

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

MARLON I. BROWN, DPA DIRECTOR

December 13, 2024

Rodney Robinson Forrest Haven Ltd 867 E Grand Blvd Detroit, MI 48207

> RE: License #: AM820010011 Forrest Haven East 867 E Grand Boulevard Detroit, MI 48207

Dear Mr. Robinson:

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.

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 (313) 456-0380.

Sincerely,

3 Stevens 4

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

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

# I. IDENTIFYING INFORMATION

License #:	AM820010011			
Licensee Name:	Forrest Haven Ltd			
Licensee Address:	867 E Grand Blvd Detroit, MI 48207			
Licensee Telephone #:	(313) 704-4990			
Licensee/Licensee Designee:	Rodney Robinson, Designee			
Administrator:				
Name of Facility:	Forrest Haven East			
Facility Address:	867 E Grand Boulevard Detroit, MI 48207			
Facility Telephone #:	(313) 922-6006			
Original Issuance Date:	03/08/1986			
Capacity:	12			
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED			

## **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):

12/10/2024

Date of Bureau of Fire Services Inspection if applicable: 09/20/2024, 11/01/2024

Date of Health Authority Inspection if applicable:

No.	of staff interviewed and/or c	bse	rved		2
No.	lo. of residents interviewed and/or observed			4	
No.	of others interviewed	N/A	Role:		_

- Medication pass / simulated pass observed? Yes 🗌 No 🖂 If no, explain. A worksheet inspection was completed.
- 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 X If no, explain.
  A full worksheet inspection was completed.
- 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.
  N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: LSR Dated 12/1/22, Rules 203(1), 205(6), 301(4), 301(9), 310(2), 315(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:

## R 330.1803 Facility environment; fire safety.

# (3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3-month period.

At the time of inspection there was no documentation of having completed fire drills for September-December of 2023.

## R 330.1803 Facility environment; fire safety.

(6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a

copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 months from the date of the finding to do either of the following:

(a) Improve the score to at least the "slow" category.

An Evacuation e-score was not completed for Resident R.B. with in 30 days of admission.

# R 400.14207 Required personnel policies.

(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.

Staff Deanna Vanleer did not have a signed personal policy and job description in her staff file.

#### 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:
 (e) Verification of experience, education, and training.

Staff Deanna Vanleer's file did not have verification of education.

## 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.

Staff Deanna Vanleer's file did not have verification of reference checks.

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

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's

admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days

after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Resident R.B. did not have a written health care at admission or within 30days.

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

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Resident R.B. did not have a written resident care agreement.

#### {REPEAT VIOLATION SEE LSR DATE 12/1/2022}

#### 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. Resident R.B. did not have a weight at admission.

# {REPEAT VIOLATION SEE LSR DATE 12/1/2022}

## 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.

At the time of inspection:

The shower tile was cracking in the bathroom located inside of bedroom #1.

The paint was peeling on the walls inside bedroom #5

The refrigerator was not equipped with a thermometer

The water temperature was 142 degrees.

# IV. RECOMMENDATION

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

3 Stevens 12/13/2024

LaKeitha Stevens Licensing Consultant Date