



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 1, 2023

John Mos
Infinite Care, LLC.
3736 Veronica Dr.
Sterling Heights, MI 48310

RE: License #: AS630387319
Investigation #: 2023A0602005
Cambourne Home

Dear Mr. Mos:

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Cindy Berry". The signature is fluid and elegant, with the first and last names clearly distinguishable.

Cindy Berry, Licensing Consultant
Bureau of Community and Health Systems
3026 West Grand Blvd
Cadillac Place, Ste 9-100
Detroit, MI 48202
(248) 860-4475

enclosure

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

I. IDENTIFYING INFORMATION

| | |
|---------------------------------------|--|
| License #: | AS630387319 |
| Investigation #: | 2023A0602005 |
| Complaint Receipt Date: | 10/25/2022 |
| Investigation Initiation Date: | 10/26/2022 |
| Report Due Date: | 12/24/2022 |
| Licensee Name: | Infinite Care, LLC |
| Licensee Address: | 29490 Lochmoor Farmington Hills, MI 48334 |
| Licensee Telephone #: | (888) 255-5426 |
| Administrator: | Simion Pop |
| Licensee Designee: | John Mos |
| Name of Facility: | Cambourne Home |
| Facility Address: | 5448 Cambourne West Bloomfield, MI 48322 |
| Facility Telephone #: | (888) 255-5426 |
| Original Issuance Date: | 08/03/2017 |
| License Status: | REGULAR |
| Effective Date: | 02/03/2022 |
| Expiration Date: | 02/02/2024 |
| Capacity: | 4 |
| Program Type: | DEVELOPMENTALLY DISABLED MENTALLY ILL |

II. ALLEGATION(S)

| | Violation Established? |
|--|---------------------------|
| The home is infested with roaches. | No |
| There is black mold in the bathrooms. | Yes |
| The home has been without heat for over two weeks and rooms are extremely cold at night. | Yes |
| Space heaters were placed around the entire home. | Yes |
| Additional Findings | Yes |

III. METHODOLOGY

| | |
|------------|--|
| 10/25/2022 | Special Investigation Intake 2023A0602005 |
| 10/26/2022 | Special Investigation Initiated - Telephone Message left for the complainant. |
| 11/03/2022 | Inspection Completed On-site Interviewed the home manager, Cassandra Dady, Resident A, Resident B, Resident C, and Resident D. |
| 11/30/2022 | Contact – Telephone call made Message left for Staff Member 1 |
| 12/13/2022 | Contact – Telephone call made Interviewed Staff Member 1 |
| 01/26/2023 | Exit Conference Message left for the licensee designee, John Mos requesting a return call. |
| 01/27/2023 | Contact – Telephone call received Spoke with the licensee designee, John Mos. |

ALLEGATION:

The home is infested with roaches.

INVESTIGATION:

On 10/25/2022, a complaint was received and assigned for investigation alleging that the home is infested with roaches, black mold in the bathrooms, the home has been without heat for over two weeks, rooms are extremely cold at night and space heaters were placed around the entire home.

On 11/03/2022, I conducted an unannounced on-site investigation at which time I interviewed the home manager, Cassandra Dady, Resident A, Resident B, Resident C and Resident D. Ms. Dady stated she has worked as the home manager for about six months and has never seen any roaches, but she has seen a couple of spiders on occasion. Ms. Dady stated that there is an exterminator that comes to the home every three months to exterminate but she was unsure of exactly what the home was being exterminated for. I did not observe any roaches or spiders in the home at the time the on-site was conducted.

Resident A stated he has never seen any roaches or spiders in the home.

Resident B stated the home has had an issue with spiders for quite some time and Terminix comes every few months to treat the home.

Resident C stated he has never seen a roach in the home but has seen spiders.

Resident D is blind and stated he has never felt any bugs crawling on him.

On 11/30/2022, I interviewed Staff Member 1 who requested to remain anonymous. Staff Member 1 stated roaches and spiders have been observed in the home and a pest control company came out to exterminate.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.14401 | Environmental health. |
| | (5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents. |

| | |
|--------------------|--|
| ANALYSIS: | Based on the information obtained from Ms. Dady, Resident A, Resident B, Resident C, Resident D and Staff Member 1, there is sufficient information to determine that the home is infested with roaches. Spiders have been observed but there is an insect control program in place. I did not observe any roaches or spiders in the home at the time the on-site was conducted. |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION:

There is black mold in the bathrooms.

INVESTIGATION:

On 11/03/2022, during the unannounced on-site investigation, I inspected the main bathroom and the bathroom located inside a resident bedroom. In the main bathroom I observed the caulking around the toilet and bathtub to contain a black substance that appeared to be mildew or mold. I also observed the caulking around the shower in the resident bedroom to contain the same black substance. Resident A, and Resident B stated the bathrooms are cleaned weekly. Resident C stated the bathrooms are usually cleaned on the weekends. Resident D did not know when the bathrooms are cleaned. Ms. Dady said the bathrooms are cleaned but had no explanation regarding the black substance that was observed during the on-site.

