



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 13, 2022

Everlyne Ajowi
2689 E. Snow Rd
Berrien Springs, MI 49103

RE: License #: AF110380176
Investigation #: 2023A0579016
Old Farm Living

Dear Everlyne Ajowi:

Attached is the Special Investigation Report for the above referenced facility. Due to the severity of the violations, disciplinary action against your license is recommended. You will be notified in writing of the department's action and your options for resolution of this matter.

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,

A handwritten signature in cursive script that reads "Cassandra Duursma".

Cassandra Duursma, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(269) 615-5050

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AF110380176
Investigation #:	2023A0579016
Complaint Receipt Date:	12/13/2022
Investigation Initiation Date:	12/13/2022
Report Due Date:	01/12/2023
Licensee Name:	Everlyne Ajowi
Licensee Address:	2689 E. Snow Rd Berrien Springs, MI 49103
Licensee Telephone #:	(614) 316-6958
Administrator:	N/A
Licensee Designee:	N/A
Name of Facility:	Old Farm Living
Facility Address:	2689 E. Snow Rd Berrien Springs, MI 49103
Facility Telephone #:	(614) 570-7322
Original Issuance Date:	07/22/2016
License Status:	REGULAR
Effective Date:	01/23/2021
Expiration Date:	01/22/2023
Capacity:	6
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
The licensee does not live at the home.	Yes
Employee health screenings are no completed.	Yes
Resident assessment plans are not signed.	Yes
Resident Care Agreements are not signed.	Yes
Discharge notices were not served to Resident G and H.	Yes
Resident funds paperwork is not completed.	Yes
Additional Findings	Yes

III. METHODOLOGY

12/13/2022	Special Investigation Intake 2023A0579016
11/29/2022	Contact- Documentation received Allegations received.
11/29/2022	Contact- Documentation received Internet search completed.
11/30/2022	Special Investigation Initiated-Face to Face Sulaiman Basir, Household Member Resident A, B, C, D, E, F, G, H
12/13/2022	Contact- Documentation receive File review.
12/19/2022	Exit conference Everlyne Ajowi, Licensee Sulaiman Basir, Household Member

ALLEGATION:

The licensee does not live at the home.

INVESTIGATION:

On 11/29/22, I received allegations that household member Sulaiman Basir is the only one living in the home and operating the home for licensee Everlyne Ajowi.

On 11/29/22, I completed an Internet search for Ms. Ajowi, as it was previously reported during an on-site visit that she works as a nurse in Ohio. The Ohio State University (OSU) employee website listed Ms. Ajowi as employed in OSU Health System- University Hospital East as a Registered Nurse. I accessed Ohio's online license verification that listed Ms. Ajowi as a Registered Nurse in Gahanna, OH which is a suburb of Columbus, OH. I used the Michigan and Indiana licensing look-up to confirm Ms. Ajowi does not have a nursing license in Michigan or Indiana. I observed Ms. Ajowi's LinkedIn profile which listed her as living in Columbus, OH. I utilized multiple address verification websites, including nuwber.com, spokeo.com, and whitepages.com which all list Ms. Ajowi as living in Columbus, OH. I confirmed Ms. Ajowi is the Resident Agent for Amani Health Services LLC, which is based out of Columbus, OH whereas Mr. Basir is the Resident Agent for Amani Fostercare LLC which is licensed in Michigan. I used Bing Maps to confirm the distance between this AFC home and the personal home address listed for Ms. Ajowi in Gahanna, OH is between 298-305 miles and takes approximately 4 hours and 43 minutes to 4 hours and 50 minutes and the distance between this AFC home and her employment is 296-307 miles and takes approximately 4 hours and 41 minutes to 4 hours and 54 minutes.

On 11/30/22, I completed an unannounced on-site investigation at the home. Direct care worker Ialianlaina Nirina was present. She reported she needed to speak to the "owner" of the home prior to providing me with any information. She called Mr. Basir.

I spoke to Mr. Basir on the telephone for approximately 10 minutes until Mr. Basir arrived on-site. Mr. Basir reported he is the only household member of this home. He denied Ms. Ajowi regularly working in the home and reported "she comes in whenever." He stated "if she comes to the home" then she will "stay all day" or several days since her employer and her home is in Columbus, OH. Mr. Basir confirmed Ms. Ajowi is a Registered Nurse teaching at OSU and working for Franklin County, which is the county the city of Columbus is located in.

Mr. Basir provided a doctor's statement for Ms. Ajowi which was addressed to her home in Gahanna, OH.

