



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 17, 2024

Aimante Kinoro
345 Alewa Dr Nw
GRAND RAPIDS, MI 49504

RE: License #: AF410411580
Investigation #: 2024A0583043
Aimante Family Assistance

Dear Ms. Kinoro:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 333-9702

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AF410411580
Investigation #:	2024A0583043
Complaint Receipt Date:	07/11/2024
Investigation Initiation Date:	07/11/2024
Report Due Date:	08/10/2024
Licensee Name:	Aimante Kinoro
Licensee Address:	345 Alewa Dr NW GRAND RAPIDS, MI 49504
Licensee Telephone #:	(616) 954-5568
Name of Facility:	Aimante Family Assistance
Facility Address:	345 Alewa Dr Nw Grand Rapids, MI 49504
Facility Telephone #:	(616) 954-5568
Original Issuance Date:	02/15/2023
License Status:	REGULAR
Effective Date:	11/01/2023
Expiration Date:	10/31/2025
Capacity:	4
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Resident A and B were left at the premises without a responsible person.	Yes

III. METHODOLOGY

07/11/2024	Special Investigation Intake 2024A0583043
07/11/2024	Special Investigation Initiated - Telephone
07/12/2024	APS Referral
07/12/2024	Inspection Completed On-site
07/12/2024	Exit Conference Licensee Aimante Kinoro

ALLEGATION: Resident A and B were left at the premises without a responsible person.

INVESTIGATION: On 07/11/2024 I received the complaint allegation via voicemail message from the complainant. The complainant stated that recently, the complainant had a scheduled appointment at the facility with Resident A. The complainant stated that when she arrived at the premises, there were no staff present and Resident A and Resident B were at the premises with only Resident B's "ABA therapist". The complainant stated that she texted licensee Aimante Kinoro and Ms. Kinoro stated that her vehicle "had broken down" but she was on her way back to the facility. The complainant stated that approximately five to ten minutes later Ms. Kinoro arrived at the facility with staff Serugo Willy.

On 07/11/2024 I interviewed licensee Aimonte Kinoro via telephone. Ms. Kinoro stated that on 07/10/2024 she was at her apartment and her vehicle was stuck in the garage due to a power outage. Ms. Kinoro stated that at approximately 10:20 AM she telephoned her husband Serugo Willy and requested that he come pick her up from the apartment and drive her to the facility to work. Ms. Kinoro stated that she asked Mr. Willy to bring Resident A with him and leave Resident B at the facility under the supervision of his "ABA therapist". Ms. Kinoro stated that Mr. Willy left both residents at the facility with Resident B's ABA therapist and picked her up from her apartment. Ms. Kinoro stated that Mr. Willy was gone from the premises for approximately ten minutes leaving the residents without proper supervision. Ms.

Kinoro acknowledged that Resident B’s ABA therapist is not a responsible person and cannot provide supervision for residents.

On 07/11/2024 I interviewed staff Serugo Willy via telephone. Mr. Willy stated that he was working at the facility the morning of 07/10/2024. Mr. Willy stated that on the morning of 07/10/2024, he was working independently at the facility. Mr. Willy stated that at approximately 10:20 AM he received a telephone call from Aimante Kinoro requesting that he pick her up because her car was stuck in the garage. Mr. Willy stated that he left Resident A and Resident B at the facility with Resident B’s ABA therapist while he drove to pick up Ms. Kinoro. Mr. Willy stated that he was absent from the facility for approximately 15 minutes while he left Resident A and Resident B at the facility without a responsible person. Mr. Willy stated that he has never left residents alone at the facility in past.

On 07/12/2024 I emailed the complaint allegation to Adult Protective Services Centralized Intake.

On 07/12/2024 I completed an onsite investigation at the facility. I observed that licensee Aimonte was present and supervising the care needs of Resident A, Resident B, and Resident C.

Resident A was observed as appropriately dressed and groomed. Resident A stated that he could not recall the 07/10/2024 incident and stated that he couldn’t remember if he has been unsupervised by staff at the facility.

Resident B was observed as appropriately dressed and groomed. Resident B was unable to complete an interview due to symptoms his Autism diagnosis.

Resident C stated that he has never been left unsupervised by staff at the facility and he is happy with the care provided.

On 07/12/2024 I completed an Exit Conference with licensee Aimonte Kinoro in person at the facility. Ms. Kinoro agreed that a violation had occurred due to staff Serugo Willy leaving residents without a responsible person on the premises on 07/10/2024. Ms. Kinoro agreed to submit an acceptable Corrective Action Plan.

APPLICABLE RULE	
R 400.1410	Resident protection.
	A licensee or responsible person shall always be on the premises when a resident is in the home.
ANALYSIS:	Staff Serugo Willy stated that on the morning of 07/10/2024, he was working independently at the facility and left Resident A and Resident B at the facility without a responsible person for about 15 minutes.

	<p>Licensee Aimonte Kinoro stated that Mr. Willy left both residents at the facility with Resident B's ABA therapist and was gone from the premises for approximately "ten minutes" leaving the residents without proper supervision.</p> <p>A preponderance of evidence has established violation of the applicable rule; on 07/10/2024 Resident A and Resident B were left at the premises without a responsible person.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action, I recommend no change to the license.



07/16/2024

Toya Zylstra
Licensing Consultant

Date

Approved By:



07/17/2024

Jerry Hendrick
Area Manager

Date