



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

January 19, 2021

Mark James  
American AFC Inc.  
5355 Northland Dr. C-133  
Grand Rapids, MI 49525

RE: License #:	AM610259339 Terrace Manor 1148 Terrace Street Muskegon, MI 49442-3449
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Dear Mr. James:

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 and an updated fire inspection with an acceptable rating, 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. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

*Elizabeth Elliott*

Elizabeth Elliott, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 901-0585

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM610259339
<b>Licensee Name:</b>	American AFC Inc.
<b>Licensee Address:</b>	5355 Northland Dr. C-133 Grand Rapids, MI 49525
<b>Licensee Telephone #:</b>	(616) 292-2837
<b>Licensee/Licensee Designee:</b>	Mark James, Designee
<b>Administrator:</b>	Mark James, Administrator
<b>Name of Facility:</b>	Terrace Manor
<b>Facility Address:</b>	1148 Terrace Street Muskegon, MI 49442-3449
<b>Facility Telephone #:</b>	(231) 722-7442
<b>Original Issuance Date:</b>	05/12/2004
<b>Capacity:</b>	12
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/14/2021

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 2  
No. of residents interviewed and/or observed 10  
No. of others interviewed 0 Role: [REDACTED]

- 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. Staff June Chandler set the fire alarm off during inspection and all residents began evacuating immediately upon hearing the alarm.
- 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: 201.2 Fire inspection report still a D, need an updated fire inspection. 318.5, 401.2,401.4, corrected, 401.5, 402.6, corrected, 403.1, all corrected except ceiling in the kitchen still in disrepair, 407.1, 507.5, corrected. Some but not all deficiencies have been corrected. 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:

<b>R 400.14310</b>	<b>Resident health care.</b>
	(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
Finding: Resident weights were available for review, but resident weights were not recorded every month.	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<p>(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:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <ul style="list-style-type: none"> <li>(i) The medication.</li> <li>(ii) The dosage.</li> <li>(iii) Label instructions for use.</li> <li>(iv) Time to be administered.</li> <li>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</li> <li>(vi) A resident's refusal to accept prescribed medication or procedures.</li> </ul>

<p>Finding: Resident TA's medications, Cholecalciferol, 25 mcg one tab by mouth every day and Naproxen 250 mg tab 2x daily are not documented on the MAR (medication administration record) but they are available in the medication cart.</p> <p>Response: Staff June (John) Chandler stated he will call the VA immediately and get these two medications added to resident TA's MAR. By the end of the inspection, June stated he place a call to the VA pharmacy in Wyoming Michigan.</p>	
<b>R 400.14318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.
<p>Finding: After a review of the fire drills for 2020, a third shift drill was not documented for the 4<sup>th</sup> quarter of the year, October, November, December 2020. All other drills were documented and accurate.</p> <p>Response: Staff Roy James and June Chandler stated it was an oversight and all drills will be documented properly.</p>	
<b>R 400.14401</b>	<b>Environmental health.</b>
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.
<p>Finding: Water throughout the house ran hot, 126-129 degrees Fahrenheit except in the kitchen. The kitchen water was in the range of 105-120 degrees Fahrenheit.</p> <p>Response: Staff Roy James and June Chandler stated they will turn the hot water heater down.</p>	
<b>R 400.14401</b>	<b>Environmental health.</b>
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.

<p>Finding: Bed bugs were found in one room on one resident bed. No other bed bugs were found in facility at the time of the inspection.</p> <p>Response: Staff Roy James and June Chandler stated they will begin to treat the resident rooms.</p>	
<b>R 400.14402</b>	<b>Food service.</b>
	(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.
<p>Finding: All refrigerators and freezers need thermometers.</p> <p>Response: Staff Roy James and June Chandler stated thermometers will be put in the refrigerators and freezers today.</p>	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
<p>Finding: A large hole is visible in the kitchen ceiling underneath the light.</p> <p>Response: Staff Roy James and June Chandler stated the licensee may have a plan for the repair of this area of the house.</p>	
<b>R 400.14407</b>	<b>Bathrooms.</b>
	(2) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

<p>Finding: The main level bathroom has a door lock that is not non-locking against egress.</p> <p>Response: Staff Roy James removed the doorknob and said he would fix the doorknob right away.</p>	
<b>R 400.14410</b>	<b>Bedroom furnishings.</b>
	(1) The bedroom furnishings in each bedroom shall include all of the following: (d) At least 1 chair.
<p>Finding: Resident bedrooms #3 and #4 upstairs do not have a chair.</p> <p>Response: Staff Roy James and June Chandler stated they will get chairs for the rooms.</p>	
<b>R 400.14410</b>	<b>Bedroom furnishings.</b>
	(3) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.
<p>Finding: Resident bedrooms #2, #3, #4 and #5 do not have mirrors.</p> <p>Response: Staff Roy James and June Chandler stated they will get mirrors for the rooms.</p>	

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and an updated fire inspection with an acceptable rating, renewal of the license is recommended.



02/05/2021

Elizabeth Elliott  
Licensing Consultant

Date