

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

MARLON I. BROWN, DPA DIRECTOR

October 3, 2024

Gloria Guthrie Pelcher AFC Home Inc 9084 E Weidman Mt. Pleasant, MI 48858

> RE: License #: AS370069126 Pelchers I 4480 N Shepherd Rd Mt Pleasant, MI 48858

Dear Ms. Guthrie:

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 by **10/17/24**. Please submit copies of updated annual health reviews for the last two years, reference checks, signed job description, and a picture of a thermometer in the freezer.

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,

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 #:	AS370069126	
Licensee Name:	Pelcher AFC Home Inc	
Licensee Address:	9084 E Weidman Mt. Pleasant, MI 48858	
Licensee Telephone #:	(989) 433-5386	
Licensee Designee:	Gloria Guthrie	
Administrator:	Gloria Guthrie Pelchers I	
Name of Facility:		
Facility Address:	4480 N Shepherd Rd Mt Pleasant, MI 48858	
Facility Telephone #:	(989) 433-5446	
Original Issuance Date:	01/01/1996	
Capacity:	4	
Program Type:	DEVELOPMENTALLY DISABLED	
Certified Programs:	DEVELOPMENTALLY DISABLED	

II. METHODS OF INSPECTION

Dat	ate of On-site Inspection(s): 10/02/2		024	
Dat	e of Bureau of Fire Services Inspection if appl	icable:	Not applicable	
Date of Environmental/Health Inspection if applicable:		06/24/2024		
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:		3 2	
•	Medication pass / simulated pass observed?	Yes 🖂	No 🗌 If no, explain.	
•	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain.			
•	 Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain. Meal preparation / service observed? Yes X No I 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, expla	in.	
•	Corrective action plan compliance verified? as204(2)(b) from SI 2024A1029030 2/8/2024 Number of excluded employees followed-up?	N/A 🗌	CAP date/s and rule/s:] N/A 🔀	

• Variances? Yes \Box (please explain) No \Box N/A \boxtimes

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

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.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

Direct care staff members L. Herron and L. Waidler's employee record does not have an annual health review signed for 2023 or 2024.

R 400.14207 Required personnel policies.

(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record.

Direct care staff member D. Behner employee record does not include a signed job description.

R 400.14208 Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(f) Verification of reference checks.

Direct care staff members D. Behner and L. Waidler's employee record does not include verification two background checks were completed when they were hired.

R 400.14402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

The freezer in the kitchen refrigerator does not have a thermometer to ensure the food is kept at safe temperatures.

A corrective action plan was requested and approved on 10/02/2024. 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 and special certification.

IV. RECOMMENDATION

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

Jennifer Browning

Jennifer Browning Licensing Consultant

_10/03/2024___ Date