While I was at the home, I observed the second story living quarters. There was one room with a couch, one room that Mr. Basir reported was his and reported it only

appeared not lived in because he is a “busy man”, and there was a second room with a bed lacking any bedding that also did not appear lived in.

I reviewed resident documentation and found Mr. Basir’s signature was often the only signature on resident documentation including care agreements and assessment plans.

On 12/13/22, I reviewed the case file for this home which confirmed I have not met with Ms. Ajowi on-site during an inspection or investigation since the first time I came to the home on 1/9/19. I completed a virtual renewal and exit conference with Ms. Basir on 11/30/20 due to concerns for COVID-19. I completed an on-site renewal inspection and exit conference with Mr. Basir on 10/10/22. I completed investigation 2020A0579036 on 8/10/20. During that investigation, I made unannounced contact with Mr. Basir on-site. An exit conference was completed with Ms. Ajowi via telephone.

On 12/19/22, Ms. Ajowi confirmed she has employment and a residence in Columbus, Ohio which she confirmed is approximately four hours from this home. She advised she lives in this home and rents her home in Columbus. She initially stated she does not have a regular schedule for when she works and is in the home. She stated she works and stays in the home approximately every two weeks. She then later stated she is in the home one time a week for days at a time, only working in Columbus three days a week.

APPLICABLE RULE	
MCL 400.722	Denying, suspending, revoking, refusing to renew, or modifying license;
	(1) The department may deny, suspend, revoke, or refuse to renew a license, or modify a regular license to a provisional license, if the licensee falsifies information on the application for license or willfully and substantially violates this act, the rules promulgated under this act, or the terms of the license.
For Reference: MCL 400.703	Definitions: A.
	(5) "Adult foster care family home" means a private residence with the approved capacity to receive at least 3 but not more than 6 adults to be provided with foster care. The adult foster care family home licensee must be a member of the household and an occupant of the residence.

ANALYSIS:	<p>Multiple Internet search results reported Ms. Ajowi lives and works in Columbus, OH which is reportedly nearly 300 miles or approximately 5 hours away from this home.</p> <p>Ms. Ajowi initially stated she does not regularly work in the home. She then stated she comes to the home to work approximately every two weeks. She later stated she is in the home every week, working only three days in Columbus, Ohio.</p> <p>Mr. Basir reported he is the only household member. Based on the interview completed, information obtained, and documentation reviewed there is sufficient evidence to support licensee Everlyne Ajowi does not reside in the home as required by law.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Employee health screenings are not completed

INVESTIGATION:

On 11/30/22, Mr. Basir reported it is him, Ms. Ajowi, Ms. Nirina, and Emily Edgerton who work at this home. Health screening results demonstrating Ms. Ajowi, Ms. Nirina, and Ms. Edgerton were negative for communicable tuberculosis (TB) were not available at the home. Mr. Basir reported Ms. Nirina's results were shown to me during my last on-site in October 2022 and that a physician statement stating Ms. Ajowi was in good health should be used as confirmation she was free of TB. He agreed he would send copies of negative TB test results for Ms. Nirina and Ms. Edgerton once they were located. These results were not received at the time this report was completed.

On 12/19/22, Ms. Ajowi stated both she and Mr. Basir oversee maintaining correct paperwork in the home. She stated she believed that all employee health screenings should be on-site, but she could not confirm. She stated she would ensure that employee health screenings are maintained in the home.

APPLICABLE RULE	
R 400.1405	Health of a licensee, responsible person, and member of the household.
	(3) A licensee shall provide the department with written evidence that he or she and each responsible person in the home is free from communicable tuberculosis. Verification

	shall be within the 3-year period before employment and verification shall occur every 3 years thereafter.
ANALYSIS:	<p>Health screening results demonstrating Ms. Ajowi, Ms. Nirina, and Ms. Edgerton were negative for communicable tuberculosis (TB) were not available at the home on 11/30/22.</p> <p>Based on the documentation observed, there is sufficient evidence to support the home has not complied with this rule.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident assessment plans are not signed.

INVESTIGATION:

On 11/30/22, I reviewed the *Assessment Plan for AFC Residents* forms for Resident A, B, C, D, E, and F. Resident A, Resident B's, and Resident E's assessment plan was signed by Mr. Basir on the designated line for the licensee. Resident C and Resident D's assessment plan was blank on the designated line for the licensee. Resident F's assessment plan was signed by Ms. Ajowi.

