



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 4, 2022

Lorna Cheatham
Citizens Alternative Residential Svs., Inc.
481 Virginia Court
Canton, MI 48187

RE: License #: AS820283908
Springhill Manor
3748 Springhill
Inkster, MI 48141

Dear Ms. Cheatham:

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,

A handwritten signature in black ink, appearing to read "D Walker".

Denasha Walker, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 300-9922

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

I. IDENTIFYING INFORMATION

License #: AS820283908

Licensee Name: Citizens Alternative Residential Svs., Inc.

Licensee Address: 481 Virginia Court
Canton, MI 48187

Licensee Telephone #: (734) 777-3914

Licensee/Licensee Designee: Lorna Cheatham

Administrator: Lorna Cheatham

Name of Facility: Springhill Manor

Facility Address: 3748 Springhill
Inkster, MI 48141

Facility Telephone #: (734) 777-3914

Original Issuance Date: 02/27/2007

Capacity: 5

Program Type: MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/04/2022

Date of Bureau of Fire Services Inspection if applicable:

Date of Environmental/Health Inspection if applicable:

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 0
No. of others interviewed 1 Role: licensee designee

- Medication pass / simulated pass observed? Yes No If no, explain.
A full worksheet inspection was completed.
- 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.
All residents were at day program at the time of inspection. No meal preparation/service was observed.
- 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:
CAP Dated 08/072020 R 400.14403 (1), R 40.14403 (3) 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:

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.

At the time of inspection, direct care staff Justina Williams employee file contained written evidence that she was tested for communicable tuberculosis on 11/20/2020 but did not include the test results.

According to Lorna Cheatham, Justina was tested on 11/20/2020, but forgot to go back for her test results, which is why she was tested again on 2/25/21.

There was written evidence Justina was tested for communicable tuberculosis on 2/25/2021, the test results were negative.

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.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

At the time of inspection, direct care staff Justina Williams employee file did not contain an annual 2021 health review.

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

(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.

At the time of inspection:

- Resident A's health care appraisal was not completed within 30 days after admission, she was an emergency admission.
- Resident B's resident file did not contain an annual 2021 health care appraisal.

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

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

At the time of inspection:

- Resident A's assessment plan at the time of admission in 2021 and her annual 2022 were not signed by her designated representative.
- Resident B's assessment plan at the time of admission in 2020, and her annual 2021 were not signed by her designated representative.

*It should be noted that "sent to guardian" and the date was handwritten on the above documents, but the documents were never obtained.

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

(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.

At the time of inspection:

- Resident A's resident care agreement at the time of admission in 2021 and her annual 2022 were not signed by her designated representative.
- Resident B's assessment plan at the time of admission in 2020, and her annual 2021 were not signed by her designated representative.

*It should be noted that "sent to guardian" and the date was handwritten on the above documents, but the documents were never obtained.

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:

- (d) Health care information, including all of the following:
 - (i) Health care appraisals.
 - (ii) Medication logs.

- (iii) Statements and instructions for supervising prescribed medication, including dietary supplements and individual special medical procedures.
- (iv) A record of physician contacts.
- (v) Instructions for emergency care and advanced medical directives.

At the time of inspection, Residents A and B's medication logs were not maintained for department review.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

At the time of inspection, emergency and evacuation procedures during daytime, evening, and sleeping hours were not completed at least once per quarter.

The following fire drills were not completed:

- 2020 evening drill during the 3rd quarter.
- 2020 sleep drill during the 2nd quarter.
- 2021 evening drill during the 3rd quarter.
- 2022 evening drill during the 1st quarter.
- 3/2/2022 sleep drill did not contain evacuation time.

R 400.14403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

At the time of inspection, the fire door was not equipped with an automatic self-closing device and remains ajar.

***REPEAT VIOLATION ESTABLISHED* LSR DATED 8/06/2020; CAP DATED 8/07/2020.**

R 400.14403 Maintenance of premises.

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

At the time of inspection, the screen door in the office area of the home was not weathertight or in good repair.

According to Lorna Cheatham, the maintenance man is aware, and it will be repaired.

R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

At the time of inspection, I observed a hole in the ceiling located in the office area of the home.

According to Lorna Cheatham, the maintenance man is aware, and it will be repaired.

IV. RECOMMENDATION

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



08/05/2022

Denasha Walker
Licensing Consultant

Date