



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 5, 2022

Jodi Martinez
3749 Orchard Rd
Peck, MI 48466

RE: License #: AM760072288
Martinez AFC Home
3749 Orchard Road
Peck, MI 48466

Dear Ms. Martinez:

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 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 (517) 284-9730.

Sincerely,



Kathryn A. Huber, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48605
(989) 293-3234

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

I. IDENTIFYING INFORMATION

License #:	AM760072288
Licensee Name:	Jodi Martinez
Licensee Address:	3749 Orchard Rd Peck, MI 48466
Licensee Telephone #:	(810) 378-5280
Licensee/Licensee Designee:	N/A
Administrator:	Jodi Martinez
Name of Facility:	Martinez AFC Home
Facility Address:	3749 Orchard Road Peck, MI 48466
Facility Telephone #:	(810) 378-5280
Original Issuance Date:	06/30/1997
Capacity:	11
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/23/2022

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable: 03/16/2022

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 2
No. of residents interviewed and/or observed 8
No. of others interviewed 0 Role: [REDACTED]

- 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: SI2021A0871009, R400.14302(5)(b), R400.14311(1)(c), Renewal 07/23/2020 R400.14401(1), R400.14205(4), R400.14205(5), R400.14301(9), R400.14301(4), Public Act 400.713(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 400.14203	Licensee and administrator training requirements.
	<p>(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:</p> <p>(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.</p> <p>(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.</p>
Licensee Jodi Martinez did not complete 16 hours of training for 2021.	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	<p>(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.</p>

A tuberculin test was not completed for the staff member file that was reviewed.	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.
A <i>Health Care Appraisal</i> had not been completed yearly for the resident file reviewed.	
R 400.14401	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 water was measured at 123 degrees Fahrenheit.	
R 400.713	License required; application; form; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at a specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; "completed application" defined.
	(2) Application for a license shall be made on forms provided and in the manner prescribed by the department. The application shall be accompanied by the fee prescribed in section 13a.

A renewal application and fee has not yet been received.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and an approval from the State Fire Marshal, renewal of the license is recommended (capacity 1-11).

Kathryn Huber

07/05/2022

Kathryn A. Huber
Licensing Consultant

Date