



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 19, 2022

Jacob Murphy
Hillcrest AFC, LLC
7733 Kingsley Road
Kingsley, MI 49649

RE: License #: AM280384609
Investigation #: 2022A0870012
Hillcrest AFC

Dear Mr. Murphy:

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 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 (231) 922-5309.

Sincerely,

A handwritten signature in dark ink, appearing to read "Bruce A. Messer".

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM280384609
Investigation #:	2022A0870012
Complaint Receipt Date:	01/10/2022
Investigation Initiation Date:	01/11/2022
Report Due Date:	02/09/2022
Licensee Name:	Hillcrest AFC, LLC
Licensee Address:	7733 Kingsley Road Kingsley, MI 49649
Licensee Telephone #:	(231) 263-5975
Administrator:	Jacob Murphy
Licensee Designee:	Jacob Murphy
Name of Facility:	Hillcrest AFC
Facility Address:	7733 Kingsley Road Kingsley, MI 49649
Facility Telephone #:	(231) 263-7026
Original Issuance Date:	07/17/2019
License Status:	REGULAR
Effective Date:	01/17/2022
Expiration Date:	01/16/2024
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED, MENTALLY ILL DEVELOPMENTALLY DISABLED, AGED

II. ALLEGATION(S)

	Violation Established?
One of the bathrooms appears to be unusable because it's full of assistive devices.	No
The only window in Resident A's room is blocked by a tall cupboard.	Yes

III. METHODOLOGY

01/10/2022	Special Investigation Intake 2022A0870012
01/11/2022	Special Investigation Initiated - On Site Interview with Home Manager Faye Killingsworth.
01/11/2022	Inspection Completed-BCAL Sub. Compliance
01/18/2022	Exit Conference Completed with Licensee Designee Jake Murphy.
01/18/2022	Corrective Action Plan Requested and Due on 02/02/2022

ALLEGATION: One of the bathrooms appears to be unusable because it's full of assistive devices.

INVESTIGATION: On January 11, 2022, I conducted an unannounced on-site investigation at the Hillcrest AFC home. I met with home manager Faye Killingsworth and explained the above allegations. Ms. Killingsworth and I visually inspected the two resident bathrooms. I observed that bathroom number 1, containing a shower, toilet, and sink, did not have any "assistive devices" with it. This bathroom is "usable" as it has electricity, heat and both hot and cold running water. This bathroom meets all the requirements per AFC Licensing rule.

The second resident bathroom, bathroom number 2, has a tub with shower, a toilet, and a sink. This bathroom is also considered to be "usable" as it has electricity, heat and both hot and cold running water. This bathroom meets all the requirements per AFC Licensing rule. The tub does have a toilet lift chair which is also used as a shower chair. Ms. Killingsworth stated this "assistive device" is used by residents who are unable to stand during showers and by those who need assistance with toileting. She stated it is kept in the tub, since that is where it is used, and is also

located directly adjacent to the toilet. I noted that this “assistive device” is easily removed as necessary.

I note that this AFC Medium Group Home is licensed for a maximum of 12 residents, thus two fully functioning bathrooms meet the rule requirements. Ms. Killingsworth stated the home currently has 12 residents.

APPLICABLE RULE	
R 400.14407	Bathrooms.
	(4) A home shall have a minimum of 1 toilet, 1 lavatory, and 1 bathing facility for every 8 occupants of the home.
ANALYSIS:	The home has two fully functioning bathrooms with at least one toilet, one lavatory, and one bathing facility each. The home is licensed for 12 residents and currently is at its 12 resident capacity.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: The only window in Resident A’s room is blocked by a tall cupboard.

INVESTIGATION: I observed that Resident A’s bedroom contains a portable wardrobe, which is positioned in front of the sole bedroom window. The positioning of this portable wardrobe made the window to be inaccessible and not easily opened. It blocks most of the natural sunlight from the bedroom.

Ms. Killingsworth and I were able to relocate this wardrobe to another wall within Resident A’s bedroom. Ms. Killingsworth did not have an explanation as to why this wardrobe was placed in front of the window nor who moved it to that location.

I looked in the remaining resident bedrooms and did not observe any of the windows to be blocked or inaccessible.

APPLICABLE RULE	
R 400.14408	Bedrooms generally.
	(7) Bedrooms shall have at least 1 easily openable window.
ANALYSIS:	A portable wardrobe was placed in front of Resident A’s bedroom window, making it inaccessible and not easily openable.

CONCLUSION:	VIOLATION ESTABLISHED
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On January 18, 2022, I conducted an exit conference with Licensee Designee Jake Murphy. I explained my finding as noted above. Mr. Murphy stated he understood and would submit a corrective action plan to address the cited rule.

IV. RECOMMENDATION

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

 January 18, 2022

Bruce A. Messer Date
Licensing Consultant

Approved By:

 January 19, 2022

Jerry Hendrick Date
Area Manager