



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 18, 2023

Pamela Dill  
Bethany, Inc.  
1000 E. Porter Street  
Jackson, MI 49202

RE: License #: AS380297180  
**Bethany 1**  
**1000 E. Porter St.**  
**Jackson, MI 49202**

Dear Ms. Dill:

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 a Statement of Correction by June 15, 2023.

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 (313) 456-0380.

Sincerely

*Mahtina Rubritius*

Mahtina Rubritius, Licensing Consultant  
Bureau of Community and Health Systems  
3026 W. Grand Blvd., Ste. #9-100  
Detroit, MI 48202  
(517) 262-8604

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS380297180
<b>Licensee Name:</b>	Bethany, Inc.
<b>Licensee Address:</b>	1000 E. Porter Street Jackson, MI 49202
<b>Licensee Telephone #:</b>	(517) 768-5007
<b>Licensee/Licensee Designee:</b>	Pamela Dill
<b>Administrator:</b>	Pamela Dill
<b>Name of Facility:</b>	Bethany 1
<b>Facility Address:</b>	1000 E. Porter St. Jackson, MI 49202
<b>Facility Telephone #:</b>	(517) 768-5007
<b>Original Issuance Date:</b>	09/12/2008
<b>Capacity:</b>	6
<b>Program Type:</b>	AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/16/2023

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 3

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:  
R 400.14203 (1), R 400.14208 (1)(f), and R 400.14301 (4)(9)(10) 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 400.14203 Licensee and administrator training requirements.**

**(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:**

**(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.**

**(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.**

- The licensee did not complete the 16 hours of annual training in 2022, as required.

**R 400.14208 Direct care staff and employee records.**

**(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:**

**(f) Verification of reference checks.**

- There was only one reference check completed for Employee #1.

**R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

**(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an**

emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

- The health care appraisal for Resident A was outdated, as it was last reviewed in August of 2021.

**R 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

- The written assessment plan for Resident A was outdated, as it was last reviewed in August of 2021.
- The written assessment plan for Resident B was outdated and had not been reviewed annually, as required.
- The written assessment plan for Resident C was completed but not signed by the licensee.

**R 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

- The resident care agreement for Resident A was outdated, as it was last reviewed in August of 2021.
- The resident care agreement for Resident B was outdated, as it was last reviewed in December of 2021.
- The resident care agreement for Resident C was completed but not signed by the licensee.

A corrective action plan was requested and approved on 05/17/2023. 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.

*Mahtina Rubritius*

5/18/2023

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Mahtina Rubritius  
Licensing Consultant

Date