



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

SHELLY EDGERTON  
DIRECTOR

November 16, 2018

Ann Kelso  
Simple Elegance, Inc.  
422 Leland Place  
Lansing, MI 48917

RE: License #: AS230285637  
**Simple Elegance II**  
**4327 Gladys**  
**Lansing, MI 48911**

Dear Ms. Kelso:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed. It is valid only at your present address and is nontransferable.

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 (517) 284-9720.

Sincerely,

A handwritten signature in cursive script that reads "Julie Elkins".

Julie Elkins, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909

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

**I. IDENTIFYING INFORMATION**

|                                |  |
|--------------------------------|--|
| <b>License #:</b>              | AS230285637  |
| <b>Licensee Name:</b>          | Simple Elegance, Inc.                                      |
| <b>Licensee Address:</b>       | 422 Leland Place<br>Lansing, MI 48917                      |
| <b>Licensee Telephone #:</b>   | (517) 507-1332   |
| <b>Licensee Designee:</b>      | Ann Kelso  |
| <b>Administrator:</b>          | Ann Kelso  |
| <b>Name of Facility:</b>       | Simple Elegance II   |
| <b>Facility Address:</b>       | 4327 Gladys<br>Lansing, MI 48911                           |
| <b>Facility Telephone #:</b>   | (517) 507-1332   |
| <b>Original Issuance Date:</b> | 07/05/2007   |
| <b>Capacity:</b>               | 6  |
| <b>Program Type:</b>           | PHYSICALLY HANDICAPPED<br>DEVELOPMENTALLY DISABLED<br>AGED |

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 11/14/2018

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

Date of Environmental/Health 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 3  
No. of others interviewed 1 Role: licensee designee/admin

- 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:  
403 (11), 403 (12), 510(5), 403 (13), 301 (9) 12/06/2016 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 400.734**      **400.734b. This amended section is effective January 9, 2009 except Section 734b(1)(e)(iv) after the word "or" which will not be effective until october 31, 2010.**

**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.**

**Due to the length of this entire rule, including subrules, please use individual subrules or auto text.**

One direct care worker and licensee designee who also works as a direct care worker did not have workforce background criminal history clearances completed and in the employee record.

**R 400.14203**      **Licensee and administrator training requirements.**

(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:

(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.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

The licensee designee/administrator did not have documentation that annual training hours were completed.

**R 400.14204            Direct care staff; qualifications and training.**

(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:

- (b) First aid.
- (c) Cardiopulmonary resuscitation

2 direct care workers and licensee designee who also works as a direct care worker did not have documentation of being trained in First Aid and Cardiopulmonary resuscitation.

**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.**

(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.

A statement signed by a physician was not available for review at the time of the inspection for any of the direct care workers or the licensee designee/administrator.

**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.**

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

**R 400.14208                    Direct care staff and employee records.**

(3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information:

- (a) Names of all staff on duty and those volunteers who are under the direction of the licensee.
- (b) Job titles.
- (c) Hours or shifts worked.
- (d) Date of schedule.
- (e) Any scheduling changes.

The licensee designee did not have a daily schedule of advance work assignments schedule for review at the time of the inspection.

**R 400.14301                    Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

- (b) A description of services to be provided and the fee for the service.

2 of 5 resident records that were reviewed did not contain a fee for services on the resident care agreement.

**R 400.14310                    Resident health care.**

(2) A licensee shall maintain a copy of the annual health care appraisal on file for not less than 2 years.

3 of 5 resident records reviewed did not contain annual health care appraisals.

**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:

(viii) Funeral provisions and preferences.

2 of 5 resident records reviewed did not contain funeral provisions.

**R 400.14403 Maintenance of premises.**

(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

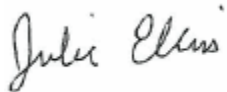
**REPEAT VIOLATION ESTABLISHED. Reference LSR 02/28/2017, CAP 03/16/2017.**

Both bathrooms in the facility contained removal bath mats in the shower.

A corrective action plan was requested and approved on 11/14/2018. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

**IV. RECOMMENDATION**

I recommend issuance of a 2-year regular adult foster care license.



11/16/2018

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Julie Elkins  
Licensing Consultant

Date