



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 15, 2022

Barbara Montgomery
972 E Washington Street
Ionia, MI 48846

RE: License #: AF340002647
Montgomery AFC Home
972 E Washington Street
Ionia, MI 48846

Dear Ms. Montgomery:

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 send the following items by 12/01/2022 by mail, fax, or email.
 - Updated *Resident Care Agreement* for Resident A and Resident B.
 - Return the completed *BCHS-100 form* and *Medical Clearance* for Ms. Jensen.
 - Video of repaired handrail going downstairs to resident bedrooms.

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,

A handwritten signature in black ink that reads "Jennifer Browning".

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
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 #: AF340002647

Licensee Name: Barbara Montgomery

Licensee Address: 972 E Washington Street
Ionia, MI 48846

Licensee Telephone #: (616) 527-2295

Name of Facility: Montgomery AFC Home

Facility Address: 972 E Washington Street
Ionia, MI 48846

Facility Telephone #: (616) 527-2295

Original Issuance Date: 01/16/1990

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/15/2022

Date of Bureau of Fire Services Inspection if applicable: Not applicable

Date of Health Authority Inspection if applicable: 08/22/2022

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 3

No. of others interviewed [redacted] 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.
The inspection was not done during meal times. The food at the facility appeared safe and free from spoilage and contamination, the food service equipment was in good repair, and the facility appeared equipped to prepare and serve adequate meals.
- 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: 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 400.1404 Licensee, responsible person, and member of the household; qualifications.

(5) All responsible persons and members of the household shall be of good moral character and suitable temperament to assure the welfare of residents.

The licensee, Ms. Montgomery, had allowed Ms. Jensen to work in the adult foster care family home as a responsible person without completing a clearance to show she is of good moral character and suitable temperament.

R 400.1405 Health of a licensee, responsible person, and member of the household.

(2) A licensee shall have on file with the department a statement signed by a licensed physician or his or her designee with regard to his or her knowledge of the physical health of the licensee and each responsible person. The statement shall be signed within 6 months before the issuance of a license and at any other time requested by the department.

The licensee, Ms. Montgomery, had allowed Ms. Jensen to work in the adult foster care family home as a responsible person without a completed medical clearance.

R 400.1407 Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.

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

Resident A and Resident B's resident records did not include an updated *Resident Care Agreement* showing that the licensee, Ms. Montgomery reviewed the form annually. Resident A's last *Resident Care Agreement* was from 2020 and Resident B's *Resident Care Agreement* was from 2019.

R 400.1426 Maintenance of premises.

(7) Stairways shall have sturdy and securely fastened handrails which are not less than 30, nor more than 34 inches above the

upper surface of the tread. Exterior and interior stairways shall have handrails on the open sides. Porches shall also have handrails on the open sides.

The stairway going down to the resident bedrooms has a loose handrail on the right side causing a safety concern.

R 400.1438 Emergency preparedness; evacuation plan; emergency transportation.

(4) Fire drills shall be conducted 4 times a year. Two of the 4 required fire drills shall be conducted during sleeping hours. A record of the fire drills shall be incorporated with the evacuation plan.

Licensee, Ms. Montgomery was unable to show documentation of fire drills that were completed in 2021.

A corrective action plan was requested and approved on 11/15/2022. 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.

Jennifer Browning

Jennifer Browning
Licensing Consultant

11/15/2022

Date