



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

August 3, 2022

David Schimke  
6339 Miller Road  
Manistee, MI 49660

RE: License #: AF510389145  
**Miller Rd LLC Nancys House AFC**  
**6339 Miller Road**  
**Manistee, MI 49660**

Dear Mr. Schimke:

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:

- An on-site inspection will be conducted.

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 (616) 356-0183.

Sincerely,

A handwritten signature in blue ink that reads "Bruce A. Messer".

Bruce A. Messer, Licensing Consultant  
Bureau of Community and Health Systems  
701 S. Elmwood  
Traverse City, MI 49684  
(231) 342-4939

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

**I. IDENTIFYING INFORMATION**

**License #:** AF510389145

**Licensee Name:** David Schimke

**Licensee Address:** 6339 Miller Road  
Manistee, MI 49660

**Licensee Telephone #:** (231) 889-9690

**Name of Facility:** Miller Rd LLC Nancys House AFC

**Facility Address:** 6339 Miller Road  
Manistee, MI 49660

**Facility Telephone #:** (231) 723-2445

**Original Issuance Date:** 02/09/2018

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
AGED

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 08/02/2022

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

Date of Health Authority Inspection if applicable: 05/06/2022

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 4  
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.
- 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:  
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 400.1405 Health of a licensee, responsible person, and member of the household.**

**(3) A licensee shall provide the department with written evidence that he or she and each responsible person in the home is free from communicable tuberculosis. Verification shall be within the 3-year period before employment and verification shall occur every 3 years thereafter.**

At the time of the on-site inspection, it was noted that the Licensee failed to have evidence that one staff member, Jade Zuchowski, was verified as being free from communicable tuberculosis within the past 3 years.

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

**(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.**

**(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.**

At the time of the on-site inspection, it was noted that the licensee had failed to review the written resident care agreement for Resident A since 2018. The licensee failed to properly complete Resident B's written resident care agreement upon admission as it was not signed by the Licensee, the

resident, a responsible agency or the residents designated representative.

**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.**

**(5) Except for trust fund accounts, a licensee shall not accept for safekeeping money and valuables exceeding a value of \$200.00 for any resident in the home. Trust fund accounts between the licensee and the resident are subject to a \$1,500.00 limitation.**

At the time of the on-site inspection, it was noted that the licensee was maintaining funds for Resident A in excess of \$200. The licensee had \$434 on hand for Resident A. Additionally, the licensee failed to accurately complete the funds and valuables transaction form for Resident A as the form noted a slightly different amount of money than what was on hand in the facility.

**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.**

At the time of the on-site inspection, it was noted that the licensee had only completed one fire drill during sleeping hours in 2021.

On August 2, 2022, I conducted an exit conference with Licensee David Schimke. I explained my findings as noted above. Mr. Schimke stated he understood, and he submitted a corrective action plan addressing the cited rule violations at that time. He had no further questions pertaining to this renewal inspection.

A corrective action plan was requested and approved on 08/02/2022. 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.

 August 3, 2022

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Bruce A. Messer  
Licensing Consultant

Date