

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

Cornelius and Shima Murmu 8729 Kephart Lane Berrien Springs, MI 49103 July 19, 2022

RE: License #: AF110000683 Investigation #: 2022A1030049

Shimas AFC Home

Dear Mr. and Mrs. Murmu:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations 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 each rule will be achieved.

Please reimburse the resident's payee for the months of rent paid after he passed away.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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,

Nile Khabeiry, Licensing Consultant

We Khaberry, LMSW

Bureau of Community and Health Systems

350 Ottawa, N.W. Unit 13, 7th Floor

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 #:	AF110000683	
Investigation #:	2022A1030049	
Investigation #:	2022A 1030049	
Complaint Receipt Date:	06/24/2022	
Investigation Initiation Date:	06/27/2022	
Deport Due Deter	07/04/0000	
Report Due Date:	07/24/2022	
Licensee Name:	Cornelius and Shima Murmu	
Licensee Address:	8729 Kephart Lane	
	Berrien Springs, MI 49103	
Licensee Telephone #:	(269) 471-9358	
Electroce relephone #.	(200) 47 1 0000	
Licensee Designee:	Cornelius Murmu	
Name of Facility:	Shimas AFC Home	
Facility Address:	8729 Kephart Lane	
r demity / tadi eee.	Berrien Springs, MI 49103	
Facility Telephone #:	(269) 362-4997	
Original Issuance Date:	05/20/1985	
Original issuance bate.	03/20/1000	
License Status:	1ST PROVISIONAL	
Effective Date:	02/08/2022	
Expiration Date:	08/07/2022	
Expiration bato.	00/01/2022	
Capacity:	6	
Program Type:	PHYSICALLY HANDICAPPED	
	MENTALLY ILL AGED	
	7.025	

II. ALLEGATION(S)

Violation Established?

Licensee did not notify Resident A's representative of his death.	Yes
Licensee failed to notify the Attorney General of Resident A's death.	Yes
Additional Findings	No

III. METHODOLOGY

06/24/2022	Special Investigation Intake 2022A1030049
06/27/2022	Special Investigation Initiated - Telephone Interviewed the complainant by phone.
06/28/2022	Contact - Face to Face Interview with licensee
06/28/2022	Exit Conference Exit conference with licensee

ALLEGATION:

Licensee did not notify Resident A's representative of his death.

INVESTIGATION:

On 6/27/22, I interviewed Resident A's Representative Payee (RP) by phone. The RP reported she received a letter from the Social Security Administration offering her condolences of Resident A's death. The RP reported she believes Resident A died on 4/1/22 and she the licensee needs to reimburse the rent paid for April, May and June.

On 6/27/22, I received and reviewed a letter written to the Licensee from the RP. The letter instructed the licensee to reimburse the sum of \$2,722.50 for the rent paid for the months of April, May and June.

On 6/28/22, I interviewed the Licensee at the home. The Licensee reported he did not notify Resident A's RP within 48 hours after he passed away. The Licensee disputed

the day Resident A died and indicted he died on 4/29/22. The Licensee reported he thought that "everyone would be notified" when he died and the RP was aware of his death. The Licensee reported Resident A's rent is "directly deposited" into his account and will return the rent "maybe this week or next week."

APPLICABLE RULE	
R 400.1416	Resident health care.
	 (4) A licensee shall make a reasonable attempt to contact the resident's next of kin, designated representative, and responsible agency by telephone, followed by a written report to the resident's designated representative and responsible agency within 48 hours of the following: (a) The death of a resident.
ANALYSIS:	The Licensee admitted he did not notify Resident A's RP when Resident A passed away in April 2022.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Licensee did not notify the Attorney General of Resident A's death.

INVESTIGATION:

The Licensee reported he did not notify the Attorney General no later than ten business days. The Licensee reported he was unaware of his obligation to report a resident death to the Attorney General.

APPLICABLE I	RULE
R 400.1421	Handling of resident funds and valuables.
	(42) A license chall report the deeth of a regident in writing
	(13) A licensee shall report the death of a resident in writing
	to the public administrator of the Michigan Department of
	Attorney General, 1800 Michigan Plaza Building, 1200 Sixth
	Street, Detroit, Michigan 48226, not later than 10 calendar
	days following the death of the resident.

ANALYSIS:	The Licensee admitted he did not notify Resident A's RP when Resident A passed away in April 2022.
CONCLUSION:	VIOLATION ESTABLISHED

On 6/28/22, I informed the Licensee of my findings and that he would be cited. The licensee acknowledged the rule violations.

IV. RECOMMENDATION

Contingent upon an acceptable corrective action plan, I recommend no change to the status of the license.

We Khaberry, LMSW	8/3/2022
Nile Khabeiry Licensing Consultant	Date
Approved By:	7/19/22
Russell B. Misiak Area Manager	Date