

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 18, 2023

James Pilot Bay Human Services, Inc. P O Box 741 Standish, MI 48658

RE: License #:	AS060068988
	Almont AFC
	140 Almont Street
	Standish, MI 48658

Dear Mr. Pilot:

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 (517) 643-7960.

Sincerely,

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Shamidah Wyden, Licensing Consultant Bureau of Community and Health Systems 411 Genesee P.O. Box 5070 Saginaw, MI 48607 989-395-6853

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

I. IDENTIFYING INFORMATION

License#:	AS060068988
Licensee Name:	Bay Human Services, Inc.
Licensee Address:	PO Box 741
	3463 Deep River Rd
	Standish, MI 48658
Licensee Telephone #:	(989) 846-9631
	Lamas Dilat
Licensee Designee:	James Pilot
Administrator:	Tammy Unger
Name of Facility:	Almont AFC
Facility Address:	140 Almont Street
	Standish, MI 48658
Facility Telephone #:	(989) 846-9648
Original Issuance Date:	08/01/1996
Capacitu	6
Capacity:	0
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	01/12/2023		
Date of Bureau of Fire Services Inspection in	f applicable: N/A		
Date of Environmental/Health Inspection if applicable: N/A			
No. of staff interviewed and/or observed No. of residents interviewed and/or observe No. of others interviewed N/A Role:	2 d 4		
Medication pass / simulated pass obser	ved? 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 I If no, explain. Meal preparation / service observed? Yes No I If no, explain. 			
• Fire drills reviewed? Yes 🛛 No 🗌 If	no, explain.		
• Fire safety equipment and practices obs	served? 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 verifi 11/29/2022 R305(3) N/A Number of excluded employees follower 			
• Variances? Yes 🗌 (please explain) N	o 🗌 N/A 🖂		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 400.14312	Resident medications.
	 (4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (b) Complete an individual medication log that contains all of the following information: (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.
At the time of inspection, staff initials were missing for medication given to Resident A, Resident B, Resident C, and Resident D for multiple medication passes in the month of January 2023.	

IV. RECOMMENDATION

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

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01/18/2023

Shamidah Wyden Licensing Consultant

Date