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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

August 24, 2023

Virgil Yarbrough Yarbrough AFC 1, Inc P O Box 17934 Detroit, MI 48219

RE: License #: AS820382708

Yarbrough AFC I 5557-9 Allendale Detroit, MI 48204

#### Dear Virgil Yarbrough:

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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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,

Regina Buchanan, Licensing Consultant Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202

Regina Buchanon

(313) 949-3029

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820382708

Licensee Name: Yarbrough AFC 1, Inc

**Licensee Address:** 5557-9 Allendale

Detroit, MI 48204

Licensee Telephone #: (313) 898-0388

Licensee/Licensee Designee: Virgil Yarbrough

Administrator: Virgil Yarbrough

Name of Facility: Yarbrough AFC I

**Facility Address:** 5557-9 Allendale

Detroit, MI 48204

**Facility Telephone #:** (313) 898-0388

Original Issuance Date: 02/16/2017

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

# **II. METHODS OF INSPECTION**

Date	e of On-site Inspection(s):	08/16/2	023	
Date	e of Bureau of Fire Services Inspection if appl	icable:	N/A	
Date	e of Health Authority Inspection if applicable:		N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role: N/A		1	
•	Medication pass / simulated pass observed?	Yes 🖂	No 🗌 If no, explain.	
•	Medication(s) and medication record(s) revie	wed? Y	es 🗵 No 🗌 If no, explain.	
•	Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.  Meal preparation / service observed? Yes No If no, explain.  Resident not home  Fire drills reviewed? Yes No If no, explain.			
•	Fire safety equipment and practices observe	d? Yes	⊠ No  If no, explain.	
•	E-scores reviewed? (Special Certification Only) Yes \( \subseteq \text{No} \subseteq \text{N/A} \subseteq \text{If no, explain.} \) Water temperatures checked? Yes \( \subseteq \text{No} \subseteq \text{If no, explain.} \)			
•	Incident report follow-up? Yes ⊠ No ☐ If i	no, expla	ain.	
•	Corrective action plan compliance verified? 08/13/2021 Rules: 205(6),301(4),312(4)(b),4 Number of excluded employees followed-up?	01(2),50		
•	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.

(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3-month period.

During the year 2023, there were no fire drills conducted prior to 04/16/2023 and none on file for the year 2022.

R 330.1803 Facility environment; fire safety.

- (6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 month from the date of the finding to either of the following:
- (a) Improve the score to at least the "slow" category.
- (b) Bring the home into compliance with the physical plant standards for "Impractical" homes contained in chapter 21 of the 1985 life safety code of the national fire protection association, which are adopted by reference in these rules and which may be obtained from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost, or from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of the chapter 21 standards. A price quote for copying of these pages may be obtained from the national fire protection association.

There were no evacuation assessments available for review that were conducted during this licensing period.

## R 330.1806 Staffing levels and qualifications.

- (2) All staff who work independently and staff who function as lead workers with clients shall have successfully completed a course of training which imparts basic concepts required in providing specialized dependent care and which measures staff comprehension and competencies to deliver each client's individual plan of service as written. Basic training shall address all of the following areas:
- (a) An introduction to community residential services and the role of direct care staff.
- (b) An introduction to the special needs of clients who have developmental disabilities or have been diagnosed as having a mental illness. Training shall be specific to the needs of clients to be served by the home.
- (c) Basic interventions for maintaining and caring for a client's health, for example, personal hygiene, infection control, food preparation, nutrition and special diets, and recognizing signs of illness.
  - (d) Basic first aid and cardiopulmonary resuscitation
- (e) Proper precautions and procedures for administering prescriptive and nonprescriptive medications.
- (f) Preventing, preparing for, and responding to environmental emergencies, for example, power failures, fires, and tornados.
- (g) Protecting and respecting the rights of clients, including providing client orientation with respect to the written policies and procedures of the licensed facility.
- (h) Non-aversive techniques for the prevention and treatment of challenging behavior of clients.

The licensee designee, Virgil Yarbrough, and staff, Jeffrey Yarbrough, did not have on file verification of completion of annual recipient rights training.

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.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews

shall be maintained by the home and shall be available for department review.

