



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

August 2, 2022

Dwayne Barrett  
PO Box 43-1511  
Pontiac, MI 48343

RE: License #: AS630074426  
**Shirley Street Home**  
**37 South Shirley**  
**Pontiac, MI 48342**

Dear Mr. Barrett:

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 cursive script that reads "Johnna Cade".

Johnna Cade  
Cadillac Place  
3026 W. Grand Blvd. Ste 9-100  
Detroit, MI 48202  
Phone: 248-302-2409

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630074426
<b>Licensee Name:</b>	Dwayne Barrett
<b>Licensee Address:</b>	713 Saint Andrews Ct. Pontiac, MI 48340
<b>Licensee Telephone #:</b>	(248) 253-1632
<b>Administrator:</b>	Dwayne Barrett
<b>Name of Facility:</b>	Shirley Street Home
<b>Facility Address:</b>	37 South Shirley Pontiac, MI 48342
<b>Facility Telephone #:</b>	(248) 396-7722
<b>Original Issuance Date:</b>	05/06/1997
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 07/13/2022

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 0

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: Licensee

- 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.  
Renewal was not completed 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.  
There were no incident reports
- 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>R 400.14204</b>	<b>Direct care staff; qualifications and training.</b>
	<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> <ul style="list-style-type: none"> <li>(a) Reporting requirements.</li> <li>(b) First aid.</li> <li>(c) Cardiopulmonary resuscitation.</li> <li>(e) Resident rights.</li> <li>(f) Safety and fire prevention.</li> </ul>

During the onsite inspection completed on 07/13/22, there was no proof that direct care staff, Dewayne Barrett completed the following trainings: reporting requirements, resident rights, and/or safety and fire prevention. Additionally, his first aid training expired on 12/01/21 and his cardiopulmonary resuscitation (CPR) training expired on 03/07/22.

<b>R 400.14205</b>	<b>Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.</b>
	<p>(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.</p>

During the onsite inspection completed on 07/13/22, there was no proof that direct care staff, Dewayne Barrett completed a health review within 30 days of hire.

<b>R 400.14205</b>	<b>Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.</b>
	<p>(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members</p>

	of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.
--	--

During the onsite inspection completed on 07/13/22, there was no proof of an annual health review completed for direct care staff, Dewayne Barrett.

<b>R 400.14207</b>	<b>Required personnel policies.</b>
	(2) The written policies and procedures identified in subrule (1) of this rule shall be given to employees and volunteers at the time of appointment. A verification of receipt of the policies and procedures shall be maintained in the personnel records.

During the onsite inspection completed on 07/13/22, direct care staff, Dewayne Barrett's personnel record did not contain proof that he had received a copy of the written policies and procedures.

<b>R 400.14207</b>	<b>Required personnel policies.</b>
	(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individuals personnel record.

During the onsite inspection completed on 07/13/22, direct care staff, Dewayne Barrett's employee file did not contain a copy of his job description and/or verification that he had received a copy of his job description.

<b>R 400.14208</b>	<b>Direct care staff and employee records.</b>
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: <ul style="list-style-type: none"> <li>(a) Name, address, telephone number, and social security number.</li> <li>(b) The professional or vocational license, certification, or registration number, if applicable.</li> <li>(c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.</li> <li>(d) Verification of the age requirement.</li> <li>(e) Verification of experience, education, and training.</li> <li>(f) Verification of reference checks.</li> <li>(g) Beginning and ending dates of employment.</li> </ul>

	<p>(h) Medical information, as required.</p> <p>(i) Required verification of the receipt of personnel policies and job descriptions.</p>
--	--

In direct care staff, Dewayne Barrett's personnel record there was no verification of his address, telephone number, social security number, a copy of his driver license, verification of his age, verification of completed reference checks and/or verification of the receipt of personnel policies and job descriptions.

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

During the onsite inspection completed on 07/13/22, there was no health care appraisal completed for Resident B in 2021.

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(11) A licensee shall contact a resident's physician for instructions as to the care of the resident if the resident requires the care of a physician while living in the home. A licensee shall record, in the resident's record, any instructions for the care of the resident.

The licensee reported Resident A and Resident B regularly see a physician for mental and physical health. During the onsite inspection completed on 07/13/22, there were no physician instructions and contacts recorded in Resident A and/or Resident B's record.

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(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.

Resident B's Resident Care Agreement completed in 2021 and 2022 were not signed by his designated representative.

<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 completed on 07/13/22, the licensee stated that on occasion there are substitutions made to the posted menu. However, the substitutions have not been documented.

<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	(5) All resident funds, which includes bank accounts, shall be kept separate and apart from all funds and monies of the licensee. Interest and dividends earned on resident funds shall be credited to the resident. Payments for care for the current month may be used by the licensee for operating expenses.

Resident A's funds (\$120) are kept in the licensee's business account.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

During the onsite inspection completed on 07/13/22, the window in bedroom # 2 was jammed/stuck and would not open.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.



---

During the onsite inspection completed on 07/13/22, the paint on the wall in bedroom # 5 was scratched/damaged requiring repainting. The wall in the shower in the upstairs bathroom was patched and needs to be painted. The tub and toilet in the upstairs bathroom need to be cleaned.

**IV. RECOMMENDATION**

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



07/15/2022

---

Johnna Cade  
Licensing Consultant

Date