



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 1, 2022

Bettie Johnson  
26504 Yale  
Inkster, MI 48141

RE: License #: AF820292957  
**Johnson AFC**  
**26504 Yale**  
**Inkster, MI 48141**

Dear Ms. Johnson:

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 (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "Regina Buchanan". The signature is written in a cursive, flowing style.

Regina Buchanan, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 949-3029

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AF820292957
<b>Licensee Name:</b>	Bettie Johnson
<b>Licensee Address:</b>	26504 Yale Inkster, MI 48141
<b>Licensee Telephone #:</b>	(734) 299-1890
<b>Licensee/Licensee Designee:</b>	N/A
<b>Administrator:</b>	N/A
<b>Name of Facility:</b>	Johnson AFC
<b>Facility Address:</b>	26504 Yale Inkster, MI 48141
<b>Facility Telephone #:</b>	(734) 299-1890
<b>Original Issuance Date:</b>	12/01/2008
<b>Capacity:</b>	3
<b>Program Type:</b>	AGED

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 05/31/2022

Date of Bureau of Fire Services Inspection if applicable: N/A

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 1  
No. of residents interviewed and/or observed 0  
No. of others interviewed 0 Role: N/A

- 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.  
Residents were not home
- 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  CAP date/s and rule/s:  
09/18/2020 Rules: 426(2),437(1),438(4) 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:

**R 400.1407            Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.**

**(6) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency at least annually or more often if necessary.**

Resident A's Resident Care Agreement was not completed annually. There was not a Resident Care Agreement on file for the year 2021.

#### **REPEAT VIOLATION {RENEWAL INSPECTION 09/26/2019}**

**R 400.1418            Resident medications.**

**(4) When a licensee or responsible person supervises the taking of medication by a resident, the licensee or responsible person shall comply with the following provisions:**

**(a) Maintain a record as to the time and amount of any prescription medication given or applied. Records of prescription medication shall be maintained on file in the home for a period of not less than 2 years.**

**(b) Not adjust or modify a resident's prescription medication without agreement and instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record in writing any adjustments or modifications of a resident's prescription medication.**

Resident A's Tramadol was prescribed to be given 1 daily for 30 days. Instead, the licensee administered it as needed.

During the month of April 2022, Resident A's medications were not initialed as administered 04/28/2022-04/30/2022.

**REPEAT VIOLATION {RENEWAL INSPECTION 09/26/2019}**

**R 400.1421            Handling of resident funds and valuables.**

**(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.**

Resident A's Funds Part II form was not completed after 01/20/2022.

**REPEAT VIOLATION {RENEWAL INSPECTION 09/26/2019}**

**R 400.1424            Environmental health.**

**(4) Effective measures shall be taken to protect against the entrance of vermin into the home and against the breeding or presence of vermin on the premises.**

Mice droppings were observed in the kitchen cabinet and several dead bugs were observed in the upper middle bedroom.

**R 400.1425            Food service.**

**(3) All perishable food shall be stored at such temperature as will protect against spoilage. All potentially hazardous food shall be maintained at safe temperatures (40 degrees Fahrenheit or below or 140 degrees Fahrenheit or above), except during necessary periods of preparation and service.**

A thermometer was not observed in the refrigerator. The licensee thought there was one but could not locate it inside the refrigerator.

**REPEAT VIOLATION {RENEWAL INSPECTION 09/26/2019}**

**R 400.1426 Maintenance of premises.**

**(1) The premises shall be maintained in a clean and safe condition.**

The exhaust hood over the stove had dirt and grease buildup and was leaning. The kitchen floor and the upstairs hallway was soiled. The floor tile in the upstairs bedroom, located at the end of the hallway, was damaged. The rug in the upstairs bathroom did not have nonskid backing. The light switch in the upstairs bathroom was not working.

**R 400.1438 Emergency preparedness; evacuation plan; emergency transportation.**

**(4) Fire drills shall be conducted 4 times a year. Two of the 4 required fire drills shall be conducted during sleeping hours. A record of the fire drills shall be incorporated with the evacuation plan.**

Only 1 sleeping fire drill was conducted during the year 2021.

**IV. RECOMMENDATION**

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



06/01/2022

Date

Licensing Consultant