The licensee designee, Virgil Yarbrough, who is also the administrator, did not have on file a current physical health statement or health review.

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.

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

The licensee designee, Virgil Yarbrough, did not have verification of updated TB testing on file.

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.

The licensee designee, Virgil Yarbrough, did not have verification of completion of annual training hours. There was none on file for the year 2022.

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.

Staff, Jeffrey Yarbrough, did not have on file verification of updated TB testing.

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.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

Staff, Jeffrey Yarbrough, did not have on file verification of an updated physical health statement or an annual health review.

# **REPEAT VIOLATION (RENEWAL INSPECTION 08/05/2021)**

R 400.14210 Resident register.

A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:

- (a) Date of admission.
- (b) Date of discharge.
- (c) Place and address to which the resident moved, if known.

The resident register could not be located and was not available for review.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health

care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Resident A did not have any health care appraisals on file.

#### R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

Resident A's assessment plan was not completed annually. He did not have one on file for the year 2022.

#### REPEAT VIOLATION {RENEWAL INSPECTION 08/05/2021}

#### R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Resident A's resident care agreement was not completed annually. It was last completed on 01/03/2021. The other resident care agreement on file was not signed and dated.

#### 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:
- (b) Complete an individual medication log that contains all of the following information:

- (i) The medication.
- (ii) The dosage.
- (iii) Label instructions for use.
- (iv) Time to be administered.
- (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.
- (vi) A resident's refusal to accept prescribed medication or procedures.

Resident A's Metformin, Ferrous, Nifedipine, Aspirin, and Multivitamin were in his medication tray and according to the licensee designee, Virgil Yarbrough, were all still being used by Resident A and given monthly, but they were not documented on the medication log sheets after May 2023.

### **REPEAT VIOLATION (RENEWAL INSPECTION 08/05/2021)**

R 400.14315 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.

Resident A's Funds Part II form was last updated 08/03/2021.

#### 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:
- (a) Identifying information, including, at a minimum, all of the following:
  - (i) Name.
- (ii) Social security number, date of birth, case number, and marital status.
  - (iii) Former address.
- (iv) Name, address, and telephone number of the next of kin or the designated representative.
- (v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home.

- (vi) Name, address, and telephone number of the preferred physician and hospital.
  - (vii) Medical insurance.
  - (viii) Funeral provisions and preferences.
  - (ix) Resident's religious preference information.
  - (b) Date of admission.
- (c) Date of discharge and the place to which the resident was discharged.
- (d) Health care information, including all of the following:
  - (i) Health care appraisals.
  - (ii) Medication logs.
- (iii) Statements and instructions for supervising prescribed medication, including dietary supplements and individual special medical procedures.
  - (iv) A record of physician contacts.
- (v) Instructions for emergency care and advanced medical directives.
  - (e) Resident care agreement.
  - (f) Assessment plan.
  - (g) Weight record.
  - (h) Incident reports and accident records.
- (i) Resident funds and valuables record and resident refund agreement.
  - (j) Resident grievances and complaints.

Resident A did not have an identification record form on file.

#### R 400.14310 Resident health care.

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

Resident A did not have a weight record on file.

#### 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.

The refrigerator in the kitchen did not work.

The deep freezer and mini fridge in the office area were not equipped with thermometers

The rugs in the downstairs bathroom did not have nonskid backing.

The water in the bathroom sinks did not turn on.

Paint cans were stored in the furnace area.

Some of the bedroom blinds were damaged.

An oxygen machine that belonged to a discharged resident was stored in one of the bedrooms.

The fire door located off the kitchen did not latch when closed.

Debris, poles, a fan, and wooden slacks were observed in the backyard.

The bushes in the front yard were overgrown.

#### R 400.14407 Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

The bathroom doors were equipped with locking against egress hardware.

#### R 400.14411 Linens.

(1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillowcase, 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.

The beds were not all equipped with the required bedding and pillows.

#### 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.

The hot water temperature was 168 degrees Fahrenheit.

# REPEAT VIOLATION {RENEWAL INSPECTION 08/05/2021}

# IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

Regina Buchanon	
	08/21/2023 Date
Licensing Consultant	
Approved by:	
atturker	
	08/24/2023 Date
Area Manager	Bato