GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 5, 2023

Bose Ogbeifun
Trustcare Group Home Inc
Suite 604 West
15565 Northland Drive
Southfield, MI 48075

RE: License #: AS820271221
Investigation #: 2023A0992009
Cathedral AFC

Dear Ms. Ogbeifun:

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.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

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 (313) 456-0380.

Sincerely,

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

enclosure

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

## I. IDENTIFYING INFORMATION

| | |
|---|---|
| **License #:** | AS820271221 |
| | |
| **Investigation #:** | 2023A0992009 |
| | |
| **Complaint Receipt Date:** | 11/30/2022 |
| | |
| **Investigation Initiation Date:** | 11/30/2022 |
| | |
| **Report Due Date:** | 01/29/2023 |
| | |
| **Licensee Name:** | Trustcare Group Home Inc |
| | |
| **Licensee Address:** | Suite 604 West<br>15565 Northland Drive<br>Southfield, MI 48075 |
| | |
| **Licensee Telephone #:** | (248) 569-1102 |
| | |
| **Administrator:** | Bose Ogbeifun |
| | |
| **Licensee Designee:** | Bose Ogbeifun |
| | |
| **Name of Facility:** | Cathedral AFC |
| | |
| **Facility Address:** | 26443 Cathedral<br>Redford, MI 48239 |
| | |
| **Facility Telephone #:** | (313) 937-0929 |
| | |
| **Original Issuance Date:** | 12/20/2004 |
| | |
| **License Status:** | REGULAR |
| | |
| **Effective Date:** | 08/12/2021 |
| | |
| **Expiration Date:** | 08/11/2023 |
| | |
| **Capacity:** | 6 |
| | |
| **Program Type:** | DEVELOPMENTALLY DISABLED<br>MENTALLY ILL |

## II. ALLEGATION(S)

| | **Violation Established**? |
|---|---|
| Resident A has a large bruise on his abdomen and bruises on both legs and arms. Concerns of abuse in the home are from an unknown source. | No |
| Additional Findings | Yes |

## III. METHODOLOGY

| | |
|---|---|
| 11/30/2022 | Special Investigation Intake<br>2023A0992009 |
| 11/30/2022 | Special Investigation Initiated - Telephone<br>Rabab Makki, Adult Protective Services (APS) |
| 12/01/2022 | Inspection Completed On-site<br>Emmanuel Olaoye, direct care staff; Judy Ojo, direct care staff and Resident A |
| 12/08/2022 | Contact - Telephone call made<br>Bose Ogbeifun, licensee designee |
| 12/13/2022 | Contact - Telephone call made<br>Omar Madison, Resident A's Case Manager with Team Wellness |
| 12/13/2022 | Contact - Telephone call made<br>Jamilia Fox, physician with Team Wellness |
| 12/14/2022 | Contact - Telephone call received<br>Ms. Makki |
| 12/20/2022 | Contact - Telephone call made<br>Ms. Makki |
| 12/20/2022 | Referral - Recipient Rights |
| 12/21/2022 | Contact - Telephone call made<br>Tia Lowran, Director of Team Wellness |
| 12/21/2022 | Exit Conference<br>Ms. Bose was not available. Unable to leave a message, due to technical difficulty with her telephone line |

**ALLEGATION: Resident A has a large bruise on his abdomen and bruises on both legs and arms. Concerns of abuse in the home are from an unknown source.**

**INVESTIGATION:** On 11/30/2022, I contacted Rabab Makki, Adult Protective Services (APS) and interviewed her regarding the allegations. Ms. Makki stated she attempted to interview Resident A, but he seemed confused and did not actively engage in the interview. She said she observed bruising on his right forearm and his abdomen, but he was unable to provide an explanation as to how he sustained the bruising. Ms. Makki said the direct care staff stated Resident A is not a fall risk, and he is not being physically abused. Ms. Makki said based on her assessment of the bruising, it seemed more of a medical issue than a physical abuse issue. She said the staff appeared attentive and the home was clean. She said she does not suspect physical abuse but would like to err on the side of caution. Ms. Makki said she intends to contact Resident A's primary physician and his supports coordinator regarding the allegations. She said Resident A does not have a guardian.

