

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

February 12, 2025

Ira Combs, Jr. Christ Centered Homes, Inc. 327 West Monroe Street Jackson, MI 49202

RE: License #: AS380338047

Herkimer-Hayes 1612 Herkimer Jackson, MI 49203

Dear Ira Combs, Jr.:

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 designee 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 (517) 284-9730.

Sincerely,

Mahtina Rubritius, Licensing Consultant Bureau of Community and Health Systems

611 W. Ottawa P.O. Box 30664 Lansing, MI 48909 (517) 262-8604

Mahtina Rubatius

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

I. IDENTIFYING INFORMATION

License #: AS380338047

Licensee Name: Christ Centered Homes, Inc.

Licensee Address: 327 West Monroe Street

Jackson, MI 49202

Licensee Telephone #: (517) 499-6404

Licensee/Licensee Designee: Ira Combs, Jr.

Administrator: Ira Combs, Jr.

Name of Facility: Herkimer-Hayes

Facility Address: 1612 Herkimer

Jackson, MI 49203

Facility Telephone #: (517) 250-7926

Original Issuance Date: 03/12/2013

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s): 02/11/2025		
Date	e of Bureau of Fire Services Inspection if applicable:	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 0 Role:	3 5	
•	Medication pass / simulated pass observed? Yes $oximes$	No 🗌 If no, explain.	
•	Medication(s) and medication record(s) reviewed? Y	es 🛭 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. The on-site inspection was not concurrent with the mealtimes. 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,		
•	Incident report follow-up? Yes No No If no, explaincident Reports are no longer required to be submitt Corrective action plan compliance verified? Yes R 400.14313 (4), R 400.14315 (6), R 400.14401 (2),	ed to LARA. 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 330.1803 Facility environment; fire safety.

(1) A facility that has a capacity of 4 to 6 clients shall be equipped with an interconnected multistation smoke detection system which is powered by the household electrical service and which, when activated, initiates an alarm that is audible in all areas of the home. The smoke detection system shall be installed on all levels, including basements, common activity areas, and outside each sleeping area, but excluding crawl spaces and unfinished attics, so as to provide full coverage of the home. The system shall include a battery backup to assure that the system is operable if there is an electrical power failure and accommodate the sensory impairments of clients living in the facility, if needed. A fire safety system shall be installed in accordance with the manufacturer's instructions by a licensed electrical contractor and inspected annually. A record of the inspections shall be maintained at the facility.

The fire safety system was last inspected in December of 2023 and has not been reviewed annually, as required by the rule.

R 400.14315 Handling of resident funds and valuables.

(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.

The licensee accepted more than \$200.00 for safe keeping for Resident A.

This is a REPEAT VIOLATION: Please see LSR dated 2/16/2023.

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 temperature was 128 degrees Fahrenheit.

This is a REPEAT VIOLATION: Please see LSR dated 2/16/2023.

R 400.14403 Maintenance of premises.

- (1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
- There was a hole in the screen door (front entrance), which required repair or replacement.
- The light fixture in the shower room was broken and required repair or replacement.

IV. RECOMMENDATION

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

Mahtina Rubeitius	02/12/2025
Mahtina Rubritius	Date
Licensing Consultant	