

GRETCHEN WHITMER
GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 30, 2022

Scott Brown Renaissance Community Homes Inc P.O. Box 749 Adrian, MI 49221

RE: License #: AS810255078

Clark Road Home 510 W. Clark Road Ypsilanti, MI 48197

#### Dear Mr. Brown:

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 (313) 456-0380.

Sincerely,

Vanon Beullin

Vanita C. Bouldin, Licensing Consultant Bureau of Community and Health Systems 22 Center Street Ypsilanti, MI 48198 (734) 395-4037

> 611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909 www.michigan.gov/lara • 517-335-1980

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

#### I. IDENTIFYING INFORMATION

**License #:** AS810255078

**Licensee Name:** Renaissance Community Homes Inc

Licensee Address: Suite C

1548 W. Maume St. Adrian, MI 49221

**Licensee Telephone #:** (734) 439-0464

Licensee/Licensee Designee: Scott Brown

Administrator: Scott Brown

Name of Facility: Clark Road Home

Facility Address: 510 W. Clark Road

Ypsilanti, MI 48197

**Facility Telephone #:** (734) 961-7822

Original Issuance Date: 05/15/2003

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

### **II. METHODS OF INSPECTION**

Date of	of On-site Inspection(	s): 08/30/2022	
Date of Bureau of Fire Services Inspection if applicable: N/A			
Date of Environmental/Health Inspection if applicable: N/A			
Inspe	ction Type:	☐ Interview and Observa☐ Combination	ition ⊠ Worksheet □ Full Fire Safety
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:			
N	Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. No due to COVID-19.  Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain		
Υ	Resident funds and associated documents reviewed for at least one resident? Yes $\boxtimes$ No $\square$ If no, explain. Meal preparation / service observed? Yes $\boxtimes$ No $\square$ If no, explain.		
• F	Fire drills reviewed? Yes ⊠ No □ If no, explain.		
• F	Fire safety equipment and practices observed? Yes $\boxtimes$ No $\square$ If no, explain.		
lf	E-scores reviewed? (Special Certification Only) Yes  No N/A Street No No N/A Street No No N/A N/A No N/A		
• C	lo follow-up needed. Corrective action plan N/A ⊠	up? Yes ☐ No ☒ If no, e	CAP date/s and rule/s:
• N	lumber of excluded e	mployees followed-up?	N/A 🖂
• V	/ariances? Yes ☐ (p	lease explain) No N/A	$\boxtimes$

#### **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

This facility was found to be in non-compliance with the following rules:

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.

Staff member, EW, start date was noted as 03/17/2020 and in-service training not completed until 04/06/2020 (Personal Care/Supervision/Protection, Resident Rights, Safety and Fire Prevention)

Date: 08/30/2022

#### IV. RECOMMENDATION

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

Vanita C. Bouldin Licensing Consultant

Vanon Beullin

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