

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 4, 2022

Shari Blackburn 9040 Farley Road Pinckney, MI 48169

> RE: License #: AF470401833 Farley Adult Foster Care 9040 Farley Road Pinckney, MI 48169

Dear Ms. Blackburn:

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 submitting Health Care Appraisals for Resident A and Resident B by 09/05/2022.

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,

Julie Ellens

Julie Elkins, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909

611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909 www.michigan.gov/lara • 517-335-1980

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

## I. IDENTIFYING INFORMATION

License #:	AF470401833	
Licensee Name:	Shari Blackburn	
Licensee Address:	9040 Farley Road Pinckney, MI 48169	
Licensee Telephone #:	(734) 648-0628	
Licensee:	Shari Blackburn	
Administrator:	N/A	
Name of Facility:	Farley Adult Foster Care	
Facility Address:	9040 Farley Road Pinckney, MI  48169	
Facility Telephone #:	(734) 648-0628	
Original Issuance Date:	02/21/2020	
Capacity:	5	
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL	

# **II. METHODS OF INSPECTION**

Date of	Date of On-site Inspections:			
Date of	Date of Bureau of Fire Services Inspection if applicable:			
Date of	Date of Health Authority Inspection if applicable:			
Inspecti	on Type:	Interview and Observation Combination	n ⊠ Worksheet □ Full Fire Safety	
No. of r	taff interviewed and esidents interviewed thers interviewed		1 5	
• Me	dication pass / simu	lated pass observed? Yes $ig  imes$	] No 🗌 If no, explain.	
• Me	dication(s) and med	ication record(s) reviewed?	∕es 🗌 No 🗌 If no, explain.	
Ye	<ul> <li>Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain.</li> <li>Meal preparation / service observed? Yes X No I If no, explain.</li> </ul>			
• Fire	● Fire drills reviewed? Yes ⊠ No □ If no, explain.			
• Fire	e safety equipment a	and practices observed? Yes	🛛 No 🗌 If no, explain.	
<ul> <li>E-scores reviewed? (Special Certification Only) Yes No N/A If no, explain.</li> <li>Water temperatures checked? Yes No If no, explain.</li> </ul>				
• Inc	ident report follow-u	p? Yes 🛛 No 🗌 If no, expl	ain.	
CA	P 4/15/2021, 419 (4	compliance verified? Yes ⊠ ) N/A □ nployees followed-up?	CAP date/s and rule/s: N/A 🖂	
• Va	riances? Yes 🗌 (pl	ease 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.

(9) If a resident is not under the care of a physician at the time of the resident's admission to the home, the licensee shall require that the resident or the resident's designated representative provide a written health care appraisal completed within the 90-day period before the resident's admission to the home. If a written health care appraisal is not available, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.

Resident A and Resident B's records did not contain a written health care appraisal completed within the 90-day period before the resident's admission to the home or within 30 days after admission.

### **IV. RECOMMENDATION**

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Jula Ellers

08/04/2022

Julie Elkins Licensing Consultant

Date