



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 28, 2022

Janet Turner
Turner Powers AFC Home, Inc.
310 West Pearl Street
Jackson, MI 49201

RE: License #: AL380007072
Turner Powers AFC Home
310 West Pearl Street
Jackson, MI 49201

Dear Ms. Turner:

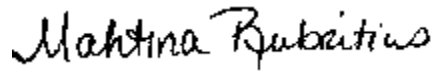
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "Mahtina Rubritius". The signature is written in a cursive, flowing style.

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd., Ste. #9-100
Detroit, MI 48202
(517) 262-8604

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

I. IDENTIFYING INFORMATION

License #: AL380007072

Licensee Name: Turner Powers AFC Home, Inc.

Licensee Address: 310 West Pearl Street
Jackson, MI 49201

Licensee Telephone #: (517) 782-9123

Licensee/Licensee Designee: Janet Turner

Administrator: Grant Turner

Name of Facility: Turner Powers AFC Home

Facility Address: 310 West Pearl Street
Jackson, MI 49201

Facility Telephone #: (517) 782-9123

Original Issuance Date: 03/30/1990

Capacity: 19

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/25/2022

Date of Bureau of Fire Services Inspection if applicable: 05/21/2021

Date of Health Authority Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

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 No 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 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.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
R 400.15205(6), R 400.15207(2), R 400.15301(9), R 400.15312(4)(b), R 400.15318 (5), R 400.15403 (6), and R 400.15308(2). N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.15203

Licensee and administrator training requirements.

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

- The licensee or administrator did not complete the 16-hours of annual training for 2021.

R 400.15205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(2) A licensee shall have, on file with the department, 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 the licensee and administrator. The statement shall be signed within 6 months before the issuance of a temporary license and at any other time requested by the department.

- There was no record of an annual health review for the administrator.

R 400.15205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

- There was no record of an annual health review for Employee #1.

R 400.15207

Required personnel policies.

(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individuals personnel record.

- There was no record to demonstrate that Employee #1 had been provided with a copy of their job description.

R 400.15301

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 resident's written assessment plan on file in the home.

- The written assessment plans for Resident A and Resident B were outdated, as the forms were last reviewed in 2019.
- The written assessment plan for Resident C was outdated, as it was last reviewed in 2020.
- The plans were not reviewed annually, as required by the rule.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

- The written resident care agreement for Resident A was last reviewed in 2017.
- The written resident care agreement for Resident B was last reviewed in 2019.
- The written resident care agreement for Resident C was last reviewed in 2020.
- The resident care agreements were not reviewed and updated annually, as required.
- **THIS IS A REPEAT VIOLATION** (Last Renewal Inspection).

R 400.15308

Resident behavior interventions prohibitions.

(2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following:

- (a) Use any form of punishment.
- (b) Use any form of physical force other than physical restraint as defined in these rules.
- (c) Restrain a resident's movement by binding or tying or through the use of medication, paraphernalia, contraptions, material, or equipment for the purpose of immobilizing a resident.
- (d) Confine a resident in an area, such as a room, where egress is prevented, in a closet, or in a bed, box, or chair or restrict a resident in a similar manner.
- (e) Withhold food, water, clothing, rest, or toilet use.
- (f) Subject a resident to any of the following:
 - (i) Mental or emotional cruelty.
 - (ii) Verbal abuse.
 - (iii) Derogatory remarks about the resident or members of his or her family.
 - (iv) Threats.
- (g) Refuse the resident entrance to the home.
- (h) Isolation of a resident as defined in R400.15102(1)(m).
- (i) Any electrical shock device.

- This rule violation was established as a result of a special investigation, SIR # 2021A0007016. During the renewal

inspection, Mr. Turner reported that he has not been following part of the previously submitted written corrective action plan, as he does not have insurance coverage. He expects that the insurance would be reinstated in February of 2022. Mr. Turner shall resume and follow the original plan or Ms. Turner shall submit a new written corrective plan to ensure that this matter continues to be addressed.

R 400.15401 Environmental health.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

- The hot water temperature was 121.5 degrees Fahrenheit. A staff member adjusted the temperature on water heater prior to the conclusion of the on-site inspection.

R 400.15403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

- The baseboards and floors, on the second floor of the facility, required dusting and vacuuming.

IV. RECOMMENDATION

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

Mahtina Rubritius

01/28/2022

Mahtina Rubritius
Licensing Consultant

Date