



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 28, 2022

Julia Schellenberg & Dawn Geihlsler
807 E Grand River
Fowlerville, MI 48836

RE: License #: AF470084425
A Home Away From Home
807 E. Grand River
Fowlerville, MI 48836

Dear Julia Schellenberg & Dawn Geihlsler:

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:

- You are to submit documentation of compliance by 05/28/2022.
- Please submit documentation that the medication in the refrigerator are being locked up.
- Please submit documentation that the home's water temperature is under 120 degrees Fahrenheit.
- Please submit documentation that fire drills have been conducted in 2022.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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,

A handwritten signature in cursive script that reads "Julie Elkins".

Julie Elkins, 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 #: AF470084425

Licensee Name: Julia Schellenberg & Dawn Geihlsler

Licensee Address: 807 E Grand River
Fowlerville, MI 48836

Licensee Telephone #: (517) 223-8312

Licensee: Julia Schellenberg & Dawn Geihlsler

Administrator: N/A

Name of Facility: A Home Away From Home

Facility Address: 807 E. Grand River
Fowlerville, MI 48836

Facility Telephone #: (517) 223-8312

Original Issuance Date: 03/01/1999

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
MENTALLY ILL
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection: 04/28/2022

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 5

No. of others interviewed 2 Role: licensees

- 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. inspection was not during meal time.
- 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: 07/21/2020, 404 (3)(a) 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 400.1418 Resident medications.

(5) Prescription medication shall be kept in the original pharmacy-supplied and pharmacy-labeled container, stored in a locked cabinet or drawer, refrigerated if required, and labeled for the specific resident.

The home had prescription medication in the refrigerator however it was not locked up.

R 400.1426 Maintenance of premises.

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

The home's water temperature exceeded 120-degrees Fahrenheit.

R 400.1438 Emergency preparedness; evacuation plan; emergency transportation.

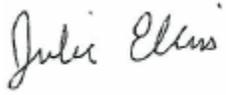
(4) Fire drills shall be conducted 4 times a year. Two of the 4 required fire drills shall be conducted during sleeping hours. A record of the fire drills shall be incorporated with the evacuation plan.

Based on the documentation provided at the time of the inspection, four fire drills were not documented as completed annually in 2020 and 2021.

A corrective action plan was requested and approved on 04/28/2022. 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. Renewal of the license is recommended.



04/28/2022

Julie Elkins
Licensing Consultant

Date