



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

November 21, 2023

Des Des
3242 Golfside Rd
Ypsilanti, MI 48197

RE: License #: AF810412280
Investigation #: 2024A0575003
Jodes Foster Family Home

Dear Des Des:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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 (517) 284-9720.

Sincerely,

A handwritten signature in blue ink that reads "Jeffrey J. Bozsik".

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

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

I. IDENTIFYING INFORMATION

License #:	AF810412280
Investigation #:	2024A0575003
Complaint Receipt Date:	11/13/2023
Investigation Initiation Date:	11/13/2023
Report Due Date:	12/13/2023
Licensee Name:	Des Des
Licensee Address:	3242 Golfside Rd Ypsilanti, MI 48197
Licensee Telephone #:	(734) 709-3784
Administrator:	N/A
Licensee Designee:	
Name of Facility:	Jodes Foster Family Home
Facility Address:	3242 Golfside Rd Ypsilanti, MI 48197
Facility Telephone #:	(734) 709-3784
Original Issuance Date:	07/18/2022
License Status:	REGULAR
Effective Date:	01/18/2023
Expiration Date:	01/17/2025
Capacity:	5
Program Type:	PH; DD; MI; AGED

II. ALLEGATION(S)

	Violation Established?
Resident A had not been bathed for 2 days.	Yes
Resident A's clothing had not been changed for 2 days.	Yes
There were no clean bed sheets for Resident A.	Yes

III. METHODOLOGY

11/13/2023	Special Investigation Intake-2024A0575003
11/13/2023	Special Investigation Initiated - Telephone
11/13/2023	APS Referral received
11/14/2023	Contact - Telephone call made-(a) Resident A's wife; and (b) direct care staff-Tibletsi Dessu.
11/16/2023	Inspection Completed On-site-(a) interview with Des Des- licensee; (b) reviewed Huron Valley PACE service authorization/paperwork
11/16/2023	Inspection Completed-BCAL Sub. Compliance
11/16/2023	Exit conference-with Des Des, licensee

ALLEGATION:

Resident A had not been bathed for 2 days.

INVESTIGATION:

An APS referral was received.

Resident A does not reside in this facility, he is no longer there, and he has dementia, so he wasn't interviewed. His family was referred by Huron Valley PACE

(Program of All-Inclusive Care) adult day program for respite care for Resident A from Friday 10/27/23- Tuesday 10/31/23.

On 11/14/2023, I interviewed Resident A's wife. She stated she went to visit him on Sunday 10/29/2023 at the facility and found Resident A lying in bed, in the same clothes he wore on Friday, 10/17/2023. She also stated he was wearing an incontinent brief that was soaking wet, as was the underneath pad and the bed linen. She stated Resident A told her his incontinent brief had not been changed in the last day.

On 11/14/2023, I interviewed Tibletsi Dessu, direct care staff. She stated she worked on Sunday, 10/29/2023 starting at noon, and changed Resident A's incontinent brief every 2 hours. She said she did not bathe him.

On 11/16/2023, I interviewed Des Des, licensee. He said he worked on the weekend and assisted Resident A with changing his brief if Resident A asked him. Des Des didn't indicate that he had bathed Resident A. I reviewed residents' Huron Valley PACE service authorization forms, which details a resident's medications, which they provide, and personal assistance needs. Resident A's Huron Valley PACE service authorization form was unavailable for review. I informed Des Des there needs to be documentation if Resident A refused staff assistance and he stated there is such a record but didn't produce one.

APPLICABLE RULE	
R 400.1420	Resident hygiene.
	(1) A licensee shall afford a resident the opportunity for daily bathing.
ANALYSIS:	Since I found Resident A's wife to be credible, there is no documentation or corroborated eyewitnesses to the contrary, Des Des, licensee didn't state that he bathed Resident A and Tibletsi Dessu, direct care staff stated she did not bath Resident A, then there is sufficient evidence that supports the licensee did not afford Resident A the opportunity for daily bathing.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident A's clothing had not been changed for 2 days.

INVESTIGATION:

On 11/14/2023, I asked Tibletsi Dessu, direct care staff if she had changed Resident A's clothing. She stated she had not during the time she worked on 10/29/2023.

On 11/16/2023, I discussed this allegation with Des Des, licensee. Des Des worked the weekend and stated he didn't know whether Resident A's clothing had been changed.

APPLICABLE RULE	
R 400.1420	Resident hygiene.
	(5) A licensee shall afford a resident who is capable, opportunities, or instructions, when necessary, to routinely launder clothing. Clean clothing shall be available at all times.
ANALYSIS:	<p>Since I found Resident A's wife to be credible and there is no documentation of refusal or corroborated eyewitnesses to the contrary, then there is sufficient evidence the licensee did not provide Resident A clean clothing/laundry Resident A's soiled clothing.</p> <p>Tibletsi Dessu, direct care staff didn't change Resident A's clothing and Des Des, licensee doesn't know if Resident A's clothing had been changed.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

There were no clean bed sheets for Resident A.

INVESTIGATION:

On 11/14/2023, I asked direct care staff, Tibletsi Dessu if she had changed Resident A's bed sheets. She stated she had not during the time she worked on 10/29/2023.

On 11/16/2023, Des Des showed me the closet with available clean bed sheets but made no statement that he had changed Resident A's bed sheets either.

On 11/16/2023, I conducted an exit conference with Des Des, licensee and provided technical assistance regarding documenting personal assistance requests and refusals just as what is required for medical records documentation for medication/medical refusal.

APPLICABLE RULE	
R 400.1434	Linens.
	(1) A licensee shall provide bedding which includes 2 sheets, a pillow case, a minimum of 1 blanket, and a bedspread. Bed linens shall be changed at least weekly or more often if soiled.
ANALYSIS:	<p>Since I found Resident A's wife to be credible, even though there are clean bed sheets available for use, there are no corroborated eyewitnesses that Resident A was provided clean bed sheets when soiled, then there is sufficient evidence the licensee did not change Resident A's bed linen when soiled.</p> <p>Tibletsi Dessu, direct care staff didn't change Resident A's bed sheets and Des Des, licensee made no statement that he had changed them either.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable plan of correction; I recommend no changes in the status of the license.

Jeffrey J. Bozsik
Licensing Consultant

Date: 11/20/23

Approved By:

Ardra Hunter
Area Manager

Date: 11/21/23