



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 15, 2023

Esther Mwankenja
Zanzibar Adult Foster Care, LLC
5806 Outer Drive
Bath, MI 48808

RE: License #: AS330406614
Zanzibar Adult Foster Care, LLC
520 S. Holmes Street
Lansing, MI 48912

Dear Ms. Mwankenja:


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 (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Jana Lipps". The signature is written in black ink on a white background.

Jana Lipps, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #: AS330406614

Licensee Name: Zanzibar Adult Foster Care, LLC

Licensee Address: 5806 Outer Drive
Bath, MI 48808

Licensee Telephone #: 517-885-0716

Licensee/Licensee Designee: Esther Mwankenja, Designee

Administrator: Esther Mwankenja

Name of Facility: Zanzibar Adult Foster Care, LLC

Facility Address: 520 S. Holmes Street
Lansing, MI 48912

Facility Telephone #: (517) 885-0716

Original Issuance Date: 02/17/2021

Capacity: 6

Program Type: MENTALLY ILL
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/08/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 2

No. of others interviewed 1 Role: licensee designee

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. Licensee designee does not hold cash funds for any of the current residents.
- Meal preparation / service observed? Yes No If no, explain. Inspection took place after the noon meal was completed.
- Fire drills reviewed? Yes No If no, explain.
- 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:

R 330.1803 Facility environment; fire safety.

(1) A facility that has a capacity of 4 to 6 clients shall be equipped with an interconnected multi-station smoke detection system which is powered by the household electrical service and which, when activated, initiates an alarm that is audible in all areas of the home. The smoke detection system shall be installed on all levels, including basements, common activity areas, and outside each sleeping area, but excluding crawl spaces and unfinished attics, so as to provide full coverage of the home. The system shall include a battery backup to assure that the system is operable if there is an electrical power failure and accommodate the sensory impairments of clients living in the facility, if needed. A fire safety system shall be installed in accordance with the manufacturer's instructions by a licensed electrical contractor and inspected annually. A record of the inspections shall be maintained at the facility.

During the on-site inspection I had the licensee designee, Esther Mwankenja, test the smoke detectors. The smoke detectors did not operate as an interconnected smoke detection system on this date.

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:
(c) Cardiopulmonary resuscitation.

Ms. Mwankenja was not able to produce a current cardiopulmonary resuscitation certificate for herself during the on-site inspection. She reported that this certification has expired. Ms. Mwankenja currently functions as a direct care staff.

R 400.14203 Licensee and administrator training requirements.

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

Ms. Mwankenja reported that she has not completed the required 16 hours of training, per year, for the current renewal period.

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. Mwankenja was not able to produce documentation of direct care staff, Patrobah Mazara's, signed statement of physical health from a medical provider. Additional days were given to produce this document. The document was not received.

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. Mwankenja was not able to produce confirmation of negative tuberculosis testing for herself and direct care staff, Patrobah Mazara. Additional days were given to produce this documentation. The documentation was not received.

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 on-site inspection I found a daily dose of Resident A's medication in an unlocked cabinet in the kitchen. There were five medications in an open daily pill package, sitting inside this kitchen cabinet. Ms. Mwankenja reported that she was not aware Resident A had placed his medication in this location.

R 400.14312 Resident medications.

(3) Unless a resident's physician specifically states otherwise in writing, the giving, taking, or applying of prescription medications shall be supervised by the licensee, administrator, or direct care staff.

Ms. Mwankenja reported that Resident B self-administers his Albuterol inhaler. During on-site inspection this inhaler was found in Resident B's bedroom. Currently there is not a physician's order authorizing the self-administration of Resident B's Albuterol inhaler.

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

information as required by the department. A resident record shall include, at a minimum, all of the following information:

(v) Instructions for emergency care and advanced medical directives.

Resident B's resident record was reviewed during on-site inspection. This record did not include Resident B's current guardianship paperwork.

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.

During on-site inspection I observed Resident C's room to smell of urine and have a thick layer of dirt on the baseboards, windows, window coverings, and floors. Ms. Mwankenja reported that Resident C does not like his room disturbed, but Resident C was currently hospitalized during this inspection.

R 400.14410 Bedroom furnishings.

(1) The bedroom furnishings in each bedroom shall include all of the following:

(d) At least 1 chair.

During on-site inspection Resident C's bedroom was found to not have a chair. Ms. Mwankenja reported that Resident C does not like chairs and has removed the chair. A variance will be needed to accommodate this request.

R 400.14410 Bedroom furnishings.

(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a water bed is not prohibited by this rule.

During on-site inspection I observed Resident C's mattress to be soiled with urine and not in good condition. Ms. Mwankenja reported that Resident C is incontinent and refuses to maintain a mattress pad on his bed or wear incontinence supplies. The current condition of Resident C's mattress was not sanitary and not in good repair.

R 400.14411 Linens.

(1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillow case, a minimum of 1 blanket, and a bedspread for each bed. Bed linens shall be changed and laundered at least once a week or more often if soiled.

During on-site inspection Resident C's bed was noted to be void of any mattress cover or bed linens. Ms. Mwankenja reported that Resident C will not allow these items on his bed and removes them when she tries to put them on the bed. A variance will need to be requested for this rule.

R 400.14411 Linens.

(2) A licensee shall provide at least 1 standard bed pillow that is comfortable, clean, and in good condition for each resident bed.

During on-site inspection I observed that Resident C's bed did not include a pillow. Ms. Mwankenja reported that Resident A does not allow a pillow in his room and will remove all pillows. A variance will be needed for this rule.

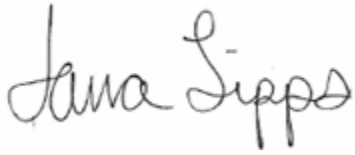
R 400.14507 Means of egress generally.

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

During on-site inspection I observed that the back entrance/exit to the facility, which forms a part of the two required means of egress was not equipped with positive-latching, non-locking-against-egress hardware, due to a deadbolt currently being used.

IV. RECOMMENDATION

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

A handwritten signature in cursive script that reads "Jana Lipps".

08/15/23

Jana Lipps
Licensing Consultant

Date