</b>	<b>Facility environment; fire safety.</b>
	(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3-month period.

	<p>During the onsite inspection, there was no documentation on file showing that fire drills were completed during daytime or evening hours for the 3-month period of January -March 2020.</p>
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**REPEAT VIOLATION ESTABLISHED**

Reference Renewal Licensing Study Report Dated: 06/13/19; CAP Dated: 06/28/19

<b>R 330.1803</b>	<b>Facility environment; fire safety.</b>
	<p>(6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 month from the date of the finding to either of the following:</p> <p>(a) Improve the score to at least the "slow" category.</p> <p>(b) Bring the home into compliance with the physical plant standards for "Impractical" homes contained in chapter 21 of the 1985 life safety code of the national fire protection association, which are adopted by reference in these rules and which may be obtained from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost, or from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of the chapter 21 standards. A price quote for copying of these pages may be obtained from the national fire protection association.</p>

During the onsite inspection, there was no documentation on file showing that evacuation assessments (E-scores) were completed annually for 2019.

<b>R 400.14208</b>	<b>Direct care staff and employee records.</b>
	<p>(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:</p> <p>(f)Verification of reference checks.</p>

During the onsite inspection, the employee file for Rian Jeans did not contain verification of reference checks.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(2) Medication shall be given, taken, or applied pursuant to label instructions.

During the onsite inspection, I reviewed Resident B’s medications and medication administration record and noted the following:

- Resident B was prescribed DOK 100mg soft gel twice daily as needed for constipation. The home manager indicated that they were giving Resident B the medication twice daily at 8:00am and 8:00pm and not on an as needed basis.
- Resident B was prescribed Lorazepam 1mg tablet- take 1 tablet twice daily and twice daily as needed. The PRN medications were being passed from the same bubble packs as the daily medications, making it difficult to determine if the medication was being given as prescribed.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(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.

During the onsite inspection, I reviewed Resident B’s medication administration record. Staff were not consistently documenting the administration of Resident B’s PRN for Biscodyl 10mg suppository on the medication log, health care chronological, and bowel movement chart. Resident B’s bowel movement chart indicated that he received a suppository on 5/7/21, 5/18/21, 5/21/21, and 5/22/21 but this was not documented on the medication logs.

<b>R 400.14313</b>	<b>Resident nutrition.</b>
	(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.

During the onsite inspection, I observed the posted menus in the home. Staff were not noting substitutions on the menu.

<b>R 400.14318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	(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.

During the onsite inspection, there was no documentation on file showing that evacuation drills were completed during daytime or evening hours for January - March 2020.

**REPEAT VIOLATION ESTABLISHED**

Reference Renewal Licensing Study Report Dated: 06/13/19; CAP Dated: 06/28/19

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the onsite inspection, I observed the following:

- The blinds in the front room and one of the bedrooms were broken.
- The door frames and doors were splintered and damaged from wheelchair use.
- The faucet handle in the bathroom was loose.
- The carpet in the front room was stained/frayed

**REPEAT VIOLATION ESTABLISHED**

Reference Renewal Licensing Study Report Dated: 06/13/19; CAP Dated: 06/28/19

**IV. RECOMMENDATION**

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

*Kristen Donnay*

06/21/2021

Kristen Donnay  
Licensing Consultant

Date