



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 3, 2023

June Bozarth and Larry Bozarth
614 Linwood Ave
Battle Creek, MI 49037

RE: License #: AF130294904
J & L Sunny Adult Foster Care
614 Linwood Ave
Battle Creek, MI 49037

Dear June Bozarth and Larry Bozarth:

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.

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,

Kevin L. Sellers

Kevin Sellers, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 230-3704

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

I. IDENTIFYING INFORMATION

License #: AF130294904

Licensee Name: June Bozarth and Larry Bozarth

Licensee Address: 614 Linwood Ave
Battle Creek, MI 49037

Licensee Telephone #: (269) 968-6126

Licensee: June Bozarth and Larry Bozarth

Administrator: N/A

Name of Facility: J & L Sunny Adult Foster Care

Facility Address: 614 Linwood Ave
Battle Creek, MI 49037

Facility Telephone #: (269) 883-6340

Original Issuance Date: 07/11/2008

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/19/2022

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 2

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.
- 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:
12/19/2022 On-Site: 301.4,301.10 and 510.3 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; physician's instructions; health care appraisal.

(9) If a resident is not under the care of a physician at the time of 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 obtain not less than 30 days after admission. The department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.

FINDING: During the onsite inspection, a health care appraisal for Resident A was not observed or found in the resident's file. Resident A's health care appraisal was not completed when admitted into the home around October 2022, which every resident's health care appraisal must be completed 90-days prior to admission or 30 days after admission.

A corrective action plan was requested and approved on 12/19/2022. 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.

Kevin L. Sellers

01/03/2023

Kevin Sellers
Licensing Consultant

Date

Approved:

Dawn Timm

01/03/2023

Dawn Timm
Area Manager

Date