On 11/30/2022, I interviewed Staff Member 1 by telephone. Staff Member 1 stated the bathrooms contain black mold. Management has been made aware of it, but nothing has been done.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.14403 | Maintenance of premises. |
| | (2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance. |
| ANALYSIS: | Based on my observation on 11/03/2022, I determined that both bathrooms were not clean and contained a black substance around the caulking that appeared to be mold or mildew. Resident A and Resident B stated the bathrooms are cleaned weekly and Resident C said they are cleaned on the weekends. The amount of black substance I observed appeared to have been there for more than one week. |
| CONCLUSION: | VIOLATION ESTABLISHED |

ALLEGATION:

The home has been without heat for over two weeks and rooms are extremely cold at night.

INVESTIGATION:

On 11/03/2022, I interviewed Ms. Dady, Resident A, Resident B, Resident C, and Resident D regarding the home being without heat. Ms. Dady stated the furnace was not working for about a week. A service man came out to inspect the furnace and stated he had to order the part needed to make the repair. Ms. Dady did not have a receipt or work order to show the repairs had been made. At the time of the on-site, I observed the home to be warm and Resident A, Resident B, Resident C and Resident D did not have any complaints regarding the home being cold at the time.

Resident A, Resident B, Resident C and Resident D all stated the home was without heat for about two weeks due to an issue with the furnace. Residents were provided portable heaters.

On 11/30/2022, I interviewed Staff Member 1 by telephone and was informed that the home was without heat for almost three weeks and residents were given portable heaters.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.14510 | Heating equipment generally. |
| | (1) Heat shall be provided by an approved central heating plant or permanently installed electrical heating system that is approved by a nationally recognized testing laboratory that use acceptable testing methods. |
| ANALYSIS: | Based on the information obtained from Ms. Dady, Resident A, Resident B, Resident C and Resident D, there was no heat in the home for about two weeks due to an issue with the furnace and residents were provided with portable heaters until the furnace was repaired. |
| CONCLUSION: | VIOLATION ESTABLISHED |

ALLEGATION:

Space heaters were placed around the entire home.

INVESTIGATION:

During the unannounced on-site investigation on 11/03/2022, I observed portable heaters in Resident A, Resident B, Resident C and Resident D's bedroom.

Resident A, B, C, and D stated the heaters were provided by the home operator because the furnace was not working for a couple of weeks. Resident A stated the portable heaters were not used continuously but only to knock the chill off when the furnace went out. A service man came out and inspected the furnace (exact date unknown) and said a part needed to be ordered before the repair could be made. Once the part was received, the furnace was repaired.

Ms. Dady stated there was an issue with the furnace for about one week and portable heaters were placed in each resident bedroom.

According to Staff Member 1, portable heaters were placed throughout the home including each resident bedroom and used while the furnace was being repaired.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.14510 | Heating equipment generally. |
| | (5) Portable heating units shall not be permitted. |
| ANALYSIS: | Based on the information obtained from Resident A, Resident B, Resident C, Resident D, Ms. Dady, and Staff Member 1. Portable heaters were being used in the home while the furnace was being repaired. During the on-site investigation on 11/03/2022, I observed portable heaters in each resident bedroom. |
| CONCLUSION: | VIOLATION ESTABLISHED |

ADDITIONAL FINDINGS:**INVESTIGATION:**

During the unannounced on-site investigation on 11/03/2022, I interviewed Resident A and Resident B outside on the deck at the back of the home. I observed a hole in the

deck and several loose wooden planks. Resident A and Resident B stated the deck has been in poor condition for some time, but they know not to walk on the loose planks or go near the hole. I also observed quite a bit of lent and/or dust build-up behind and around the dryer and near the furnace in the furnace room. There were also socks and paper on the floor between the dryer and furnace.

On 1/26/2023, I left a message for the licensee designee, John Mos requesting a return call so that an exit conference can be conducted.

On 1/27/2023, I conducted an exit conference with the licensee designee, John Mos by telephone. Mr. Mos was informed of the investigative findings and recommendation documented in this report. He stated the home has been on a maintenance program for some time now with Terminix. Terminix inspects the home every three months and if any insects are observed the home is treated. Mr. Mos said there was an issue with the blower motor on the furnace that took about two weeks to repair. The furnace would come on and stay on for a while and then shut off. It never stopped working completely. He stated that the dust in the furnace room was caused by the serviceman turning the furnace off and on while making the necessary repairs. Mr. Mos agreed to submit a corrective action plan upon receipt of the report.

| APPLICABLE RULE | |
|------------------------|--|
| 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. |
| ANALYSIS: | Based on my own observation on 11/03/2022, I determined that the deck needs repair in order to be safe for resident use. There were loose wooden planks and a hole in the deck. According to Resident A and Resident B, the deck has been in poor condition for quite some time. I also observed and determined that the furnace room was not maintained in a clean appearance. There was quite a bit of lent and/or dust build-up. |
| CONCLUSION: | VIOLATION ESTABLISHED |

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change to the status of the license.

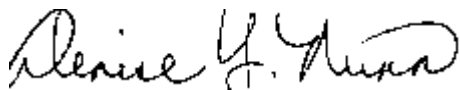


02/01/2023

Cindy Berry
Licensing Consultant

Date

Approved By:



02/01/2023

Denise Y. Nunn
Area Manager

Date