

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 26, 2023

Michael Kirby Kirby's Adult Foster Care Services Inc. 2285 E. Lily Lake Harrison, MI 48625

RE: License #: AS720414290

Danes

6705 Danes Dr.

Houghton Lake, MI 48629

Dear Mr. Kirby:

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.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license and special certification 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,

Matthew Soderquist, Licensing Consultant Bureau of Community and Health Systems

931 S Otsego Ave Ste 3 Gaylord, MI 49735

(989) 370-8320

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

I. IDENTIFYING INFORMATION

License #: AS720414290

Licensee Name: Kirby's Adult Foster Care Services Inc.

Licensee Address: 2285 E. Lily Lake

Harrison, MI 48625

Licensee Telephone #: (989) 430-8061

Licensee/Licensee Designee: Michael Kirby, Designee

Administrator: Michael Kirby

Name of Facility: Danes

Facility Address: 6705 Danes Dr.

Houghton Lake, MI 48629

Facility Telephone #: (989) 202-2258

Original Issuance Date: 12/05/2022

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

Certified Programs: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Dat	e of On-site Inspection(s):	05/25/2023
Dat	e of Bureau of Fire Services Inspection if applicable:	N/A
Dat	e of Health Authority Inspection if applicable:	11/14/2022
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:	3 4
•	Medication pass / simulated pass observed? Yes ⊠	No ☐ If no, explain.
•	Medication(s) and medication record(s) reviewed? Ye	es 🗵 No 🗌 If no, explain
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes No \square 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 If no, explain. Water temperatures checked? Yes ⊠ No ☐ If no, or	<u> </u>
•	Incident report follow-up? Yes ⊠ No ☐ If no, expla	in.
•	Corrective action plan compliance verified? Yes ☐ 0 N/A ☒ Number of excluded employees followed-up?	CAP date/s and rule/s:
•	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 400.14315 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.

Resident A's funds were not documented on the department form.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

Daytime and sleeping hour emergency evacuation drills were not conducted during the first quarter of 2023.

R 400.14401 Environmental health.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

The hot water at the kitchen faucet was 130 degrees Fahrenheit.

On 05/25/2023 I conducted an exit conference with the licensee designee Michael Kirby. Mr. Kirby concurred with the findings of the inspection. A corrective action plan was requested and approved on 05/25/2023. 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 and special certification.

IV. RECOMMENDATION

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

5/26/2023

Date

Licensing Consultant