

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

MARLON I. BROWN, DPA DIRECTOR

June 28, 2024

Ellen Angeles Golden Haven Adult Foster Home LLC 52249 Hawthorne Drive Chesterfield, MI 48047

### RE: License #: AS500337345 Golden Haven Foster Home Warren 28740 Roan Drive Warren, MI 48093

Dear Ms. Angeles:

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 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 (248) 975-5053.

Sincerely,

L. Reed

LaShonda Reed, Licensing Consultant Bureau of Community and Health Systems Cadillac Place, Ste 9-100 Detroit, MI 48202 (586) 676-2877

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

# I. IDENTIFYING INFORMATION

License #:	AS500337345
Licensee Name:	Golden Haven Adult Foster Home LLC
Licensee Address:	52249 Hawthorne Drive Chesterfield, MI 48047
Licensee Telephone #:	(586) 354-0787
Licensee/Licensee Designee:	Ellen Angeles
Administrator:	Alex Angeles
Name of Facility:	Golden Haven Foster Home Warren
Facility Address:	28740 Roan Drive Warren, MI 48093
Facility Telephone #:	(586) 806-0528
Original Issuance Date:	01/08/2014
Capacity:	6
Program Type:	AGED ALZHEIMERS

# **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):	06/28/2024	
Date of Bureau of Fire Services Inspection if app	licable: N/A	
Date of Health Authority Inspection if applicable:	N/A	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 0 Role: N/A	1 5	
<ul> <li>Medication pass / simulated pass observed? Yes  No  If no, explain. I oberved medications.</li> <li>Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.</li> </ul>		
<ul> <li>Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain.</li> <li>Meal preparation / service observed? Yes X No I If no, explain.</li> </ul>		
<ul> <li>Fire drills reviewed? Yes ⊠ No □ If no, explain.</li> </ul>		
● Fire safety equipment and practices observed? Yes ⊠ No □ If no, explain.		
<ul> <li>E-scores reviewed? (Special Certification Only) Yes No N/A If no, explain.</li> <li>Water temperatures checked? Yes No If no, explain.</li> </ul>		
<ul> <li>Incident report follow-up? Yes X No I If no, explain.</li> </ul>		
<ul> <li>Corrective action plan compliance verified? Yes  CAP date/s and rule/s: CAP 07/11/2022; MCL 400.713 (3)(E); R 400.14205(3)(6); R 400.14208 (1)(f);</li> <li>R 400.14511 (1) N/A □</li> <li>Number of excluded employees followed-up? N/A </li> </ul>		

• 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 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

Direct care staff Matt Angeles did not have an annual health review completed in 2023.

REPEAT VIOLATION ESTABLISHED. LSR June 28, 2022, CAP July 8, 2022.

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.

I observed that in 2023 there was no evening drill conducted in the first quarter or the fourth quarter.

#### R 400.14402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers. I observed that there was no thermometer in the refrigerator.

## **IV. RECOMMENDATION**

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

L. Reed

06/28/2024

LaShonda Reed Licensing Consultant

Date