

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

February 7, 2022

Marci Thelen Good Vibes AFC LLC 10697 W Pratt Rd St. Johns, MI 48879

RE: License #: AM340405168

Good Vibes AFC LLC 11755 E Bluewater Hwy Pewamo, MI 48873

Dear Ms. Thelen:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

 You are to submit documentation of compliance or an on-site inspection will be conducted.

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,

Jennifer Browning, Licensing Consultant Bureau of Community and Health Systems Browningi (Omichigan gov. (989) 444-961

Browningj1@michigan.gov - (989) 444-9614

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

I. IDENTIFYING INFORMATION

License #: AM340405168

Licensee Name: Good Vibes AFC LLC

Licensee Address: 10697 W Pratt Rd

St. Johns, MI 48879

Licensee Telephone #: (517) 719-7339

Licensee Designee: Marci Thelen

Administrator: Marci Thelen

Name of Facility: Good Vibes AFC LLC

Facility Address: 11755 E Bluewater Hwy

Pewamo, MI 48873

Facility Telephone #: (517) 719-7339

Original Issuance Date: 08/25/2021

Capacity: 8

Program Type: AGED

ALZHEIMERS

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s): 02/07/2022		
Date	e of Bureau of Fire Ser	vices Inspection if applicable:	06/24/2021	
Date	e of Health Authority In	spection if applicable:	08/04/2021	
Insp	ection Type:	☐ Interview and Observatio☐ Combination	n ⊠ Worksheet □ Full Fire Safety	
No.	of staff interviewed and of residents interviewe of others interviewed		3 7	
•	Medication pass / simu	ulated pass observed? Yes ⊠	〗No □ If no, explain.	
•	Medication(s) and medication record(s) reviewed? Yes ⊠ No ☐ 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	igwedge No $igwidge$ 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.			
•	11/16/2021 CAP Interi	compliance verified? Yes ⊠ m N/A □ mployees followed-up?	CAP date/s and rule/s: N/A ⊠	
•	Variances? Yes ☐ (p	lease explain) No ☐ N/A ⊠		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.14204 Direct care staff; qualifications and training.

- (3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:
 - (f) Safety and fire prevention.

None of the five employee files reviewed included documentation the employees were competent in safety and fire prevention.

R 400.14315 Handling of resident funds and valuables.

(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.

Licensee designee, Marci Thelen had accepted resident funds over 200.00 for Resident A. According to the Resident Funds Part II document, Resident A had \$457.18 of personal funds.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(4) A licensee shall ensure that residents, all employees, volunteers under the direction of the licensee, and members of the household are familiar with emergency and evacuation procedures.

Licensee designee, Marci Thelen did not know how to operate the fire panel to show the fire alarm system was currently working. Ms. Thelen did not show the employees how to use the system since so they could utilize it during fire drills.

A corrective action plan was requested and approved on 02/07/2022. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Gennifer Browning	02/07/2022
Jennifer Browning	Date
Licensing Consultant	