



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 24, 2023

Kim Owens
43106 76th Ave
Decatur, MI 49045

RE: License #: AM800016279
Sunny Acres
43106 76th Avenue
Decatur, MI 49045

Dear Ms. Owens:

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,

Kristy Duda, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AM800016279
Licensee Name:	Kim Owens
Licensee Address:	43106 76th Ave Decatur, MI 49045
Licensee Telephone #:	(269) 423-7525
Licensee/Licensee Designee:	Kim Owens
Administrator:	Kim Owens
Name of Facility:	Sunny Acres
Facility Address:	43106 76th Avenue Decatur, MI 49045
Facility Telephone #:	(269) 423-7525
Original Issuance Date:	05/01/1995
Capacity:	12
Program Type:	MENTALLY ILL AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/18/2023

Date of Bureau of Fire Services Inspection if applicable: 10/19/2022 – A Rating

Date of Health Authority Inspection if applicable: 9/22/2022 – A Rating

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 7

No. of others interviewed 0 Role: N/A

- 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.
Inspection occurred between mealtimes.
- 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.
The water temperature was measured to be 106 degrees Fahrenheit.
- Incident report follow-up? Yes No If no, explain.
There were not any incident reports submitted requiring follow-up.
- 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:

MCL 400.734 **400.734b. Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.**

The employment file of direct care worker Chelsea Owens did not have a background clearance eligibility letter available for review.

R 400.14204 **Direct care staff; qualifications and training.**

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.**
- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**
- (d) Personal care, supervision, and protection.**
- (e) Resident rights.**
- (f) Safety and fire prevention.**
- (g) Prevention and containment of communicable diseases.**

Chelsea Owens resides in the home and is responsible for primary care during sleeping hours. Review of her employment file combined with interviews reveal she has not completed direct care training as required by this rule.

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.**

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the knowledge of the physical health of direct care staff, other employees, and members of the household. The

statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

The employment files did not have a signed physical health statement available for review for household member, Chelsea Owens. There was not a signed physical health statement available for review for Ms. Owen's minor child who also resides in the home.

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.

(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.

The employment files did not have documentation of tuberculosis screening for Chelsea Owens. There was not a tuberculosis screening available for review for Ms. Owen's minor child.

R 400.14206 Staffing requirements.

(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.

Ms. Owens has not received training to provide direct care to residents. Therefore, the home is not staffed sufficiently when she is scheduled to work by herself during sleeping hours.

IV. RECOMMENDATION

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



1/23/2023

Kristy Duda
Licensing Consultant

Date