

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

March 26, 2024

Vickie Runyon Jerry's Dreams Adult Homes PO Box 1086 Grand Rapids, MI 49501

RE: License #: AS410269764

Jerry's Dreams #3

1126 W. Leonard Court, NW Walker, MI 49534-6835

Dear Ms. Runyon:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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,

Anthony Mullins, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W.

Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #: AS410269764

Licensee Name: Jerry's Dreams Adult Homes

Licensee Address: PO Box 1086

Grand Rapids, MI 49501

Licensee Telephone #: (616) 293-7198

Licensee/Licensee Designee: Vickie Runyon

Administrator: Vickie Runyon

Name of Facility: Jerry's Dreams #3

Facility Address: 1126 W. Leonard Court, NW

Walker, MI 49534-6835

Facility Telephone #: (616) 293-7198

Original Issuance Date: 08/23/2005

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	03/25/20	024	
Date	e of Bureau of Fire Services Inspection if appl	icable:	N/A	
Date	e of Health Authority Inspection if applicable:		N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Designe	e	2 4	
•	Medication pass / simulated pass observed? Yes \square No \boxtimes If no, explain. No medications were scheduled to be passed during the onsite inspection. Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square 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 $oximes$ No $oximes$ 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 I	no, expla	in.	
•	Corrective action plan compliance verified?	Yes 🗌 (CAP date/s and rule/s:	
•	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 400.14201

Qualifications of administrator, direct care staff, licensee, and members of household; provision of names of employee, volunteer, or member of household on parole or probation or convicted of felony; food service staff.

(10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.

The licensee did not have background checks on file for all staff members.

R 400.14204

Direct care staff; qualifications and training.

- (3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:
 - (a) Reporting requirements.
 - (b) First aid.
 - (c) Cardiopulmonary resuscitation.
 - (d) Personal care, supervision, and protection.
 - (e) Resident rights.
 - (f) Safety and fire prevention.
- (g) Prevention and containment of communicable diseases.

The licensee did not have First Aid/CPR certifications on file for all staff members, which includes the licensee, Vickie Runyon.

R 400.14205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

The licensee did not have a copy of her TB test on file during the onsite inspection.

R 400.14205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

The licensee did not have copies of her employees TB tests on file during the onsite inspection.

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.

Resident A and Resident B did not have assessment plans on file that were completed within the last year.

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.

Resident A and Resident B did not have resident care agreements on file that were completed within the last year.

R 400.14403 Maintenance of premises.

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

The slider door in the basement bedroom needs to be repaired due to not being weathertight or watertight.

R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

The carpet in the basement living room was removed and has yet to be replaced, leaving residents exposed to cement floors. The carpet in the bedroom on the right side of the basement needs to be cleaned or replaced due to being stained.

On 3/25/26, I conducted an onsite renewal inspection. An exit conference was completed with licensee designee, Vickie Runyon, and her son, Josh Runyon. The licensee was informed of the findings and aware that a corrective action plan is needed prior to the license being renewed.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Anthony Mullin	03/26/2024
Anthony Mullins Licensing Consultant	Date