

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

March 18, 2024

Ihsan Asmar R & C Homes, Inc. 4004 Lovett Ct. Inkster, MI 48141

> RE: License #: AS820354772 Forever Care Homes 4004 Lovett Court Inkster, MI 48141

Dear Mr. Asmar:

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,

Shatorla Daniel

Shatonla Daniel, Licensing Consultant Bureau of Community and Health Systems Cadillac PI. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 919-3003

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

I. IDENTIFYING INFORMATION

License #:	AS820354772
Licensee Name:	R & C Homes, Inc.
Licensee Address:	4004 Lovett Ct. Inkster, MI 48141
Licensee Telephone #:	(248) 881-7543
Licensee/Licensee Designee:	Ihsan Asmar
Administrator:	Ihsan Asmar
Name of Facility:	Forever Care Homes
Facility Address:	4004 Lovett Court Inkster, MI 48141
Facility Telephone #:	(734) 589-8770
Original Issuance Date:	09/12/2014
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/13/2024

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed0No. of residents interviewed and/or observed0No. of others interviewed1Role:Licensee Designee

- Medication pass / simulated pass observed? Yes □ No ⊠ If no, explain. No staff in home at the time of inspection
- 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 No If no, explain.
- Meal preparation / service observed? Yes No X If no, explain.
 No residents in the facility at the time of inspection.
- 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: 203(3), 205(3), 205(4), 301(4), 301(6), 311(1), 318(5) 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:

MCL 400.734b Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.

(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006, but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

At the time of inspection, Staff- Teaira Williams' employee record reviewed did not contain a criminal background check and staff has been employed since 05/01/2022.

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:

(a) Reporting requirements.

- (b) First aid.
- (c) Cardiopulmonary resuscitation.
- (d) Personal care, supervision, and protection.
- (e) Resident rights.
- (f) Safety and fire prevention.

(g) Prevention and containment of communicable

diseases.

At the time of inspection, Staff- Teaira Williams' and Staff- Nakayla Williams' employee records reviewed did not contain a direct care worker training prior to hire date.

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 physician's 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. At the time of inspection, Staff- Teaira Williams' employee record reviewed did not contain a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health with 30 days of hire. Specifically, Ms. Williams obtained a physician's statement on 08/02/2023 but was hired on 05/01/2022.

REPEAT VIOLATION LSR DATE 03/15/2022 AND CAP DATED 03/18/2022

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.

At the time of inspection, Staff- Teaira Williams employee record reviewed did not contain testing for communicable tuberculosis at the time of hire. Specifically, Ms. Williams obtain a communicable tuberculosis x-ray testing on 10/23/2023 despite being hired on 05/01/22.

R 400.14208 Direct care staff and employee records.

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

At the time of inspection, Staff- Latita Blackman's employee record reviewed did not contain two reference checks.

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.

At the time of inspection, Resident A's records reviewed did not contain a completed and signed written assessment plan with Resident A's guardian.

REPEAT VIOLATION LSR DATE 03/15/2022 AND CAP DATED 03/18/2022

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.

At the time of inspection, Resident B's prescribed Acetaminophen 500 mg medication to administered as needed was not recorded on the medication administration record for the month of March 2024. However, there were actual medications contained in the home.

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:

(d) Initiate a review process to evaluate a resident's condition if a resident requires the repeated and prolonged use of a medication that is prescribed on an as needed basis. The review process shall include the resident's prescribing physician, the resident or his or her designated representative, and the responsible agency.

At the time of inspection, Resident B's medication administration record reviewed showed Resident B has been receiving numerous medications to be administered as needed but Resident B is receiving these medications daily. Specifically, Resident B has been receiving Hydroxyzine HCK 50mg at 8:00am, 4:00pm, and 8:00pm; Quetiapine 50mg at 8:00am and 8:00pm; Trazodone 150mg at 8:00pm daily.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

At the time of inspection, Licensee failed to practice and maintain a record of fire drills completed during the sleeping hours for the second quarter in 2023 and evening drills for first, second, and third quarter of 2022.

REPEAT VIOLATION LSR DATE 03/15/2022 AND CAP DATED 03/18/2022

IV. RECOMMENDATION

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

Shatorla Daniel

03/18/2024

Shatonla Daniel Licensing Consultant Date