



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 11, 2024

Zad White
Caring Hands AFC
PO Box 37618
Oak Park, MI 48237

RE: License #: AS820403641
Investigation #: 2025A0778002
Caring Hands IV

Dear Mr White:

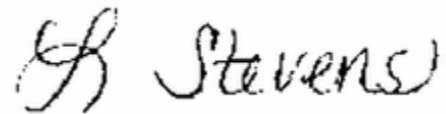
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "LaKeitha Stevens". The first name is written in a stylized, cursive script, and the last name is written in a more legible, slightly cursive script.

LaKeitha Stevens, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3055

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS820403641
Investigation #:	2025A0778002
Complaint Receipt Date:	10/17/2024
Investigation Initiation Date:	10/17/2024
Report Due Date:	12/16/2024
Licensee Name:	Caring Hands AFC
Licensee Address:	24270 Ithaca Oak Park, MI 48237
Licensee Telephone #:	(248) 670-9787
Administrator:	Zad White
Licensee Designee:	Zad White
Name of Facility:	Caring Hands IV
Facility Address:	20461 Lauder Detroit, MI 48235
Facility Telephone #:	(248) 670-9787
Original Issuance Date:	03/01/2022
License Status:	REGULAR
Effective Date:	09/01/2024
Expiration Date:	08/31/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Staff not trained.	Yes
The facility only has food during inspections, and it is not good.	No
The facility is dirty.	No

III. METHODOLOGY

10/17/2024	Special Investigation Intake 2025A0778002
10/17/2024	Special Investigation Initiated - On Site Unannounced onsite inspection. I completed interviews with staff ReKisha Berry, Nissa Saunders and Shaquita Muce. I completed additional interviews with Residents A-C and a telephone interview with home manager Lucinda Dick.
10/18/2024	Referral - Recipient Rights Referral generated
10/18/2024	APS Referral
10/18/2024	Contact - Document Received Received training logs for staff
10/18/2024	Exit Conference Attempted exit conference. I left a detailed message to call me back.
11/14/2024	Exit Conference Telephone exit conference with licensee designee Zad White.
11/14/2024	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Staff not trained.

INVESTIGATION: On October 18, 2024, I received training logs from the home manager, Lucinda Dick. She submitted logs for all individuals employed with the

facility. Ms. Dick could not produce a direct care worker training log for staff, Nissa Saunders. According to Ms. Dick she thought new staff had 90 days to receive training. I informed Ms. Dick that is incorrect. Ms. Dicks stated Ms. Saunders is currently counted in the staff to resident ratio. She indicated there are three staff on shift because two residents require one-to-one staffing. The one-to-one staff were ReKesha Berry and Shaquita Muce. Nissa Saunders was responsible for the remaining residents. I informed Ms. Dick staff must be trained before the assumption of duties. Ms. Saunders is currently working staff in the facility with the official hire date of 09/18/2024. Therefore, she should be completely trained.

During my interview with Ms. Saunders, she stated she worked and was responsible for the care of the residents, cleaning etc.

Per my interview with the licensee designee Mr. Zad White, Nissa Saunders is currently enrolled in a direct care worker training and will be begin Monday October 21, 2024.

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	<p>(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:</p> <ul style="list-style-type: none"> (a) Reporting requirements. (b) First aid. (c) Cardiopulmonary resuscitation. (d) Personal care, supervision, and protection. (e) Resident rights. (f) Safety and fire prevention. (g) Prevention and containment of communicable diseases.

ANALYSIS:	<p>Staff Nissa Saunders was hired with the facility and started working in the home on 09/18/2024. As of 10/18/2024, Ms. Saunders had not completed direct care worker training. Hence, Ms. Saunders was not competent in all required areas before performing assigned tasks. At the time of inspection, Ms. Saunders was currently on shift with two additional staff. Those staff were responsible for one-to-one staffing and Ms. Saunders was responsible for the remaining residents.</p> <p>The home manager, Lucinda Dick stated she thought staff had 90 days after hire to obtain training.</p> <p>According to the licensee designee Zad White, Nissa Saunders is currently enrolled in a direct care worker training, and it will begin on October 21, 2024.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: The facility only has food during inspections, and it is not good.