On 12/01/2022, I completed an unannounced onsite inspection. I attempted to interview Resident A, but he did not actively engage in the interview. He stared at me in a daze. I pointed at his bruising and asked what happened, he did not respond.

I interviewed Emmanuel Olaoye, direct care staff, and Judy Ojo, direct care staff, regarding the allegations. Mr. Olaoye and Ms. Ojo said Resident A is not a fall risk to their knowledge and they do not know how he sustained the bruising. Ms. Ojo said they provide great care, and he is not being abused by staff or other residents. She said maybe the bruising is a medical issue because the marks come and go. I expressed difficulty trying to interview Resident A and asked if he is non-verbal, and Mr. Olaoye said Resident A speaks when he wants to. I requested to review Resident A's medical file to determine his diagnosis, rather he is non-verbal or not and if he is a fall risk. His medical file did not contain his diagnosis, but his primary physician was identified as David Harris and his contact information.

On 12/08/2022, I contacted Bose Ogbeifun, licensee designee and interviewed her regarding the allegations. Ms. Ogbeifun said she believe the bruising is because of the blood thinners Resident A is prescribed. She said the bruising come and goes, so it is possible it is medication related. She said sometimes the bruising will be there for days and sometimes he will not have any bruising at all. Ms. Ogbeifun said Resident A is not being abused and he is being provided great care. I referenced Dr. Harris as his physician as it was noted in Resident A's medical file. Ms. Ogbeifun said Resident A receives his services through Team Wellness and he was seen by Nabil Sullivan with Premier Medical in the past. Ms. Ogbeifun confirmed, Resident A does not have a guardian.

On 12/13/2022, I contacted Omar Madison, Resident A's Case Manager with Team Wellness. Mr. Madison said he meets with Resident A once a month and last met with him on 12/09/2022. Mr. Madison said he is aware of the bruising because it was noted in his case file by Jamilia Fox, medical doctor with Team Wellness. Mr. Madison said he did not observe any marks or bruising when he last met with Resident A. He said he did ask Resident A about the bruising and if anyone hurt him and he shook his head no. Mr. Madison said Resident A engages in conversation during his visits but has trouble remembering the nature of their conversation. Mr. Madison said Resident A is scheduled for a neurological appointment sometime next month to determine what is going on with him medically. He said there has been some discussion about Resident A going to a nursing home but that will be determined by his neurological exam.

On 12/13/2022, I contacted Dr. Fox, and we discussed the allegations. Dr. Fox explained that she observed the bruising during a wellness exam with Resident A. She said during the exam there was bruising on both arms and a massive bruise on his stomach area which was approximately six inches. Dr. Fox said historically she is not familiar with Resident A and has only seen him twice. She said based on his file he was seen by another doctor within Team Wellness in the past. Dr. Fox said there was a staff person that accompanied Resident A to the wellness visit, but he was not very helpful or knowledgeable about Resident A. Dr. Fox said based on her interaction with Resident A, he is selectively mute which made the situation even more complicated. She said she did notice Resident A is prescribed aspirin and Plavix but if he is not falling, how is he sustaining the bruising regardless of his medications. Dr. Fox said she contacted the pharmacy and discontinued the aspirin. She said she also inquired about the quality of care provided in the home, but the pharmacy denied having any knowledge. Dr. Fox said she also reviewed Resident A’s file and he was a participant in the Team Wellness overnight program in 2021 and he had some history of drug use but there is nothing noted about bruising. Dr. Fox said she cannot definitively say that the bruising is because of abuse, but she cannot determine the source either.

On 12/14/2022, I received a telephone call from Ms. Makki. She stated that she contacted Tia Lowran, Director of Team Wellness, and discussed the allegations. She said Team Wellness will be filing a petition for guardianship on behalf of Resident A. She said Ms. Lowran stated Plavix can cause bruising, however, it is uncertain if that is what is causing bruising in Resident A’s case. Ms. Makki said according to Ms. Lowran, Resident A’s diagnosis is dementia of the Alzheimer’s type late with behavioral disturbances.

On 12/20/2022, I made follow-up contact with Ms. Makki regarding Resident A. Ms. Makki made me aware that Resident A was admitted into the hospital to be assessed for skill nursing services. Ms. Makki said she does not have sufficient evidence to support the allegations and intends to deny the complaint.

