



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 7, 2022

Nancy Ainsworth and John Ainsworth
3212 N. Shoreview Dr.
Fort Gratiot, MI 48059

RE: License #: AF740264966
Nancy Ainsworth and John Ainsworth
3212 N. Shoreview Drive
Fort Gratiot, MI 48059

Dear Nancy Ainsworth and John Ainsworth:

Your license is renewed. It is valid only at your present address and is nontransferable. 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.

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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

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

I. IDENTIFYING INFORMATION

License #: AF740264966

Licensee Name: Nancy Ainsworth and John Ainsworth

Licensee Address: 3212 N. Shoreview Dr.
Fort Gratiot, MI 48059

Licensee Telephone #: (810) 359-3425

Licensee/Licensee Designee: Nancy Ainsworth and John Ainsworth

Administrator: N/A

Name of Facility: Nancy Ainsworth and John Ainsworth

Facility Address: 3212 N. Shoreview Drive
Fort Gratiot, MI 48059

Facility Telephone #: (810) 385-8894

Original Issuance Date: 04/30/2004

Capacity: 2

Program Type: DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/05/2022

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

Date of Health Authority Inspection if applicable: 10/05/2022

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 0

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. Licensee did not have a Resident Funds II sheet for AFC Payment
- Meal preparation / service observed? Yes No If no, explain. Resident was out of home for at the time of the inspection.
- 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. No IR's to review.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: 10/19/2020-R413(6), R422(1), R404(9) 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 400.1421 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.

Licensee did not have a Resident Funds II transaction sheet for AFC payments.

R 400.1422 Resident records.

**(1)A licensee shall complete and maintain a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:
(f) Assessment plan.**

Licensee did not have an AFC assessment plan on file for Resident A.

A corrective action plan was requested and approved on 10/05/2022. 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 upon the receipt of the license renewal fee.

Sabrina McGowan

October 7, 2022

Date

Licensing Consultant