INVESTIGATION: On 10/18/2024, I completed an onsite inspection. I interviewed Residents A-C and observed the food supply to be sufficient. I observed the facility to have various meats including breakfast sausage, chicken legs, fish, sirloin steak, hot dogs, chicken nuggets, smoked sausage and polish sausage. The also had waffles, mixed veggies, apple sauce, eggs, milk, lettuce, peanut butter, jelly, cucumbers, tomatoes, sweet potatoes, white potatoes, fruit, tuna and condiments to name a few. I observed a menu to be posted on the refrigerator. According to the menu, lunch for the day would consist of egg salad and fruit. Dinner would be burgers, lettuce, baked beans, fruit and milk. I observed all food items for the day to be present in the facility.

Residents A-C stated for breakfast they stated sausage, English muffin and boiled eggs. They stated for dinner the prior night, they had pork chops, mashed potatoes and corn. Residents A-C stated they receive enough food, enjoy the taste and they are comfortable with food provided. Residents A-C indicated they receive three meals a day and snacks.

On 12/6/2024, I conducted telephone interviews with Guardian C and Guardian D. Both indicated Resident C nor Resident D complained of the food provided. Guardian D stated staff is always preparing a variety of food for the residents and the residents eat well.

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.

ANALYSIS:	<p>Based upon my personal observations and interviews with Residents A-C, I conclude there is no evidence of the residents not receiving 3 regular nutritious meals.</p> <p>I observed the facility to have enough food and a variety of food.</p> <p>The facility has a posted menu, and all items noted on the menu was available in the facility.</p> <p>I interviewed Residents A-C. Each of the residents stated they had no complaints with the food provided. The stated they receive a variety of food; they receive enough food and are comfortable with food provided to them.</p> <p>Guardian C and D stated the residents have no complaints regarding the food. Guardian D stated staff provide a variety of food and the residents eat well.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: The facility is dirty.

INVESTIGATION: On 10/18/2024, I completed an unannounced onsite inspection and interviewed staffs Rekisha Berry, Nissa Saunders, Shaquita Muce and Residents A-C. When I entered the home staff Nissa Saunders was moping the facility. The facility was neat and orderly. Staff Rekisha Berry, Nissa Saunders and Shaquita Muce stated they rotate keeping the facility clean. Residents A-C stated staff keep the facility clean. I observed Resident A-C's bedrooms to be neat and clean.

Per my telephone interview with Guardian C and Guardian D, this allegation is not true. They stated the home is not dirty. Guardian D stated staff is always cleaning the facility. She stated there has not been a time she entered the home and staff wasn't cleaning.

On 11/14/2024, I completed a telephone exit conference with licensee designee Zad White. I discussed the allegations of staff not being trained, food supply and the facility being dirty. Mr. White agreed with the findings.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	<p>Based upon my investigation which included interviews with staff and residents, there is no evidence the home is not maintained for the safety and well being of the residents. There is no evidence of the home being dirty.</p> <p>I completed an unannounced onsite inspection. As I entered the home, staff, Nissa Saunders was moping.</p> <p>I interviewed staff Rekisha Berry, Nissa Saunders and Shaquita Muce. Each staff indicated they rotate cleaning to keep the facility neat.</p> <p>I interviewed Residents A-C. The residents stated staff keep the facility clean.</p> <p>Guardian C and Guardian D stated the home is not dirty. Guardian D stated staff is always cleaning the facility.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Upon submission of an acceptable corrective action plan, I recommend the status of the license remain unchanged.

L Stevens

11/14/2024

LaKeitha Stevens
Licensing Consultant

Date

Approved By:

A. Hunter

12/11/2024

Ardra Hunter
Area Manager

Date