GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 7, 2022

Yeshi Bedada
1446 Emerald Ave. NE
Grand Rapids, MI 49505

RE: License #: AS410397841
Investigation #: 2022A0467037
Angel Care Adult Foster Home III

Dear Mrs. Bedada:

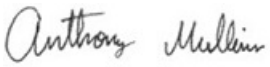
Attached is the Special Investigation Report for the above referenced facility. Due to the violation identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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 (616) 356-0183.

Sincerely,



Anthony Mullins, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS410397841
Investigation #:	2022A0467037
Complaint Receipt Date:	05/12/2022
Investigation Initiation Date:	05/12/2022
Report Due Date:	07/11/2022
Licensee Name:	Yeshi Bedada
Licensee Address:	1446 Emerald Ave. NE Grand Rapids, MI 49505
Licensee Telephone #:	(616) 337-4247
Administrator:	Yeshi Bedada
Licensee Designee:	Yeshi Bedada
Name of Facility:	Angel Care Adult Foster Home III
Facility Address:	545 College Avn NE Grand Rapids, MI 49503
Facility Telephone #:	(616) 337-4247
Original Issuance Date:	07/11/2019
License Status:	REGULAR
Effective Date:	01/11/2022
Expiration Date:	01/10/2024
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
On 5/12/22, residents were present in the home without staff supervision.	Yes
Additional Findings	Yes

III. METHODOLOGY

05/12/2022	Special Investigation Intake 2022A0467037
05/12/2022	Special Investigation Initiated - On Site
05/13/2022	APS Referral I notified APS worker, Lacey Lott of the staffing issue within the facility.
06/07/2022	I conducted an exit conference with licensee designee, Yeshi Bedada.

ALLEGATION: On 5/12/22, Residents were present in the home without staff supervision.

INVESTIGATION: On 5/12/22, I made an unannounced onsite investigation to the facility next door, Angel Care Adult Foster Home II (AS410397772), which has the same licensee, Yeshi Bedada. During that investigation, it was brought to my attention that Ms. Bedada was sharing staff between the two facilities (Angel Care Adult Foster Home II - AS410397772 and Angel Care Adult Foster Home III AS410397841). “Sharing staff” was explained to mean that only one person was working and covering both homes simultaneously, leaving one of the homes without a staff person present. While waiting to speak to Mrs. Bedada, I observed two male residents exiting the facility, Resident A and B. I spoke with Resident A and B and both stated that there is currently no staff present at the home. However, Mrs. Bedada was at the home earlier today. Resident A and B then allowed entry into the home, where I was able to confirm that there was in fact no staff members present.

After observing residents were in the facility alone, I spoke to Mrs. Bedada. Mrs. Bedada acknowledged that she is working at both homes by herself right now, meaning that she was going back and forth between the two to check on residents. Mrs. Bedada stated that her staff member Mr. Benzo is working in this facility today but she sent him to the store. I explained to Mrs. Bedada that it is a violation of licensing rule 206(1) for residents to be left alone at any time and if there are residents in the home, there must always be a staff member present. Mrs. Bedada stated that she understands.

On 5/25/22, I made an unannounced onsite investigation to the facility. Upon arrival, I spoke to Resident A. He recalled speaking to me at the facility on 5/12/22.

Resident A confirmed that there was no staff present in the home. I asked Resident A how often he and the other residents are at the home without staff and he stated, “every day of the week.” Resident A stated that in the morning, Mrs. Bedada gives the residents their medication and breakfast. After doing so, Mrs. Bedada “takes off to her other AFC and returns around noon” during lunch. Resident A stated that Mrs. Bedada feeds the residents and leaves the home again for a few hours. Resident A stated that there is another male staff member who cleans the home and “he comes over once in a while.” He was unable to give a more specific time frame. Resident A also stated that Mrs. Bedada’s husband will come over “once in a while.”

After speaking to Resident A, I spoke to Resident B. He recalled speaking to me at the facility on 5/12/22 as well. Resident B stated that he and the other residents are in the home without staff “pretty much daily” due to Mrs. Bedada having to get shopping done. I asked Resident B what a typical day looks like at the home, and he stated that Mrs. Bedada will get breakfast, medications, and other necessities to residents for the day. Resident B stated that Mrs. Bedada “usually leaves right after breakfast every day.” Resident B stated that Mrs. Bedada returns to the home around lunch time, which he stated is between 1:00 pm and 2:00 pm. After the residents eat lunch, Resident B stated that Mrs. Bedada leaves the home again and returns for dinner. Resident B stated that there is normally no staff at the facility at night and Mrs. Bedada sleeps at the facility next door.

On 5/25/22, I called Mrs. Bedada’s employee, Mr. Benzo and spoke to him via phone. Mr. Benzo stated that he worked at the home yesterday from 6:00 pm to 8:00 pm with Ms. Bedada’s husband. He denied that he’s had to work at the home by himself. It should be noted that there was a language barrier and it was difficult to understand Mr. Benzo. I asked Mr. Benzo to spell his full name but I could not understand him.

On 06/07/2022 I conducted an exit conference with licensee designee, Yeshi Bedada. She was informed of the investigative findings and agreed to complete a CAP within 15 days.

APPLICABLE RULE	
R 400.14206	**Staffing requirements.**
	(1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 12 residents and children who are under the age of 12 years.
ANALYSIS:	On 5/12/22, Resident A and B confirmed that they were in the home without any staff present.

