

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 16, 2022

Margaret Eitniear 5760 Hudson Rd. Osseo, MI 49266

RE: License #: AF300296275

Eitniear AFC 5760 Hudson Rd. Osseo, MI 49266

Dear Ms. Eitniear:

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. Documentation submitted on 03/14/2022.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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,

Vanita C. Bouldin, Licensing Consultant

Vancon Beullin

Bureau of Community and Health Systems 22 Center Street

Ypsilanti, MI 48198

(734) 395-4037

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

I. IDENTIFYING INFORMATION

License #: AF300296275

Licensee Name: Margaret Eitniear

Licensee Address: 5760 Hudson Rd.

Osseo, MI 49266

Licensee Telephone #: (517) 523-4031

Licensee/Licensee Designee: N/A

Administrator: N/A

Name of Facility: Eitniear AFC

Facility Address: 5760 Hudson Rd.

Osseo, MI 49266

Facility Telephone #: (517) 523-4031

Original Issuance Date: 03/02/2009

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

TRAUMATICALLY BRAIN INJURED

ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/22/2022				
Date of Bureau of Fire Services Inspection if applicable: N/A				
Date of Health Authority Inspection if applicable: N/A				
Insp	ection Type:	☐ Interview and Observation ☐ Combination	⊠ Worksheet □ Full Fire Safety	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:			1 3	
	Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. No due to COVID -19. 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 $oximes$ No $oximes$ 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. No follow-up needed. Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s: N/A ☒			
•	Number of excluded em	ployees followed-up?	N/A 🔀	
•	Variances? Yes ☐ (ple	ease explain) No 🗌 N/A 🖂		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.1416 Resident health care.

(1) A licensee, in conjunction with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician with regard to such items as medications, special diets, and other resident health care needs that can be provided in the home.

Resident, BK, missing current medication list. Unable to determine if Licensee, Margaret Eitniear, is following recommendations of resident's physician regarding medication.

Date: 03/16/2022

A corrective action plan was requested and approved on 02/22/2022. 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.

Vanita C. Bouldin

Licensing Consultant

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