



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 23, 2024

Nelima Hazra
712 Hickory Street
Niles, MI 49120

RE: License #: AF110363351
Elijah AFC Home
712 Hickory Street
Niles, MI 49120

Dear Ms. Hazra:

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 by photograph.

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 black ink that reads "Nile Khabeiry, LMSW".

Nile Khabeiry, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AF110363351
Licensee Name:	Nelima Hazra
Licensee Address:	712 Hickory Street Niles, MI 49120
Licensee Telephone #:	(269) 340-5113
Licensee/Licensee Designee:	Nelima Hazra
Administrator:	N/A
Name of Facility:	Elijah AFC Home
Facility Address:	712 Hickory Street Niles, MI 49120
Facility Telephone #:	(269) 340-4999
Original Issuance Date:	11/16/2015
Capacity:	5
Program Type:	MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/19/2024

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 4

No. of others interviewed 0 Role: N/A

- 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. Home does not hold resident funds.
- Meal preparation / service observed? Yes No If no, explain. Inspection did not occur during meal time.
- 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

IV. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 400.1407

Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(4) In situations where a resident is referred for emergency admission and the licensee agrees to accept the admission, a resident assessment plan shall be conducted within 15 calendar days following the emergency admission. The resident assessment plan shall be conducted in accordance to the provisions outlined in subrules (2) and (3) of this rule.

FINDINGS: Overdue Resident Care Agreement for Resident B.

R 400.1407

Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.

FINDINGS: Overdue Assessment Plan for Resident C.

R 400.1407

Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(9) If a resident is not under the care of a physician at the time of the resident's admission to the home, the licensee shall require that the resident or the resident's designated representative provide a written health care appraisal completed within the 90-day period before the resident's admission to the home. If a written health care appraisal is not available, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.

FINDINGS: Overdue Health Care Appraisal for Resident C

R 400.1418

Resident medications.

(1) Prescription medication, including tranquilizers, sedatives, dietary supplements, or individual special medical procedures, shall be given or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy container which shall be labeled for the specific resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws.

FINDINGS: One medication for Resident C was not in the home but on the MAR.

R 400.1425

Food service.

(3) All perishable food shall be stored at such temperature as will protect against spoilage. All potentially hazardous food shall be maintained at safe temperatures (40 degrees Fahrenheit or below or 140 degrees Fahrenheit or above), except during necessary periods of preparation and service.

FINDINGS: No thermometer in the refrigerator and freezer.

A corrective action plan was requested and approved on 04/19/2024. 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.

V. RECOMMENDATION

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

Nile Khabeiry, LMSW

4/23/24

Nile Khabeiry
Licensing Consultant

Date