



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

January 31, 2024

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

RE: License #: AS630387319  
**Cambourne Home**  
**5448 Cambourne**  
**West Bloomfield, MI 48322**

Dear John Mos:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance.
- You are to submit a Statement of Correction.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 (248) 975-5053.

Sincerely,

A handwritten signature in dark ink, reading "Frodet Dawisha". The signature is written in a cursive, flowing style.

Frodet Dawisha, Licensing Consultant  
Bureau of Community and Health Systems  
3026 W. Grand Blvd  
Cadillac Place, Ste 9-100  
Detroit, MI 48202  
(248) 303-6348

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630387319
<b>Licensee Name:</b>	Infinite Care, LLC
<b>Licensee Address:</b>	29490 Lochmoor Farmington Hills, MI 48334
<b>Licensee Telephone #:</b>	(888) 255-5426
<b>Licensee/Licensee Designee:</b>	John Mos, Designee
<b>Administrator:</b>	Simon Pop
<b>Name of Facility:</b>	Cambourne Home
<b>Facility Address:</b>	5448 Cambourne West Bloomfield, MI 48322
<b>Facility Telephone #:</b>	(888) 255-5426
<b>Original Issuance Date:</b>	08/03/2017
<b>Capacity:</b>	4
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/31/2024

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 3

No. of others interviewed 2 Role: licensee designees

- 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.
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain.  
Inspection did not occur during mealtime
- 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:

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(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.

During the on-site inspection on 01/31/2024, Resident A did not have their 2022 health care appraisal completed and in their file.

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(11) A licensee shall contact a resident's physician for instructions as to the care of the resident if the resident requires the care of a physician while living in the home. A licensee shall record, in the resident's record, any instructions for the care of the resident.

During the on-site inspection on 01/30/2024, Resident A did not have their physician contacts and instructions in their file for 2022 and 2023.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(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:

	(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.
--	--

During the on-site inspection on 01/31/2024, I reviewed Resident A's medication logs and found the following errors:

- Risperdal 3MG Tab: take one tablet by mouth twice a day was given on 02/01/2023 at 8PM and on 06/30/2022 at 8AM, but staff did not initial the medication log.
- Levothyroxine 50MCG Tab: take one tablet by mouth daily was given on 06/30/2022 at 8AM, but staff did not initial the medication log.
- Benztropine 1MG Tab: take one tablet by mouth twice a day was given at 8AM on 06/30/2022, but staff did not initial the medication log.
- Lithium Carbonate 450MG: take one tablet by mouth twice a day was given at 8AM on 06/30/2022 and 07/08/2022, but staff did not initial the medication log.
- Tegretol XR 400MG: take one tablet by mouth twice a day were given on 06/30/2022 and 07/08/2022 at 8AM, but staff did not initial the medication log.
- Tegretol XR 200MG: take one tablet by mouth twice a day were given on 06/30/2022 at 8AM, but staff did not initial the medication log.

**REPEAT VIOLATION ESTABLISHED: LSR DATED 01/25/2022, CAP DATED 02/02/2022**

<b>R 400.14312</b>	<b>Resident medications.</b>
	(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: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

During the on-site inspection on 01/31/2024, I reviewed Resident B's medications and medication logs and found the following errors:

- Loratadine 10MG Tab: take one tablet by mouth daily as needed was administered by staff 16 times in December 2023, but staff only recorded the reason for this as needed medication three times and staff administered this as needed medication 25 times in January 2023 and only recorded the reason 18 times.

**REPEAT VIOLATION ESTABLISHED: LSR DATED 01/25/2022, CAP DATED 02/02/2022**

<b>R 400.14401</b>	<b>Environmental health.</b>
	(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.

During the on-site inspection on 01/31/2024, the hot water was outside the safe range of 105°-120° Fahrenheit in the kitchen (138.6°), bathroom #1 (131.4°), and bathroom #2 (121.8°).

**REPEAT VIOLATION ESTABLISHED: LSR DATED 01/25/2022, CAP DATED 02/02/2022**

A corrective action plan was requested and approved on 01/31/2024. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

#### **IV. RECOMMENDATION**

An acceptable corrective action plan has been received. Renewal of the license is recommended.



01/31/2024

Frodet Dawisha  
Licensing Consultant

Date