



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 10, 2021

Vincent Anwunah
ChiCares Assisted Living LTD
46908 Wareham Drive
Canton, MI 48187

RE: License #: AS820295443
Five C's Manor
24476 Schoolcraft
Redford, MI 48239

Dear Mr. Anwunah:

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 (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "Regina Buchanan". The signature is written in a cursive, flowing style.

Regina Buchanan, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3029

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

I. IDENTIFYING INFORMATION

License #: AS820295443

Licensee Name: ChiCares Assisted Living LTD

Licensee Address: 46908 Wareham Drive
Canton, MI 48187

Licensee Telephone #: (313) 408-3227

Licensee/Licensee Designee: Vincent Anwunah

Administrator: Chinyelu Chinyelu

Name of Facility: Five C's Manor

Facility Address: 24476 Schoolcraft
Redford, MI 48239

Facility Telephone #: (313) 408-3227

Original Issuance Date: 07/31/2008

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/09/2021

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 5

No. of others interviewed 1 Role: Administrator

- 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.
- 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:
11/04/2019
Rules: 734(b)(6), 203(1), 205(3), 208(1), 301(9), 310(3), 403(1), 403(4), 403(5), 505(4), 507(5) 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:

R 400.14208

Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

- (a) Name, address, telephone number, and social security number.**
- (b) The professional or vocational license, certification, or registration number, if applicable.**
- (c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.**
- (d) Verification of the age requirement.**
- (e) Verification of experience, education, and training.**
- (f) Verification of reference checks.**
- (g) Beginning and ending dates of employment.**
- (h) Medical information, as required.**
- (i) Required verification of the receipt of personnel policies and job descriptions.**

Staff, Eugene Unegbu, did not have on file verification of reference checks and verification the receipt of personnel policies and job descriptions.

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:

- (b) Complete an individual medication log that contains all of the following information:**
 - (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.**

Resident A had medications that were not initialed as administered on 09/07/2021 and there was no documentation to explain the blanks.

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.

The front cover of the stove was missing.

Bedroom 1 had a cracked mirror.

The upstairs bathroom sink was leaking water and was draining slow. Standing water was observed in the sink.

The shower in the downstairs bathroom was leaking water.

The fire door to the furnace room no longer latched when closed. The arm at the top of the door was detached.

R 400.14407 Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

The bathrooms had locking against egress hardware installed on them.

IV. RECOMMENDATION

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



Regina Buchanan
Licensing Consultant

11/01/2021
Date