On 12/21/2022, I contacted Ms. Lowran regarding the allegations. She said she is aware of the allegations regarding Resident A's bruising. Ms. Lowran said Resident A has some medical issues that are possibly better suited for a skilled nursing center. She said initially the plan was to petition the court for guardianship. However, that has changed at the moment. She said Resident A was recently admitted into Garden City Hospital to be assessed for skilled nursing services. She said if he is approved for a nursing home, he will no longer receive services through Team Wellness. Ms. Lowran said she is staying on top of this case to make sure Resident A receives the services he needs.

| **APPLICABLE RULE** | |
|---|---|
| **R 400.14305** | **Resident protection.** |
| | **(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.** |
| **ANALYSIS:** | During this investigation I interviewed Bose Ogbeifun, licensee designee; Emmanuel Olaoye, direct care staff; Judy Ojo, direct care staff; Omar Madison, Resident A's Supports Coordinator with Team Wellness; Jamilia Fox, physician with Team Wellness and Tia Lowran, Director of Team Wellness regarding the allegations. All of which denied the allegations.<br><br>I attempted to interview Resident A, due to his diagnosis, I was unable to interview him. I did observe him to have bruising on his right forearm and stomach area.<br><br>Based on the investigative findings, there is insufficient evidence to support the allegation that Resident A was not treated with dignity and his personal needs, including protection and safety attended to at all times. The allegation is unsubstantiated. |
| **CONCLUSION:** | **VIOLATION NOT ESTABLISHED** |

**ADDITIONAL FINDINGS:**

**INVESTIGATION:** On 12/01/2022, I completed an unannounced onsite inspection and reviewed Resident A's medication administration records (MARs). At the time, Resident A's a.m. medications did not contain the initials of the person who administered his medications. I asked both Emmanuel Olaoye, direct care staff, and Judy Ojo, direct care staff, if Resident A received his a.m. medications and they said

yes. Ms. Ojo said due to Resident A's incontinence issues, the direct care staff must have forgotten to initial the MARs after cleaning him up.

The following medications were not initialed on 12/01/2022:

Donepezil HCL 5MG PO TAB, take 1 tablet by mouth once daily was not initialed at 8:00 a.m.

Metoprolol Succinate ER 25MG PO TAB; take 1 1 tablet by mouth once daily was not initialed at 8:00 a.m.

Losartan Potassium 25MG PO TAB (Cozaar); take 1 tablet by mouth once daily was not initialed at 8:00 a.m.

Isosorbide Mononitrate ER 30MG ER TAB; take 1 tablet by mouth once daily was not initialed at 8:00 a.m.

Famotidine 20MG PO TAB; take 1 tablet by mouth twice daily was not initialed at 8:00 a.m.

Fiber TABS 625MG PO TAB (Fibercon); take 1 tablet by mouth once daily was not initialed at 8:00 a.m.

Aspirin Low Dose 81MG EC TAB (Aspirin Adult Low Strength); take 1 tablet by mouth once daily was not initialed at 8:00 a.m.

| **APPLICABLE RULE** | |
|---|---|
| **R 400.14312** | **Resident medications.** |
| | **(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:**<br>**(b) Complete an individual medication log that contains all of the following information:**<br>**(i) The medication.**<br>**(ii) The dosage.**<br>**(iii) Label instructions for use.**<br>**(iv) Time to be administered.**<br>**(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.**<br>**(vi) A resident's refusal to accept prescribed medication or procedures.** |

| | |
|---|---|
| **ANALYSIS:** | At the time of inspection, the direct care staff who administered Resident A's 8:00 a.m. medications on 12/01/2022, did not initial at the time medications were given. |
| **CONCLUSION:** | **VIOLATION ESTABLISHED** |

## IV. RECOMMENDATION

Contingent upon an acceptable corrective action plan, I recommend the status of the license remain unchanged.

12/28/2022

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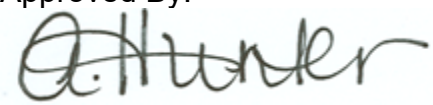
Denasha Walker Date
Licensing Consultant

Approved By:



01/05/2023

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Ardra Hunter Date
Area Manager