



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 15, 2022

Javon Brown
38855 Plumbrook Dr.
Farmington Hills, MI 48331

RE: License #: AS630404326
New Beginnings
32999 W 14 Mile Rd.
Farmington Hills, MI 48334

Dear Ms. 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.

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 within 15 days.

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

License #:	AS630404326
Licensee Name:	Javon Brown
Licensee Address:	32999 W. 14 Mile Farmington Hills, MI 48334
Licensee Telephone #:	(734) 658-0632
Administrator:	Yolanda Matthews
Name of Facility:	New Beginnings
Facility Address:	32999 W 14 Mile Rd. Farmington Hills, MI 48334
Facility Telephone #:	(248) 506-5891
Original Issuance Date:	01/13/2022
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/06/2022

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 1
No. of residents interviewed and/or observed 0
No. of others interviewed 2 Role: Licensee and Administrator

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
During the onsite inspection completed on 07/06/22, there were no medication administrations records on file at the home to use during a medication/ simulated medication pass therefore, one was not observed.
- Medication(s) and medication record(s) reviewed? Yes ☐ No ☒ If no, explain.
During the onsite inspection completed on 07/06/22, there were no medication administrations records available for review
- Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ☒ If no, explain. During the onsite inspection completed on 07/06/22, there were no resident funds and/or associated documents on site and available for review.
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain.
The onsite inspection was not completed during meal time.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
During the onsite inspection completed on 07/06/22, there were no fire drills completed and/or available for review.
- 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: 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:

MCL 400.734b	Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.
	(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer

	exempt and shall be terminated from employment or denied employment.
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Fingerprinting was not completed through the workforce background check for the administrator, Yolanda Matthews and/or direct care staff, DeAndre Lenard.

R 400.14204	Direct care staff; qualifications and training.
	<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"> (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.

During the onsite inspection completed on 07/06/22, there was no employee file for the administrator, Yolanda Matthews and/or direct care staff, DeAndre Lenard on site and available for review. As such, all employee qualifications and training were unable to be confirmed.

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.
	<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 07/06/22, there was no record of a health review completed within 30 days of hire for the administrator, Yolanda Matthews and/or direct care staff, DeAndre Lenard.

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.

During the onsite inspection completed on 07/06/22, there was no proof of tuberculosis testing for the administrator, Yolanda Matthews and/or direct care staff, DeAndre Lenard.

R 400.14207	Required personnel policies.
	(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 07/06/22, there were no written job descriptions for each position. Additionally, each employee did not have an individual personnel record onsite and available for review that contained verification of receipt of a job description.

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

	<ul style="list-style-type: none"> (g) Beginning and ending dates of employment. (h) Medical information, as required. (i) Required verification of the receipt of personnel policies and job descriptions.
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During the onsite inspection completed on 07/06/22, there were no employee files on site and available for review for the administrator, Yolanda Matthews and/or direct care staff, DeAndre Lenard.

R 400.14210	Resident register.
	<p>A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:</p> <ul style="list-style-type: none"> (a) Date of admission. (b) Date of discharge. (c) Place and address to which the resident moved, if known.

During the onsite inspection completed on 07/06/22, there was no resident register on site and available for review. The licensee reported on had not been completed since the original license was obtained for this facility on 01/13/2022.

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

During the onsite inspection completed on 07/06/22, there was no written health care appraisals on site for Resident A, Resident B, Resident C and/or Resident D.

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

During the onsite inspection completed on 07/06/22, there was no record of physician contacts on site for Resident A, Resident B, Resident C and/or Resident D.

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.

During the onsite inspection completed on 07/06/22, there was no written assessment plan on site for Resident A, Resident B, Resident C, and/or Resident D.

R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following: (a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.

	<p>(b) A description of services to be provided and the fee for the service.</p> <p>(c) A description of additional costs in addition to the basic fee that is charged.</p> <p>(d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.</p> <p>(e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.</p> <p>(f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.</p> <p>(g) An agreement by the resident to follow the house rules that are provided to him or her.</p> <p>(h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.</p> <p>(i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.</p> <p>(j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.14315.</p> <p>(k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.</p> <p>(l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.</p>
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During the onsite inspection completed on 07/06/22, there was no resident care agreement on site and available for review for Resident A, Resident B, Resident C, and/or Resident D.

R 400.14306	Use of assistive devices.
	(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

During the onsite inspection completed on 07/06/22, it was reported by the licensee that Resident A uses a wheelchair and Resident C has a hospital bed. There were no prescriptions on file for any assistive devices.

R 400.14310	Resident health care.
	(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

During the onsite inspection completed on 07/06/22, there were no weight records for Resident A, Resident B, Resident C, and/or Resident D on site and available for review. The licensee reported no weight records for any of resident have been completed since the original license was obtained for this facility on 01/13/2022.