	On 5/25/22, I made an unannounced onsite visit to the facility and confirmed that residents were home without a staff member present. Resident A and B both stated that the residents are left home daily without staff. Ms. Bedada acknowledged that she was working at both of her AFC homes simultaneously by herself. Therefore, a preponderance of evidence exists to support the allegation. It should be noted that this facility was cited for leaving residents in the home unsupervised during a scheduled renewal inspection on 12/9/21. It has been less than six months since Mrs. Bedada was cited for the same rule violation and she has yet to rectify the issue. Therefore, it is recommended that the facility receives a six-month provisional license due to a repeated violation.
CONCLUSION:	**REPEAT VIOLATION ESTABLISHED** **(Renewal Inspection Report 12/17/21)**

ADDITIONAL FINDINGS:

INVESTIGATION: While investigating the allegations listed above, Mrs. Bedada stated that she did not know the last name of her employee, who she referred to as "Benzo." Due to this, I made a 2nd unannounced onsite investigation to the facility on 5/25/22 at or around 4:50 pm in attempt to review Mr. Benzo's staff file. Upon arrival, I knocked on the door. Resident A opened the door and stated that Mrs. Bedada was not present. He also confirmed that there were no other staff present in the home. Therefore, I was unable to review Mr. Benzo's employee file.

On 5/26/22, I emailed Mrs. Bedada requesting verification of the following trainings for Mr. Benzo: First aid, CPR, Resident Rights, Safety and fire prevention. On the same day, I called Mrs. Bedada and asked if she had received my email. Mrs. Bedada stated that she had not and that she would review it and call me back. Mrs. Bedada returned my call and confirmed that Mr. Benzo has not completed the requested trainings, including reporting requirements, personal care, supervision, and protection, and prevention and containment of communicable diseases. I explained to Mrs. Bedada that all staff are required to complete these trainings prior to being assigned job duties. Mrs. Bedada stated that she understands, and that Mr. Benzo has not completed said trainings because of his availability.

On 06/07/2022, I conducted an exit conference with licensee designee, Yeshi Bedada. She was informed of the investigative findings and agreed to complete a CAP within 15 days.

APPLICABLE RULE	
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: **(a) Reporting requirements.** **(b) First aid.** **(c) Cardiopulmonary resuscitation.** **(d) Personal care, supervision, and protection.** **(e) Resident rights.** **(f) Safety and fire prevention.** **(g) Prevention and containment of communicable diseases.**
ANALYSIS:	Mrs. Bedada confirmed that her employee, Mr. Benzo has not completed all of the trainings listed above. Therefore, there is a preponderance of evidence to support the allegation.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: While investigating the allegations listed above, Mrs. Bedada acknowledged during a 5/26/22 phone call that she did not have a statement from Mr. Benzo's physician attesting to the knowledge of his physical health as required by licensing. Mr. Benzo has been employed at the facility for a few months and this has yet to be addressed.

On 06/07/2022, I conducted an exit conference with licensee designee, Yeshi Bedada. She was informed of the investigative findings and agreed to complete a CAP within 15 days.

APPLICABLE RULE	
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.
ANALYSIS:	Mrs. Bedada confirmed that her employee, Mr. Benzo does not have a signed statement by his physician attesting to the knowledge of his physical health. Therefore, a preponderance of evidence exists to support the allegation.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION: While investigating the allegations listed above, Mrs. Bedada acknowledged during a 5/26/22 phone call that her staff member, Mr. Benzo has not completed a TB test. Mr. Benzo has been employed at the facility for a few months and this has yet to be addressed.

On 06/07/2022, I conducted an exit conference with licensee designee, Yeshi Bedada. She was informed of the investigative findings and agreed to complete a CAP within 15 days.

APPLICABLE RULE	
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.
ANALYSIS:	Mr. Bedada stated that Mr. Benzo has not completed a TB test since his employment started at the facility. Therefore, a preponderance of evidence exists to support the allegation.
CONCLUSION:	**VIOLATION ESTABLISHED**

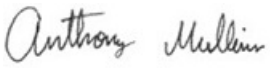
INVESTIGATION: While investigating the allegations listed above, Mrs. Bedada acknowledged during a 5/26/22 phone call that her staff member, Mr. Benzo has not completed a background check, which is required by licensing.

On 06/07/2022, I conducted an exit conference with licensee designee, Yeshi Bedada. She was informed of the investigative findings and agreed to complete a CAP within 15 days.

APPLICABLE RULE	
R 400.14201	**Qualifications of administrator, direct care staff, licensee, and members of the household; provision of names of employee, volunteer, or member of the household on parole or probation or convicted of felony; food service staff.**
	(10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.
ANALYSIS:	Mrs. Bedada acknowledged that her staff member, Mr. Benzo has not completed a background check/record clearance prior to and during his employment. Therefore, a preponderance of evidence does exist to support the allegation.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended for the above-cited quality of care violations.



06/07/2022

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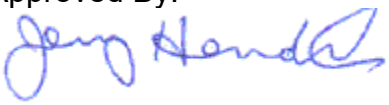
Anthony Mullins — Date
Licensing Consultant

Approved By:



06/07/2022

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Jerry Hendrick — Date
Area Manager