



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

October 30, 2024

Rene Goupayou  
12921 Oak Park Blvd  
Oak Park, MI 48237

RE: License #: AS630399856  
Diamond Care  
12921 Oak Park Boulevard  
Oak Park, MI 48237

Dear Rene Goupayou:

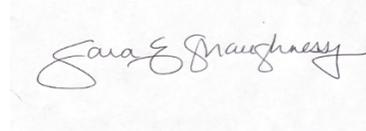
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.

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,

A handwritten signature in cursive script, reading "Sara E. Shaughnessy", written in black ink on a light-colored background.

Sara Shaughnessy, MA  
Adult Foster Care Licensing Consultant  
Bureau of Community and Health Systems  
3026 W. Grand Blvd. Ste 9-100  
Detroit, MI 48202  
Phone: 248-320-3721  
Fax: 517-763-0204

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630399856
<b>Licensee Name:</b>	Rene Goupayou
<b>Licensee Address:</b>	23200 Gardner St Oak Park, MI 48237
<b>Licensee Telephone #:</b>	(734) 444-6192
<b>Name of Facility:</b>	Diamond Care
<b>Facility Address:</b>	12921 Oak Park Boulevard Oak Park, MI 48237
<b>Facility Telephone #:</b>	(734) 444-6192
<b>Original Issuance Date:</b>	05/14/2020
<b>Capacity:</b>	4
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/29/2024

Date of Bureau of Fire Services Inspection if applicable: NA

Date of Health Authority Inspection if applicable: NA

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 0

No. of others interviewed 1 Role: Licensee

- 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.  
Inspection did not take place during mealtime, adequate food was observed.
- 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:  
11/22/2022;as103(5), as203(1), as205(6), as301(10), as301(9), as301(4),  
as403(5), as403(2), as402(3) 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:

<b>R 330.1803</b>	<b>Facility environment; fire safety.</b>
	<p>(1) A facility that has a capacity of 4 to 6 clients shall be equipped with an interconnected multistation smoke detection system which is powered by the household electrical service and which, when activated, initiates an alarm that is audible in all areas of the home. The smoke detection system shall be installed on all levels, including basements, common activity areas, and outside each sleeping area, but excluding crawl spaces and unfinished attics, so as to provide full coverage of the home. The system shall include a battery backup to assure that the system is operable if there is an electrical power failure and accommodate the sensory impairments of clients living in the facility, if needed. A fire safety system shall be installed in accordance with the manufacturer's instructions by a licensed electrical contractor and inspected annually. A record of the inspections shall be maintained at the facility.</p>

Licensee, Rene Goupayou, did not obtain annual inspections by a licensed electrical contractor of his fire safety system for 2023 and 2024.

<b>R 400.14203</b>	<b>Licensee and administrator training requirements.</b>
	<p>(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:</p> <p>(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.</p>

Licensee, Rene Goupayou, did not provide documentation of having completed 16 hours of training in the year 2023.

**REPEAT VIOLATION ESTABLISHED**

**Reference renewal licensing study report dated: 11/14/2022; CAP dated: 11/21/2022.**

<b>R 400.14205</b>	<b>Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.</b>
	(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.

Rene Goupayou and his employee, Pricila Chi, did not have health reviews on file for the year 2023 and 2024.

**REPEAT VIOLATION ESTABLISHED**

**Reference renewal licensing study report dated: 11/14/2022; CAP dated: 11/21/2022.**

<b>R 400.14207</b>	<b>Required personnel policies.</b>
	(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.

There was no verification of receipt of the policies and procedures in the personnel file of Pleasure Nusah.

<b>R 400.14208</b>	<b>Direct care staff and employee records.</b>
	(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.

There was no verification of reference checks in the personnel file of Pleasure Nusah.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(2) Medication shall be given, taken, or applied pursuant to label instructions.

Resident A was prescribed albuterol sulfate HFA 108MCG/ACT, spray, inhale 2 puffs by mouth, every four to six hours, as needed. This medication was listed on Resident A's MAR, but the medication was not in the home at the time of the onsite inspection.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(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: (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

Resident B is prescribed Oxcarbazepine 300mg PO tab, take one tablet by mouth, twice daily. The September 2024 Medication Administration Record was not initialed for the morning dose on 09/29 and 09/30.

<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	(2) 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.

During the onsite inspection, there was no completed Funds I sheet on file for resident B.

<b>R 400.14316</b>	<b>Resident records.</b>
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:

	<p>(a) Identifying information, including, at a minimum, all of the following:</p> <ul style="list-style-type: none"> <li>(i) Name.</li> <li>(ii) Social security number, date of birth, case number, and marital status.</li> <li>(iii) Former address.</li> <li>(iv) Name, address, and telephone number of the next of kin or the designated representative.</li> </ul>
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During the onsite inspection, the resident record for resident A was missing a social security number and contact information for guardian.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the onsite inspection, a doorknob was observed to be missing from Resident A's closet door.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

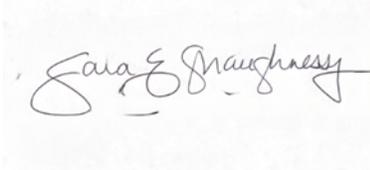
During the inspection, there was no nonskid surfacing installed in the bathtub, nor were there any handrails.

<b>R 400.14410</b>	<b>Bedroom furnishings.</b>
	(1) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.

During the onsite inspection, the bedroom of Resident's C and D did not have a mirror.

## II. RECOMMENDATION

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

A handwritten signature in black ink that reads "Sara Shaughnessy". The signature is written in a cursive style with a horizontal line extending from the end of the name.

10/30/2024

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Sara Shaughnessy  
Licensing Consultant

Date