On 12/19/22, Ms. Ajowi stated both she and Mr. Basir oversee maintaining correct paperwork in the home.

APPLICABLE RULE	
R 400.1407	; Resident assessment plan;
	(3) In situations where a resident is referred for admission, the resident assessment plan shall be conducted in conjunction with the resident or the resident's designated representative, the responsible agency, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

ANALYSIS:	<p>Resident A, Resident B's, and Resident E's assessment plan were signed by Mr. Basir inappropriately on the designated line for the licensee. Resident C and Resident D's assessment plan was blank on the designated line for the licensee.</p> <p>There was no evidence that the resident assessment plan was conducted in conjunction with the resident/resident's designated representative, the responsible agency, and/or in some cases the licensee herself.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident Care Agreements are not signed.

INVESTIGATION:

On 11/30/22, I reviewed the *Resident Care Agreement (RCA)* forms for Resident A, B, C, D, E, and F. Resident A, Resident B's, and Resident E's *RCA* was signed by Mr. Basir on the designated line for the licensee. Resident C's *RCA* was blank on the designated line for the licensee. Resident D's *RCA* had Ms. Ajowi's name typed on the designated line for the licensee. Resident F's *RCA* was expired as of 10/29/21.

On 12/19/22, Ms. Ajowi stated both she and Mr. Basir oversee maintaining correct paperwork in the home.

APPLICABLE RULE	
R 400.1407	; Resident Care Agreement;
	(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.

ANALYSIS:	<p>There was no evidence that licensee Ajowi participated in any of Resident A, B, C, or D's RCA's. However, Mr. Basir willfully signed Resident A, B, and E's RCA's.</p> <p>Based on the documentation reviewed, there is sufficient evidence to support that the care agree was not completed with the resident/resident's designated representation, the responsible agency, and the licensee and that the licensee did not review the care agreement at least annually.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.1407	; Resident Care Agreement;
	(6) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency at least annually or more often if necessary.
ANALYSIS:	Resident F's RCA was expired as of 10/29/21. Licensee Ajowi did not review the RCA at least annually as this rule requires.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Discharge notices were not served to Resident G and H.

INVESTIGATION:

On 11/29/22, it was reported Guardian G became upset when she learned Resident G's belonging were moved to a small group home licensed separately from this one and Resident G was sleeping in that AFC home at night, while spending days at this home where he previously resided full time. She denied receiving written notice, or having knowledge, that Resident G and his belongings were discharged to a new placement.

On 11/30/22, I requested to see a written discharge notice for Resident G and Resident H who recently moved from the home. Mr. Basir reported there was not a formal, written discharge notice for the residents.

Mr. Basir acknowledged Resident G and Resident H, who previously resided at this home, were discharged to another separately licensed facility without formal

discharge notices sent to their guardians. Mr. Basir stated he assumed that since “this home and the other home are operated by Amani Foster care LLC,” that he could move the residents without a formal notice. He also stated he was never told there was a rule for how to appropriately discharge a resident from a home. He stated the guardians were made aware that the residents would be moving to a new home. He presented email communication with Guardian G where Resident G’s move was discussed. However, he acknowledged a written discharge compliant with licensing rules was not issued 30-days prior to the residents’ move from the home.

On 12/19/22, Mr. Basir reported that Resident G never resided at this home so therefore a discharge notice was not needed for him. I advised that was not what was reported on 11/30/22.

APPLICABLE RULE	
R 400.1407	Resident admission and discharge criteria;
	(12) A licensee shall provide a resident with a 30-day written notice before discharge from the home. The written notice shall state the reasons for discharge. A copy of the written notice shall be sent to the resident's designated representative and responsible agency.
ANALYSIS:	<p>Mr. Basir confirmed formal, written discharge notices were not issued 30-days prior from the date when he willfully moved Resident G and H, without appropriately notifying their designated representatives, from this home to another separately licensed home.</p> <p>Based on the interview completed and lack of documentation, there is sufficient evidence to support allegations that a written discharge notice, documenting the reason for the discharge, was not sent to the resident’s responsible agency and designated representative prior to two residents discharging from this home.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident funds paperwork is not completed appropriately.

