

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 21, 2022

James Hoeberling J&W Ventures, Inc. 10686 Wacousta Road DeWitt, MI 48820

RE: License #: AM190338087

A Family Affair 8990 E. M-78 Haslett, MI 48840

Dear Mr. Hoeberling:

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, 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. 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,

Jana Lipps, Licensing Consultant

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #: AM190338087

Licensee Name: J&W Ventures, Inc.

Licensee Address: 10686 Wacousta Road

DeWitt, MI 48820

Licensee Telephone #: (810) 922-2938

Licensee Designee: James Hoeberling

Administrator: James Hoeberling

Name of Facility: A Family Affair

Facility Address: 8990 E. M-78

Haslett, MI 48840

Facility Telephone #: (517) 339-8968

Original Issuance Date: 04/09/2013

Capacity: 12

Program Type: AGED

II. METHODS OF INSPECTION

Date of	ate of On-site Inspection(s):		03/18/2022	
Date of Bureau of Fire Services Inspection if applicable: 09/29/2021				
Date of Health Authority Inspection if applicable:12/15/2021				
Inspe	ction Type:	☐ Interview and Obs	servation	⊠ Worksheet □ Full Fire Safety
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 1 Role: Home Manager				
• N	/ledication pass / simu	lated pass observed?	Yes 🖂	No 🗌 If no, explain.
• N	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain			
Υ	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square If no, explain.			
• F	Fire drills reviewed? Yes ⊠ No □ If no, explain.			
• F	Fire safety equipment and practices observed? Yes $oximes$ No $oximes$ If no, explain.			
lf	E-scores reviewed? (Special Certification Only) Yes \(\subseteq \text{No} \subseteq \text{N/A} \subseteq \text{If no, explain.} \) Water temperatures checked? Yes \(\subseteq \text{No} \subseteq \text{If no, explain.} \)			
• Ir	ncident report follow-u	p? Yes⊠ No⊡ If ı	no, expla	ain.
	N/A 🖂	•		CAP date/s and rule/s:
• N	lumber of excluded er	nployees tollowed-up?	?	N/A 🖂
• V	/ariances? Yes ☐ (pl	ease explain) No	N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in substantial compliance with rules and requirements.

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

R 400.14410 Bedroom furnishings.

(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a waterbed is not prohibited by this rule.

Resident A does not have a bed in her room. Resident A sleeps on a couch. There was a written prescription on hand for this accommodation however the licensee does not have a variance for this rule, exempting Resident A from having a bed in her room. A variance will need to be requested from the department to authorize exemption to this rule.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Jana Lipps Date
Licensing Consultant

Approved:

Dawn Timm
Area Manager

03/21/2022