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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

July 11, 2023

Marion Justice Alans Foster Care PO Box 09410 Detroit, MI 48209

RE: License #: AS820013555

Justice Home II 14129 Hamilton

Highland Park, MI 48203

Dear Ms. Justice:

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,

K. Robinson, LMSW, Licensing Consultant Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 919-0574

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820013555

**Licensee Name:** Alans Foster Care

Licensee Address: PO Box 09410

Detroit, MI 48209

Licensee Telephone #: (313) 410-9028

**Licensee/Licensee Designee:** Marion Justice, Designee

Administrator: Marion Justice

Name of Facility: Justice Home II

Facility Address: 14129 Hamilton

Highland Park, MI 48203

**Facility Telephone #:** (313) 883-1011

Original Issuance Date: 01/30/1982

Capacity: 6

Program Type: MENTALLY ILL

### II. METHODS OF INSPECTION

Dat	e of On-site Inspection(s):	07/11/	2023	
Date of Bureau of Fire Services Inspection if applicable:				
Date of Environmental/Health Inspection if applicable:				
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 01 Role: Lice	nsee desi	02 05 gnee	
•	Medication pass / simulated pass observed? Yes $\square$ No $\boxtimes$ If no, explain. Morning meds passed prior to my arrival. Medication(s) and medication record(s) reviewed? Yes $\boxtimes$ No $\square$ If no, explain.			
•	Resident funds and associated documents reviewed for at least one resident? Yes $\boxtimes$ No $\square$ If no, explain.  Meal preparation / service observed? Yes $\square$ No $\boxtimes$ If no, explain.  Breakfast served prior to my arrival.  Fire drills reviewed? Yes $\boxtimes$ No $\square$ If no, explain.			
•	Fire safety equipment and practices observed? Yes $oxed{oxed}$ No $oxed{oxed}$ If no, explain.			
•	E-scores reviewed? (Special Certification Only) Yes  No N/A 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: 316(1)(b), 316(1)(a), 301(9), 301(4), 803(6), 208(1)(f), 205(3), 205(6), 205(5) N/A			
•	Number of excluded employees followed-	ıp?	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 400.14204 Direct care staff; qualifications and training.

- (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:
  - (d) Personal care, supervision, and protection.

Direct care worker, Jaleah Wright was hired to work at the facility on 9/18/22; she had no verification of training in Personal care, supervision, and protection needs of residents.

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.

(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.

Ms. Wright had no physician statement on file that attests to her physical health within 30 days of hire.

This is a **REPEAT VIOLATION**; See 2021 Renewal LSR.

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.

Ms. Wright has no TB test results on file.

This is a **TWICE REPEATED VIOLATION**; See 2019 and 2021 Renewal LSRs. Continued noncompliance may result in modification of the license. The Licensee has failed to implement the corresponding corrective action plans which outline steps to achieve compliance with the rule requirement.

#### R 400.14208 Direct care staff and employee records.

 A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: (f)Verification of reference checks.

Ms. Wright had no reference checks available for department review.

This is a **REPEAT VIOLATION**; See 2021 Renewal LSR.

#### R 400.14208 Direct care staff and employee records.

 A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: (g)Beginning and ending dates of employment.

No hire date was documented for Ms. Wright; however, Courtney Justice corrected the violation onsite. No further action is required.

#### 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.

Hot water temperature tested at 93 degrees Fahrenheit.

This is a **REPEAT VIOLATION**; See 2019 Renewal LSR.

#### 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.

Observed a live roach inside the first-floor bathroom and dining area. According to Riley Justice, the home has experienced recent problems with rodents and other pests resulting from neighboring homes being torn down to rebuild the area.

#### IV. RECOMMENDATION

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

Kara Robinson Date Licensing Consultant