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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

July 15, 2025

Regina Amadi Platinum Care, Inc. 3129 Golfview Drive Saline, MI 48176

RE: License #: AS820292741

Heartlys TLC 13541 McGuire Taylor, MI 48180

#### Dear Ms. Amadi:

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-

0439.

Sincerely,

Zan A Rale Edith Richardson, Licensing Consultant

Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100

3026 W. Grand Blvd Detroit, MI 48202

(313) 919-1934

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820292741

**Licensee Name:** Platinum Care, Inc.

**Licensee Address:** 3129 Golfview Drive

Saline, MI 48176

**Licensee Telephone #:** (734) 330-3262

**Licensee/Licensee Designee:** Regina Amadi, Designee

Administrator: Regina Amadi

Name of Facility: Heartlys TLC

Facility Address: 13541 McGuire

Taylor, MI 48180

**Facility Telephone #:** (248) 941-1140

Original Issuance Date: 10/16/2007

Capacity: 5

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

## II. METHODS OF INSPECTION Date of On-site Inspection(s): 07/11/2025 Date of Bureau of Fire Services Inspection if applicable: Date of Health Authority Inspection if applicable: 2 5 No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role: Medication pass / simulated pass observed? Yes ⋈ No ☐ If no, explain. Medication(s) and medication record(s) reviewed? Yes $\square$ No $\square$ 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 I If no, explain. E-scores reviewed? (Special Certification Only) Yes No N/A If no, explain. Water temperatures checked? Yes No If no, explain.

# III. DESCRIPTION OF FINDINGS & CONCLUSIONS

N/A

 $N/A \times$ 

This facility was found to be in non-compliance with the following rules:

Incident report follow-up? Yes \( \square\) No \( \text{N}\) If no, explain.

Number of excluded employees followed-up?

Variances? Yes ☐ (please explain) No ☐ N/A ☒

Corrective action plan compliance verified? Yes CAP date/s and rule/s:

N/A 🖂

#### 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.

The licensee did not obtain a statement signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff Jameelah Jameh and Moses Ufere within 30 days of their 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.

The licensee did not obtain current TB test results before direct care staff Jameelah Jameh's and Moses Ufere's employment.

#### 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.

Employee records did not contain verification of reference checks.

#### 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 residents' written assessment plan on file in the home.

The residents' assessment plans were not completed annually. Resident A's assessment plan was last completed in 2023. Resident B's assessment plan was dated 03/15/2024.

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

Resident care agreements were not completed annually. Resident A's resident care agreement was last completed in 2023.

Resident B's resident care agreement was dated 03/15/2024.

### R 400.14315 Handling of resident funds and valuables.

(13) A licensee shall provide a complete accounting, on an annual basis and upon request, of all resident funds and valuables which are held in trust and in bank accounts or which are paid to the home, to the resident, or to his or her designated representative. The accounting of a resident's funds and valuables which are held in trust or which are paid to the home shall also be provided, upon the resident's or designated representative's request, not more than 5 banking days after the request and at the time of the resident's discharge from the home.

The licensee has been accepting Resident A's allowance for safekeeping. However, there is no accounting for these funds.

# 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.

The licensee did not complete a fire drill during sleeping hours in the first and second quarters of 2025.

### R 400.14402 Food service.

(2) All food shall be protected from sources that are approved or considered satisfactory by the department and shall be safe for human consumption, clean, wholesome and free from spoilage, adulteration, and misbranding.

The food in the newer basement freezer was not safe for human consumption. The freezer was not working properly, and the food had thawed. The date on some of the food was 07/02/2025.

### R 400.14507 Means of egress generally.

(6) Occupied room door hardware shall be equipped with positive latching, non-locking-against-egress hardware.

Locking against egress hardware was on the bedroom doors.

#### IV. RECOMMENDATION

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

Edith Richardson

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Licensing Consultant

07/15/2025

Date

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