

GRETCHEN WHITMER GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 14, 2022

Mike Dykstra Golden Life AFC, LLC 4386 14 Mile Rd, NE Rockford, MI 49341

RE: License #: AL590398548

Golden Life AFC #3 8675 S. Grow Road Greenville, MI 48838

Dear Mr. Dykstra:

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. Upon receipt of an approved report from the Mid-Michigan District Health Department, your license will be renewed.

To verify your implementation and compliance with this corrective action plan:

You are to submit a Statement of Correction.

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,

Genrifer 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 #:** AL590398548

Licensee Name: Golden Life AFC, LLC

**Licensee Address:** 4386 14 Mile Rd, NE

Rockford, MI 49341

**Licensee Telephone #:** (616) 307-7719

Licensee Designee: Mike Dykstra

Administrator: Megan Lilly

Name of Facility: Golden Life AFC #3

Facility Address: 8675 S. Grow Road

Greenville, MI 48838

**Facility Telephone #:** (616) 225-2649

Original Issuance Date: 07/22/2019

Capacity: 20

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

Certified Programs: DEVELOPMENTALLY DISABLED

**MENTALLY ILL** 

## **II. METHODS OF INSPECTION**

Date of On-s	ite Inspection(	s):	01/13/20	)22		
Date of Bure	au of Fire Serv	rices Inspection if appl	icable:	05/04/2021		
Date of Heal	th Authority Ins	spection if applicable:	F	Pending		
Inspection T	уре:	☐ Interview and Obs	servation			
No. of reside	nterviewed and ents interviewed s interviewed	/or observed d and/or observed Role:		4 17		
<ul> <li>Medicat</li> </ul>	ion pass / simu	llated pass observed?	Yes ⊠	No ☐ If no, explain.		
<ul> <li>Medicat</li> </ul>	ion(s) and med	lication record(s) revie	wed? Ye	es 🛭 No 🗌 If no, explain.		
Yes Meal pre The insp appeare equipme serve ac	Resident funds and associated documents reviewed for at least one resident? Yes $\boxtimes$ No $\square$ If no, explain. Meal preparation / service observed? Yes $\square$ No $\boxtimes$ If no, explain. The inspection was not done during meal times. The food at the facility appeared safe and free from spoilage and contamination, the food service equipment was in good repair, and the facility appeared equipped to prepare and serve adequate meals. Fire drills reviewed? Yes $\square$ No $\boxtimes$ If no, explain.					
Fire safe	ety equipment	and practices observe	d? Yes[	⊠ No  If no, explain.		
If no, ex	plain.	pecial Certification On ecked? Yes ⊠ No [	_			
• Incident	report follow-u	p? Yes⊠ No ☐ If	no, expla	in.		
	ve action plan I/A ⊠	compliance verified?	Yes 🗌 (	CAP date/s and rule/s:		
		mployees followed-up?	? 1	N/A 🖂		
<ul> <li>Variance</li> </ul>	es? Yes 🗌 (pl	ease explain) No	N/A 🖂			

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.15205

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 physician's 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.

Employee files did not include a statement within 30 days of hire attesting to the employee's physical health. Before employment, new employees signed the annual health review instead of the medical clearance.

R 400.15205

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.

Three of the employee files reviewed did not include annual health reviews for 2021.

R 400.15208 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.

Two of the employee files reviewed did not include verification that reference checks were completed before hire.

#### R 400.15310 Resident health care.

(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.

Resident A, C, D, and F were missing monthly weights for 1-2 months.

Resident A was missing weight for February and March 2021.

Resident C was missing weight for March 2021.

Resident D was missing weight for March and April 2021.

Resident F was missing weight for July and August 2021.

A corrective action plan was requested and approved on 01/13/2022. 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.

## IV. RECOMMENDATION

An acceptable corrective action plan has been received. Contingent upon receipt of an approved environmental health inspection report from the Mid-Michigan District Health Department, renewal of the license is recommended.

Gennifer Browning	1/14/2022	
Jennifer Browning	Date	
Licensing Consultant		