

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

August 14, 2025

Ateria Young Infinity Care LLC P.O. Box 40658 Redford, MI 48240

> RE: License #: AS820417150 Investigation #: 2025A0778037

> > **Dunning 3 AFC**

Dear Ms. Young:

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) 456-0439.

Sincerely,

LaKeitha Stevens, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100 3026 W. Grand Blvd

of Stevens

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 #:	AS820417150
Investigation #:	2025A0778037
mvestigation //.	2020/10110001
Complaint Receipt Date:	06/27/2025
Investigation Initiation Data	00/07/0005
Investigation Initiation Date:	06/27/2025
Report Due Date:	08/26/2025
Licensee Name:	Infinity Care LLC
Licensee Address:	P.O. Box 40658
Licensee Address.	Redford, MI 48240
Licensee Telephone #:	(313) 516-7947
Administrator:	Ateria Young, Designee
Administratori	Attend Fourig, Booignee
Licensee Designee:	Ateria Young, Designee
Name of Facility	Dunning 2 AFC
Name of Facility:	Dunning 3 AFC
Facility Address:	26135 Dunning
	Inkster, MI 48239
Facility Telephone #:	(313) 789-7705
Tuenty Telephone #.	(313) 103-1103
Original Issuance Date:	02/15/2024
License Cteture	DECLUAD
License Status:	REGULAR
Effective Date:	02/15/2025
Expiration Date:	02/14/2027
Capacity:	5
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

### II. ALLEGATION(S)

Violation Established?

Staff slept on the couch during her work period affecting other	Yes
clients when they needed assistance. This happened over 5 times.	

#### III. METHODOLOGY

06/27/2025	Special Investigation Intake 2025A0778037
06/27/2025	Special Investigation Initiated - On Site Face to face interview with Residents A-D and staff, Lashonda James, Domonique Garrett
06/27/2025	Referral - Recipient Rights Referral sent
06/27/2025	APS Referral
07/03/2025	Contact - Telephone call made Staff, Natasha Simpson
07/03/2025	Exit Conference Telephone exit with licensee designee, Ateria Young
07/03/2025	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Staff slept on the couch during her work period affecting other clients when they needed assistance. This happened over 5 times.

**INVESTIGATION:** On 06/27/2025, I completed an unannounced onsite inspection. I interviewed Residents A-D. Each of the residents stated staff, Natasha Simpson,

sleeps on the facility couch while on shift. They indicated she is the only staff member during the midnight shift. According to Residents A-D they've tried to wake her up and she becomes angry and upset. They indicated she frequently sleeps during her shift and doesn't want to be bothered. According to Resident D, on one occasion Ms. Simpson slept in the empty bed in her room before another resident was admitted to the facility. Ms. Simpson sleeping in her room affected Resident D's privacy. Resident A stated she tried to wake Ms. Simpson because she wanted a snack, and Ms. Simpson refused her snack and became angry. Resident C indicated she tried to wake Ms. Simpson to make a telephone call when Ms. Simpson became upset with her.

While onsite I completed interviews with staff, Lashonda James and Dominique Garrett. They indicated the residents recently spoke with the licensee designee regarding Ms. Simpson sleeping on shift.

On 07/03/2025, I completed a telephone interview with staff Natasha Simpson. Ms. Simpson denied sleeping at the facility during her shift. She stated she is unsure why others stated she was asleep.

On 07/03/2025, I completed a telephone interview and exit conference with licensee designee, Ateria Young. Ms. Young stated this is not the first time she has been made aware of Ms. Simpson sleeping on shift and not adhering to her responsibilities. She stated Ms. Simpson was previously warned about sleeping and received a write-up. Ms. Young indicated Ms. Simpson will be terminated due to continuously sleeping on shift.

APPLICABLE RULE		
R 400.14206	Staffing requirements.	
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.	

## ANALYSIS: There is sufficient evidence to suggest sufficient staff were not on duty for the supervision, personal care and protection of the residents. Residents A-D stated staff, Natasha Simpson repeatedly slept on her shift. They indicated she was the only staff on the midnight shift. In addition, they stated when they tried to wake her, she would become upset and angry; not wanting to be bothered. Resident A stated Ms. Simpson refused her snack and became upset because she was awakened. Resident C stated Ms. Simpson because upset when she woke her up requesting a telephone call. Resident D stated that Ms. Simpson slept in the empty bed in her room, thus affecting her privacy. I completed a telephone interview with licensee designee, Ateria Young. She stated she has been made aware of the staff, Natasha Simpson sleeping on shift. She stated she has written

her up previously for sleeping but plans to terminate her.

**CONCLUSION:** 

**VIOLATION ESTABLISHED** 

#### IV. RECOMMENDATION

Area Manager

of Stevens

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

LaKeitha Stevens	Date
Licensing Consultant	
Approved By:	
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CLATTINON	
3.11 60	
	08/14/2025
Ardra Hunter	 Date