INVESTIGATION:

On 11/30/22, Mr. Basir reported he was not using the department form for tracking resident funds transactions. He stated and showed that he is using a small business invoicing and accounting program called Wix. He showed a log of invoices and confirmation of payments. Mr. Basir reported he sends the invoices every month and can generate statements as requested by guardians. He acknowledged guardian/designated representatives do not sign the invoices each month but reported he can confirm receipt via email. It was discussed that he had previously reported to me during an inspection that he completes electronic invoices due to feeling that the department forms were outdated, and that electronic invoices and accounting were better for the home and the residents. It was discussed that consultation was provided as to how licensing rules still require the department form to be utilized and should a special investigation be called in; the home may be found in violation when using an electronic program and not the department form. It was discussed how it was previously conferred that a variance is needed to be compliant with the rule if using an electronic system and not the department forms. Mr. Basir acknowledged he did not apply for a variance to continue using the electronic invoices and accounting system. Mr. Basir also discussed having recent discussion with Area Manager, Russ Misiak, which helped bring understanding as to why the department form is beneficial and should be utilized in compliance with licensing rules.

On 12/19/22, I discussed the need for a variance, as previously discussed with Mr. Basir, with Ms. Ajowi.

APPLICABLE RULE	
R 400.1421	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.
ANALYSIS:	<p>Mr. Basir was provided consultation that a variance was needed to continue to use any form other than the department form. Mr. Basir acknowledged a variance was not obtained.</p> <p>Based on the interview completed and electronic documentation observed, there is sufficient evidence to support Mr. Basir willfully chose to use his own developed form without requesting a variance.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDING

On 11/30/22, when I completed my investigation at the home, I found Resident A, B, C, D, E, F, G and H in the home under the supervision of one direct care worker, Ms. Nirina. Resident G and H are residents of a separately licensed home in the city of Niles approximately 25 minutes' drive time from this home. Therefore, there were eight AFC residents under the supervision of one direct care worker in the home.

On 12/19/22, Ms. Ajowi agreed she would not have one DCW caring for more than six residents in this home moving forward.

APPLICABLE RULE	
R 400.1406	Ratio of responsible persons to residents.
	The ratio of responsible persons to residents shall not be less than 1 responsible person to 6 residents and 2 children under the age of 12 years or ratio thereof.
ANALYSIS:	I observed Ms. Nirina supervising eight (8) AFC residents in the home during my on-site on 11/30/22.
CONCLUSION:	VIOLATION ESTABLISHED

On 11/30/22, while I was on the phone with him and at the home, Mr. Basir was extremely confrontational. He reported he was not going to comply with my investigation or the recommendations of Mr. Misiak. At one point he threatened me by stating that if I continued with my investigation, he "knows many people in Berrien County and other counties in Michigan who operate AFCs and he would be glad to have them come together and speak about how [I] treat people, especially people of color."

On 12/19/22, Mr. Basir interjected that this investigation was due to retaliation by another consultant. I advised him I needed to speak to Ms. Ajowi, as he and I had already spoken regarding these allegations. He advised he needed to give Ms. Ajowi context regarding the allegations because I was not being truthful when discussing the allegations. Due to Mr. Basir being present on the phone as I attempted to interview Ms. Ajowi, I could not thoroughly discuss these allegations with her.

APPLICABLE RULE	
R 400.14103	; effect of failure to cooperate with inspection or investigation;
	(3) The failure of an applicant or licensee to cooperate with the department in connection with an inspection or

	investigation shall be grounds for denying, suspending, revoking, or refusing to renew a license.
ANALYSIS:	<p>Although Ms. Ajowi is the licensee of this home, it has been determined through this investigation that she does not reside at the home and is allowing Mr. Basir to act in the capacity of the role of licensee. Mr. Basir reported he would not comply with licensing and made threats to me while I was on-site.</p> <p>Based on the interview completed there is sufficient evidence to support Mr. Basir is willfully and fraudulently attempting to act in Ms. Ajowi's role as licensee. In addition, Ms. Ajowi through her participation and allowance of Mr. Basir's control of this family home, uncooperativeness with departmental staff, and lack of cooperation with the investigation has provided the grounds outlined in this rule for revoking the license.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On 12/19/22, I completed an exit conference with Ms. Ajowi, also present on the phone was Mr. Basir. Mr. Basir interjected multiple times, even though I advised I needed to only speak to Ms. Ajowi and if she did not know the answer to my question, it was fine if she said she did not know. Ms. Ajowi expressed concern for my findings and did not express agreement with most of my findings.

IV. RECOMMENDATION

I recommend revocation of this license and that the license be revoked.

Cassandra Duursma

12/13/22

Cassandra Duursma
Licensing Consultant

Date

Approved By:

Russell Misiak

12/15/22

Russell B. Misiak
Area Manager

Date