

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 9, 2021

Naily Baroya 240 S Main Street Three Rivers, MI 49093

RE: License #: AF750391975

Naily's AFC Home 240 S Main Street Three Rivers, MI 49093

Dear Ms. Baroya:

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 (517) 284-9730.

Sincerely,

Eli DeLeon, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (269) 251-4091

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

I. IDENTIFYING INFORMATION

License #: AF750391975

Licensee Name: Naily Baroya

Licensee Address: 240 S Main Street

Three Rivers, MI 49093

Licensee Telephone #: (269) 548-8929

Licensee/Licensee Designee: Naily Baroya

Administrator: N/A

Name of Facility: Naily's AFC Home

Facility Address: 240 S Main Street

Three Rivers, MI 49093

Facility Telephone #: (909) 534-9737

Original Issuance Date: 10/15/2018

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODS OF INSPECTION

Dat	e of On-site Inspection(04/06/2021		
Date of Bureau of Fire Services Inspection if applicable: N/A				
Date of Health Authority Inspection if applicable:			N/A	
Inspection Type:		☐ Interview and Observation☐ Combination	n ⊠ Worksheet □ Full Fire Safety	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:			1 2	
•	Medication pass / simu	ulated pass observed? Yes $oxtimes$	No 🗌 If no, explain.	
•	Medication(s) and medication record(s) reviewed? Yes $oximes$ No $oximes$ If no, explain			
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.			
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.			
•	Fire safety equipment and practices observed? Yes \boxtimes No \square If no, explain.			
•	E-scores reviewed? (Special Certification Only) Yes \(\subseteq \text{No} \subseteq \text{N/A} \text{ \index} \) If no, explain. Water temperatures checked? Yes \(\subseteq \text{No} \subseteq \text{If no, explain.} \)			
•	Incident report follow-up? Yes ⊠ No □ If no, explain.			
•	N/A 🖂	compliance verified? Yes	CAP date/s and rule/s: N/A ⊠	
•	_		IVA 🔼	
•	Variances? Yes (p	lease explain) No □ N/A ⊠		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in substantial non-compliance with the following rules and requirements:

R 400.1426 Maintenance of premises.

(3) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

Several cracked windows on the second floor of the facility.

R 400.1426 Maintenance of premises.

(4) Floors, interior walls, and ceilings shall be sound, in good repair, and maintained in a clean condition.

Several areas of carpet and linoleum need to be repaired or replaced.

R 400.1426 Maintenance of premises.

(1) The premises shall be maintained in a clean and safe condition.

Flooring and walls need to be cleaned.

R 400.1440 Heat-producing equipment.

(3) Where conditions indicate a need for inspection, heatproducing equipment shall be inspected by a qualified inspection service. If there are violations, a copy of the inspection report shall be submitted to the department, together with a written corrective action plan. A copy of the certificate of approval from the qualified inspection service shall be maintained in the home and available for department review.

Connections to and from the Boiler in this facility need to be examined for safety.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

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	04/09/2021		
Eli DeLeon	Date		
Licensing Consultant			