



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 26, 2024

Christopher McCoy
108 West Street
Battle Creek, MI 49017

RE: License #: AM130095549
Rhema Home AFC
108 West Street
Battle Creek, MI 49017

Dear Mr. McCoy:

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 verification of completion of the required corrections below.

Upon receiving documentation of completed corrections, I recommend issuance of a regular license to this AFC adult medium group home. Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

Kevin L Sellers

Kevin Sellers, Licensing Consultant
Department of Licensing and Regulatory Affairs
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(517) 230-3704
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**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AM130095549
Licensee Name:	Christopher McCoy
Licensee Address:	108 West Street Battle Creek, MI 49017
Licensee Telephone #:	(269) 209-0273
Licensee Designee:	Christopher McCoy
Administrator:	Barbara Ford
Name of Facility:	Rhema Home AFC
Facility Address:	108 West Street Battle Creek, MI 49017
Facility Telephone #:	(269) 339-3714
Original Issuance Date:	01/10/2003
Capacity:	7
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/25/2024
Date of Bureau of Fire Services Inspection if applicable: 10/26/2023
Date of Health Authority Inspection if applicable: N/A
No. of staff interviewed and/or observed 2
No. of residents interviewed and/or observed 4
No. of others interviewed 1 Role: Administrator

- 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:
CAP on 7/25/24 204 (3)(a-g), 204 (3)(b & c), 205 (3), 205 (5), 301 (10) and 316 (1)(g) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSION

This medium group was found to be in non-compliance with the following rules:

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.

At the time of the onsite inspection, while reviewing employee files. Direct Care worker (DCW) Brian Long began his employment at the beginning of July 2024 and working daily with residents in the home. While reviewing DCW Long's file there was no evidence DCW Long completed required trainings in reporting requirements, first aid, CPR, personal care, supervision and protection, resident rights, safety and fire prevention and prevention and containment of communicable diseases.

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:

- (b) First aid.

At the time of the onsite inspection, while reviewing employee files. DCW Jerome Gardenhire's required certification in First Aid was out of date. Each employee must be competent and required to complete First Aid training certifying the training every two years.

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:

- (c) Cardiopulmonary resuscitation.

At the time of the onsite inspection, while reviewing employee files. DCW Jerome Gardenhire's required certification in Cardiopulmonary resuscitation was out of date. Each employee must be competent and required to complete CPR training certifying the training every two years.

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.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

At the time of the onsite inspection, reviewing licensee and employee files. Licensee Christopher McCoy and DCW Jerome Gardenhire's files an updated annual (yearly) physical health review forms was not found in their files. The last physical health review completed on DCW Gardenhire was done in 2014 and licensee McCoy's was done over two years ago. DCW Brian Long began his employment at the beginning of July 2024 and working with residents in the home. A BCAL 3704-AFC medical clearance form was not found and/or completed in DCW Long's employee file.

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.

At the time of the onsite inspection, while reviewing employee files. DCW Brian Long's employment began at the beginning of July 2024 and working with residents in the home. While reviewing DCW Long's file a completed BCAL 3704-AFC medical clearance form was not completed showing he was tested for communicable tuberculosis.

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.

At the time of the onsite inspection, reviewing resident files. There were no updated written health care appraisals for Residents A and B. Residents A and B's last health care appraisal was last completed over one year ago. Resident health care appraisals are required to be updated annually (yearly) from the date of the last written health care appraisal.

R 400.14316 Resident records.

(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:
(g) Weight record.

At the time of the onsite inspection, reviewing resident files. Resident B's weight record was found in the resident file, but only documented that Resident B's weight was documented for the months of April, May, June and July 2024. Residents are required to be weighed monthly and documented on their weight record located in each resident file. Resident B's weight for the months of January, February and March 2024 was not documented on the weight record.

IV. RECOMMENDATION

An acceptable corrective action plan was requested and approved on 07/25/2024. Verification of completion of the corrective action plan must still occur by submitting documents of the above violations. However, I recommend renewal of a regular licensee of the medium group home.

Kevin L. Sellers

7/26/24

Kevin Sellers
Licensing Consultant

Date