



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

February 14, 2024

Marci Thelen
Good Vibes AFC LLC
10697 W Pratt Rd
St. Johns, MI 48879

RE: License #: AM340405168
Good Vibes AFC LLC
11755 E Bluewater Hwy
Pewamo, MI 48873

Dear Ms. Thelen:

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. Documentation of compliance has also been received.

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, appearing to read "Amanda Blasius".

Amanda Blasius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #:	AM340405168
Licensee Name:	Good Vibes AFC LLC
Licensee Address:	10697 W Pratt Rd St. Johns, MI 48879
Licensee Telephone #:	(517) 719-7339
Licensee Designee:	Marci Thelen
Administrator:	Marci Thelen
Name of Facility:	Good Vibes AFC LLC
Facility Address:	11755 E Bluewater Hwy Pewamo, MI 48873
Facility Telephone #:	(517) 719-7339
Original Issuance Date:	08/25/2021
Capacity:	8
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/05/2024

Date of Bureau of Fire Services Inspection if applicable: 07/07/2023

Date of Health Authority Inspection if applicable: NA

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Administrator

- 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:
02/07/2022-as315(6), as204(3)(f), as318(4) 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 400.14204 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.

At the time of inspection, four direct care staff files were reviewed, and all four files were missing the reporting requirements training that was completed before performing assigned tasks.

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:

(d) Personal care, supervision, and protection.

At the time of inspection, four direct care staff files were reviewed, and all four files were missing the personal care, supervision, and protection training that was completed before performing assigned tasks.

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:

(g) Prevention and containment of communicable diseases.

At the time of inspection, four direct care staff files were reviewed, and all four files were missing the prevention and containment of communicable diseases training that was completed before performing assigned tasks.

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.

At the time of inspection, four direct care staff files were reviewed, and all four files were missing a medical statement signed by a licensed physician or designee that was obtained within 30 days of their employment or assumption of duties.

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.

At the time of inspection, four direct care staff files were reviewed, and all four files were missing a communicable tuberculosis test that was obtained before their employment and assumption of duties.

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

At the time of inspection, four resident files were reviewed. All four files were missing an *Assessment Plan for AFC Residents* (assessment plan) that has been updated within the last year.

R 400.14301 **Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

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

At the time of inspection, four resident files were reviewed. All four files were missing a *Resident Care Agreement* that has been updated within the last year.

R 400.14318 **Emergency preparedness; evacuation plan; emergency transportation.**

(1) A licensee shall have a written emergency procedure and evacuation plan to be followed in case of fire, medical, or severe weather emergencies. The evacuation plan shall be prominently posted in the home. Residents who require special assistance shall be identified in the written procedure.

At the time of inspection, an evacuation plan was not prominently posted in the home.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.



02/06/2024

Amanda Blasius
Licensing Consultant

Date