



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 30, 2024

Cajetan Kimfon
Aster Residence, LLC
705 Queensway
Canton, MI 48188

RE: License #: AS820417382
Aster Residence By American Angels
6934 N. Canton Center Rd
Canton, MI 48187

Dear Mr. Kimfon:

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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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,

A handwritten signature in cursive script that reads "Shatonla Daniel".

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

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

I. IDENTIFYING INFORMATION

License #: AS820417382

Licensee Name: Aster Residence LLC

Licensee Address: 6934 N. Canton Center Rd
Canton, MI 48187

Licensee Telephone #: (313) 960-0934

Licensee/Licensee Designee: Cajetan Kimfon

Administrator: Cajetan Kimfon

Name of Facility: Aster Residence By American Angels

Facility Address: 6934 N. Canton Center Rd
Canton, MI 48187

Facility Telephone #: (313) 960-0934

Original Issuance Date: 01/23/2024

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/18/2024

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 4
No. of others interviewed 1 Role: Licensee Designee

- 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.
- 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:

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- Angel Strok employee file 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 obtained within 30 days of an individual's employment.

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- Lavina Ross employee file reviewed did not contain a current communicable tuberculosis testing with last test dated 07/13/2020.

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.

At the time of inspection, Staff- Lavina Ross employee file reviewed did not contain an annual health status review with the last physical being 08/02/2022.

R 400.14206 Staffing requirements.

(3) Any individual, including a volunteer, shall not be considered in determining the ratio of direct care staff to residents unless the individual meets the qualifications of a direct care staff member.

At the time of inspection, Staff- Tiffany Carr and Staff- Eric Jemison employee files reviewed showed Ms. Carr and Mr. Jemison were working alone without being trained. Specifically, Ms. Carr was hired on 06/20/2024 but was not trained until 07/12/2024 and Mr. Jemison was hired on 06/24/2024 but was not trained until 07/04/2024.

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- Angel Strok, Staff- Lavina Ross, and Staff- Tiffany Carr employee files reviewed did not contain two reference checks.

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:

(i) Required verification of the receipt of personnel policies and job descriptions.

At the time of inspection, Staff- Eric Jemison employee file reviewed did not contain a verification of receipt of job description.

R 400.14210 Resident register.

A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:

- (a) Date of admission.
- (b) Date of discharge.
- (c) Place and address to which the resident moved, if known.

At the time of inspection, licensee designee did not maintain a resident register with admissions date from the date of licensure.

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, Residents B-E records reviewed did not contain a written assessment plan completed at the time of admission.

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

(a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.

(b) A description of services to be provided and the fee for the service.

(c) A description of additional costs in addition to the basic fee that is charged.

(d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.

(e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.

(f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.

(g) An agreement by the resident to follow the house rules that are provided to him or her.

(h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.

(i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.

(j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.14315.

(k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.

(l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.

At the time of inspection, Residents B-E records reviewed did not contain a resident care agreement completed at the time of admission.

R 400.14310

Resident health care.

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

At the time of inspection, Residents A- F records reviewed did not contain the following:

- Weights were not taken for the months of April and May in 2024 for Residents A and F.
- Weights were not taken for the months of January through May in 2024 for Residents B- E.

R 400.14312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified 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, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

At the time of inspection, Residents B- D medication administration records and the facility medication cart was reviewed and showed various over the counter medications being administered without a prescription label.

At the time of inspection, Resident B's Tamsulosin 0.4mg tablet had the label changed with a black marker but not a new pharmacy prescription label.

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, Residents A-F medication administration record (MAR) reviewed showed the following:

Resident B's MAR was not initialed by staff for Eliquis 2.5 and Aripiprazole 5mg from February 12, 2024 to February 29, 2024 at the 9:00pm dosage; Diltiazem 180mg, Omeprazole 40mg, Loratadine 10mg, Furosemide 20mg from May 16, 2024 to May 31, 2024 for the 9:00am dosage; and Lorazepam .5mg and Morphine for the month of July to be administered by staff on an as needed basis but no time was listed.

Resident C's MAR did not contain Rosuvastatin and Ketoconazole 2% cream and was not initialed by staff from July 1, 2024, to July 17, 2024.

Resident D's MAR did not have a time listed for Olanzapine 2.5mg to be administered on an as needed by staff in January through June 2024.

Resident E's MAR was not initialed by staff from July 1, 2024, to July 17, 2024 and the entire month of June 2024 for Polyethylene Glycol Powder.

R 400.14313 Resident nutrition.

(6) Records of menus, including special diets, shall be kept by the licensee for 1 calendar year.

At the time of inspection, licensee designee did not keep a record a menus and special diets for the last six months.

R 400.14315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection, Residents B- E records reviewed did not contain a completed Funds Part II form for the months of January through June in 2024.

At the time of inspection, Residents A and F records reviewed did not contain a completed Funds Part II form.

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 designee did not practice and maintain a record of fire drills with daytime, evening, and sleeping hours for the first quarter and evening and sleeping hours for second quarter in 2024.

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.

At the time of inspection, I observed the facility to have a hot water temperature to be at 130 degrees Fahrenheit at the faucet.

R 400.14408 Bedrooms generally.

(2) A living room, dining room, hallway, or other room that is not ordinarily used for sleeping or a room that contains a required means of egress shall not be used for sleeping purposes by anyone.

At the time of inspection, I observed a bed, dresser, and box fan to be placed in the second bathroom shower area with a key lock.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

Shatola Daniel

07/30/2024

Licensing Consultant Date

Approved by:

A. Hunter

07/30/2024

Area Manager Date