R 400.14312	Resident medications.
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

During the onsite inspection completed on 07/06/22, two prescription medications (Ketoconazole Shampoo 2% and Hydrocortisone cream USP, 2.5%) were found in Resident B's bedroom sitting on her dresser. These medications were not locked in a cabinet or drawer.

R 400.14312	Resident medications.
	<p>(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <ul style="list-style-type: none"> (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

	(vi) A resident's refusal to accept prescribed medication or procedures.
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During the onsite inspection completed on 07/06/22, there were no current or historical medication administration records on site for Resident A, Resident B, Resident C, and/or Resident D. The licensee reported having no medication records for any resident since the original license was obtained for this facility on 01/13/2022.

R 400.14312	Resident medications.
	(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

During the onsite inspection completed on 07/06/22, there were several prescription medications in the medication cabinet for residents who no longer reside in the home.

R 400.14313	Resident nutrition.
	(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.

The administrator, Yolanda Matthews stated weekly menus are posted in the home, but on occasion substitutions to the menu have been made. During the onsite inspection completed on 07/06/22, there was no record of the substitutions onsite and available for review.

R 400.14315	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department 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 07/06/22, there was no resident funds and valuables forms for Resident A, Resident B, Resident C and/or Resident D on site and available for review.

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

	<p>information as required by the department. A resident record shall include, at a minimum, all of the following information:</p> <ul style="list-style-type: none"> (a) Identifying information, including, at a minimum, all of the following: <ul style="list-style-type: none"> (i) Name. (ii) Social security number, date of birth, case number, and marital status. (iii) Former address. (iv) Name, address, and telephone number of the next of kin or the designated representative. (v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home. (vi) Name, address, and telephone number of the preferred physician and hospital. (vii) Medical insurance. (viii) Funeral provisions and preferences. (ix) Resident's religious preference information. (b) Date of admission. (c) Date of discharge and the place to which the resident was discharged. (d) Health care information, including all of the following: <ul style="list-style-type: none"> (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. (e) Resident care agreement. (f) Assessment plan. (g) Weight record. (h) Incident reports and accident records. (i) Resident funds and valuables record and resident refund agreement. (j) Resident grievances and complaints.
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During the onsite inspection completed on 07/06/22, the licensee did not have separate records for each resident that contained all the required information. Each resident had a manila folder with their name written on it. The folders contained miscellaneous documents. The information in each folder was not consistent with one another. The folders did not contain any required information or any Adult Foster Care licensing forms.

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.

During the onsite inspection completed on 07/06/22, there was no record of practice emergency and evacuation drills on site. The licensee reported practice evacuations have not been conducted since obtaining the original license at this facility on 01/13/2022.

R 400.14401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

During the onsite inspection completed on 07/06/22, the water temperature in the bathroom was 130 degrees Fahrenheit. The water temperature in the kitchen was 136.6 degrees Fahrenheit.

R 400.14401	Environmental health.
	(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.

During the onsite inspection completed on 07/06/22, the garbage can in the dining room did not have a lid.

R 400.14401	Environmental health.
	(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.

During the onsite inspection completed on 07/06/22, there were cleaning supplies in both resident bathrooms that were not safeguarded.

R 400.14401	Environmental health.
	(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

During the onsite inspection completed on 07/06/22, there was no screen in Resident A and Resident D's bedroom window.

R 400.14403	Maintenance of premises.
	(10) Scatter or throw rugs on hard finished floors shall have a nonskid backing.

During the onsite inspection completed on 07/06/22, the rug in the hallway bathroom did not have a nonskid backing.

R 400.14403	Maintenance of premises.
	(13) A yard area shall be kept reasonably free from all hazards, nuisances, refuse, and litter.

During the onsite inspection completed on 07/06/22, the perimeter of the patio had several loose stones that presented as a trip hazard.

R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

During the onsite inspection completed on 07/06/22:

- There was a broken chair on the patio
- The inside of the oven door was covered in thick grease
- The walls in the kitchen were unclean
- The wall in the addition that has a window has many scratches and chipped paint
- The threshold in the doorway of Resident A's bedroom is in poor repair

- The closet doorknob in Resident A's bedroom is broken
- Air vents throughout the home are covered in thick dust.

R 400.14506	Fire extinguishers; location, examination, and maintenance.
	(2) Fire extinguishers shall be examined and maintained as recommended by the manufacturer.

During the onsite inspection completed on 07/06/22, I observed that the fire extinguisher in the laundry room was last maintenance in 2013.

RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.




07/15/2022

Johnna Cade
Licensing Consultant

Date

Approved by:



07/15/2022

Denise Y. Nunn
Area Manager

Date