

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 31, 2022

Judith Dunton
Michigan Community Services, Inc.
PO Box 317
Swartz Creek, MI 48473

RE: License #:	AS250390098
	Jennings Group Home
	8365 S. Jennings Rd.
	Swartz Creek, MI 48473

Dear Ms. Dunton:

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 and special certification 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 (906) 226-4171.

Sincerely,

Susan Hutchinson, Licensing Consultant Bureau of Community and Health Systems

Dusan Hutchinson

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909 (989) 293-5222

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

I. IDENTIFYING INFORMATION

License #:	AS250390098
Licensee Name:	Michigan Community Services, Inc.
Licensee Address:	5239 Morrish Rd.
2.00.1000 / (4.41.000)	Swartz Creek, MI 48473
Licensee Telephone #:	(810) 635-4407
Licenses/Licenses Designes	hudith Dunton
Licensee/Licensee Designee:	Judith Dunton
Administrator:	Sarah Burns
Name of Facility:	Jennings Group Home
Facility Address.	9265 C. Janninga Dd
Facility Address:	8365 S. Jennings Rd. Swartz Creek, MI 48473
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Facility Telephone #:	(810) 635-4407
	10/15/0015
Original Issuance Date:	12/15/2017
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	MENTALLY ILL
Certified Programs:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s	s):	03/30/2	022		
Date	e of Bureau of Fire Serv	rices Inspection if appl	licable:	N/A		
Date	e of Health Authority Ins	spection if applicable:		N/A		
Insp	ection Type:	☐ Interview and Obs	servation	n ⊠ Worksheet □ Full Fire Safety		
No.	of staff interviewed and of residents interviewed of others interviewed			3 2		
•	Medication pass / simu	lated 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. My inspection did not take place during a mealtime Fire drills reviewed? Yes ∑ No ☐ If no, explain. 					
•	Fire safety equipment	and practices observe	d? 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-u	p? Yes⊠ No ☐ If	no, expla	ain.		
•	Corrective action plan ∈ N/A ⊠	·				
•	Number of excluded er	mployees followed-up?	?	N/A 🔀		
•	Variances? Yes ☐ (pl	ease explain) No 🗌	N/A 🖂			

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:		
R 400.14403	Maintenance of premises.	
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.	
,	inspection, I noted that there was a large hole in the medication needs to be repaired/replaced.	
R 400.14403	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.	
•	rinspection, I noted that there is a large tear in the living room cause a tripping hazard. The carpet must be repaired or replaced.	

IV. RECOMMENDATION

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

Dusan Hutchinson March 31, 2022

Susan Hutchinson	Date
Licensing Consultant	