

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

MARLON I. BROWN, DPA DIRECTOR

June 14, 2024

Onome Akise Rose's American Homes LLC 25083 Ross Dr. Redford, MI 48239

RE: License #: AS820344486 Ross AFC Home 25083 Ross Dr Redford, MI 48239

Dear Mr. Akise:

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,

K. Robinson

K. Robinson, MSW, Licensing Consultant Bureau of Community and Health Systems Cadillac PI. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 919-0574

> 611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909 www.michigan.gov/lara • 517-335-1980

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

I. IDENTIFYING INFORMATION

License #:	AS820344486
Licensee Name:	Rose's American Homes LLC
Licensee Address:	25083 Ross Dr. Redford, MI 48239
Licensee Telephone #:	(248) 254-2285
Licensee/Licensee Designee:	Onome Akise, Designee
Administrator:	Onome Akise
Name of Facility:	Ross AFC Home
Facility Address:	25083 Ross Dr Redford, MI 48239
Facility Telephone #:	(313) 694-3896
Original Issuance Date:	08/01/2014
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspect	ion(s):
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06/11/2024

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed01No. of residents interviewed and/or observed04No. of others interviewed01Role:Licensee designee

- Medication pass / simulated pass observed? Yes ☐ No ⊠ If no, explain. Medication administered prior to my arrival. Residents sleeping.
- 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 🗌 If no, explain.
- Fire drills reviewed? Yes 🛛 No 🗌 If no, explain.
- Fire safety equipment and practices observed? Yes \boxtimes No \square 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: 403(1), 402(2) 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:

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:

(d) Personal care, supervision, and protection.

Direct care worker, Marshawn Black was hired to work at the facility on 12/4/23; he has not completed Personal care, supervision, and protection 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.

(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.

Direct care worker, Rachael Jallow completed TB testing on 3/16/18 and 9/14/23; therefore, the licensee did not ensure testing was completed every 3 years as required.

R 400.14207 Required personnel policies.

(2) The written policies and procedures identified in subrule (1) of this rule shall be given to employees and volunteers at the time of appointment. A verification of receipt of the policies and procedures shall be maintained in the personnel records.

Both Mr. Black and Ms. Jallow lack verification of receipt of personnel policies and procedures.

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:(g) Beginning and ending dates of employment.

Licensee provided employee hire dates verbally. There is nothing written in their respective employee files to document beginning dates of employment.

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 P.C. does not have a 2024 health care appraisal completed. It was due in March.

According to Mr. Akise, the resident had a physical this year, but the doctor has yet to complete the required department form.

R 400.14312 Resident medications.

(2) Medication shall be given, taken, or applied pursuant to label instructions.

Observed Medication Administration Records for Resident P.C. that state he missed 6 pills in July of 2023 because he was "out of medication". Mr. Akise could not explain why the medication was not made available. Additionally, Mr. Akise did not provide Resident P.C.'s May 2023 medication record upon request by the department. Mr. Akise indicated he wasn't able to locate the requested document.

R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

Observed the floors in the main bathroom are cracked and severely worn.

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.

Hot water temperature tested at 135 degrees Fahrenheit.

IV. RECOMMENDATION

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

K. Kobinson

06/14/24

Kara Robinson Licensing Consultant Date