

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

MARLON I. BROWN, DPA DIRECTOR

May 8, 2025

Robin Johnson 108 W. Gibson Drive Greenville, MI 48838

RE: License #: AM590085545 Johnson's AFC Home 108 W. Gibson Drive Greenville, MI 48838

Dear Ms. Johnson:

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:

• An on-site inspection will be conducted.

A six-month provisional license is recommended. A corrective action plan was received on 05/06/2025 and signed stating that you accept the violations and issuance of a provisional license.

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) 335-5985.

Sincerely,

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

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

I. IDENTIFYING INFORMATION

License #:	AM590085545
Licensee Name:	Robin Johnson
Licensee Address:	108 W. Gibson Drive Greenville, MI 48838
Licensee Telephone #:	(616) 225-1240
Licensee:	Robin Johnson
Administrator:	Robin Johnson
Name of Facility:	Johnson's AFC Home
Facility Address:	108 W. Gibson Drive Greenville, MI 48838
Facility Telephone #:	(616) 225-1240
Original Issuance Date:	02/01/2000
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	05/06/2025	
Date of Bureau of Fire Services Inspection if applicable:	C rating, 4/02/2025	
Date of Health Authority Inspection if applicable:	NA	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:	1 5	
• Medication pass / simulated pass observed? Yes \boxtimes	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 D No If no, explain. Licensee does not keep funds for residents Meal preparation / service observed? Yes No D 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 ∑ 0 01/31/2025 as401(6) as401(5) as403(4) as410(5) as411 as403(2) Number of excluded employees followed-up? N 		

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

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection, Resident A's file was reviewed, and he was admitted to Johnson AFC on 11/01/2024 and a health care appraisal was not completed until 04/29/2025.

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, five resident files were reviewed. Written *Assessment Plans for AFC Residents* were completed recently for 2025, but no written *Assessment Plans for AFC Residents* for 2024 were completed for Residents B, C, D and E. Consequently, the written *Assessment Plans for AFC Residents* for Residents B, C, D, and E were not updated annually as required.

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, five resident files were reviewed. *Resident Care Agreements* were completed recently for 2025, but *Resident Care Agreements* for 2024 were not completed nor reviewed for Residents B, C, D and E and thus were not completed annually as required.

R 400.14313 Resident nutrition.

(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.

At the time of inspection, a menu was not posted for residents to view in the kitchen. Licensee Robin Johnson reported that she does not post menus for residents to view.

R 400.14401 Environmental health.

(8) Hand-washing facilities that are provided in both the kitchen and bathroom areas shall include hot and cold water, soap, and individual towels, preferably paper towels.

At the time of inspection, the faucet in bathroom 1 did not provide hot water, as licensee Robin Johnson reported that it's currently turned off as the water leaks and needs to be replaced.

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.

At the time inspection, thermometers were not available to be viewed within the two freezers in the kitchen.

R 400.14403 Maintenance of premises.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

At the time inspection, it was found that outlet covers and light switch covers needed to be replaced within each bedroom, as they were worn out and dirty. The couch that seats three residents within the living room was found to be stained and unclean. During the inspection, the back door at the end of the hallway was not properly sealed and an opening was visible towards the bottom of the door. A properly sealed door needs to be installed to prevent warm air escaping the home and prevent bugs and rodents from entering the home. The main door within the kitchen was observed to be worn down and paint was chipping away from the inside and the outside of the door. At the time of inspection, the refrigerator door was observed to be covered in rust spots.

R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

At the time inspection, the carpet of the home was observed to be worn down and heavily stained within the hallway as well as in the following bedrooms #2, #4, #6, #8, #11 and #12. The carpet in the main hallway was also observed to be heavily stained and worn down. According to SIR # 2025A0577011 dated 01/08/2025, the carpet was supposed to be cleaned and/or replaced, if all stains did not remove during the cleaning process, by 5/06/2025 based on the signed corrective action plan written by licensee Robin Johnson. The carpet was not observed to be dirt and stain free during the renewal visit on 05/06/2025.

According to SIR# 2025A0577011 dated 01/08/2025, the walls within the home had holes, were dirty and were missing areas of drywall and needed to be repaired by 5/06/2025 based on the signed corrective action plan. At the time inspection, the walls appeared to be clean, but some of the resident bedrooms still contained areas of missing drywall and needed to be re-painted.

R 400.14403 Maintenance of premises.

(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.

At the time of inspection, the shower in bathroom 1 was observed to have a continuous leak of water and needed to be repaired. Within bathroom 1, the bathroom sink did not have running hot water because the sink had a continuous leak, and the hot water was shut off.

REPEAT VIOLATION ESTABLISHED [SEE 2023 Renewal report AND CAP DATED 04/21/2023]

R 400.14403 Maintenance of premises.

(7) All water closet compartments, bathrooms, and kitchen floor surfaces shall be constructed and maintained so as to be reasonably impervious to water and to permit the floor to be easily kept in a clean condition.

At the time of inspection, the vanity within bathroom 2 was observed and the countertop was observed to be worn down from water damage and had discoloration. The bottom of the vanity where the wood meets the floor was warping from water damage.

R 400.14407 Bathrooms.

(4) A home shall have a minimum of 1 toilet, 1 lavatory, and 1 bathing facility for every 8 occupants of the home.

At the time of inspection, the toilet in bathroom 1 was missing the toilet lid, as it appeared to be broken off. The seal at the bottom of the toilet was brown with urine stains and appeared to need to be re-sealed.

R 400.14408 Bedrooms generally.

(7) Bedrooms shall have at least 1 easily openable window.

At the time of inspection, resident bedroom # 9's window had cracks in the glass on both sides of the bottom window and was not safely openable for if the window were slammed shut, the glass could break and fall out of the window into the resident bedroom.

R 400.14410 Bedroom furnishings.

(1) The bedroom furnishings in each bedroom shall include all of the following:

(2) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.

At the time of inspection, bedrooms number 1-4 were missing mirrors for the residents.

IV. RECOMMENDATION

An acceptable corrective action plan has been completed, issuance of a provisional license is recommended.

05/06/2025

Amanda Blasius Licensing Consultant

Date

Approved:

Dawn Timm Area Manager

<u>05/08/2025</u> Date