



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 20, 2025

Theresa Posey & John Posey
7550 E. Allen Rd.
Fenton, MI 48430

RE: License #: AS470312590
Investigation #: 2025A0466050
Green Acres

Dear Theresa Posey & John Posey:

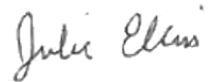
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 (517) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Julie Elkins".

Julie Elkins, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AS470312590
Investigation #:	2025A0466050
Complaint Receipt Date:	09/23/2025
Investigation Initiation Date:	09/23/2025
Report Due Date:	11/22/2025
Licensee Name:	Theresa Posey & John Posey
LicenseeAddress:	7550 E. Allen Road Fenton, MI 48430
Licensee Telephone #:	(810) 210-8167
Administrator:	Nancy Posey
Licensee Designee:	N/A
Name of Facility:	Green Acres
Facility Address:	5385 Green Road Fenton, MI 48430
Facility Telephone #:	(810) 459-6232
Original Issuance Date:	03/13/2012
License Status:	REGULAR
Effective Date:	09/13/2024
Expiration Date:	09/12/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. ALLEGATIONS

	Violation Established?
Facility does not have a current license posted.	No
Resident A's <i>Resident Care Agreement</i> has not been completed as required.	Yes
Additional Findings	Yes

III. METHODOLOGY

09/23/2025	Special Investigation Intake 2025A0466050.
09/23/2025	Special Investigation Initiated – Letter to Complainant.
10/02/2025	Inspection Completed On-site.
10/03/2025	Contact - Document Sent email sent to Nancy Posey about the resident record.
10/09/2025	Inspection Completed On-site, second time.
10/20/2025	Exit Conference with administrator Nancy Posey.

ALLEGATION: Facility does not have a current license posted.

INVESTIGATION:

On 09/23/2025, Complainant reported that license posted in the facility is out of date even though the license may be current online.

On 10/09/2025, I completed an unannounced investigation and when I walked into the facility I observed a copy of the facility license in a frame by the front door. The effective date of the license posted was 9/13/2024 with an expiration date of 9/12/2026.

APPLICABLE RULE	
R 400.14103	Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.
	(4) The current license, whether regular, provisional, or temporary, shall be posted in the home and shall be available for public inspection.

ANALYSIS:	At the time of the unannounced investigation the current license was posted. Therefore there is no evidence to establish a violation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Resident A's *Resident Care Agreement* has not been completed as required.

INVESTIGATION:

On 09/23/2025, Complainant reported that for multiple weeks, due to change of power of attorney, Complainant had requested from both licensee Theresa Posey and administrator Nancy Posey a copy of contracts for Resident A via email, text, as well as through phone calls. Complainant reported that administrator Nancy Posey eventually provided what she claimed was a contract from 5/28/24, when Resident A was moved in and Relative A1 was the power of attorney at that time. Complainant reported that after reviewing the contract it was noted that the contract was blank, had no address, no dollar amount, and no dates. Complainant reported that the only thing filled out was the signatures of both Relative A1 and Nancy Posey.

On 09/23/2025, Complainant provided two of Resident A's documents via email:

- The first document was an *Adult Foster Care (AFC) Resident Care Agreement (RAC)* had a blue stamp on it that stated, "Client Copy" had "[Resident A's]" name on it but the "name of the home" and "license number" were blank. The form was completed except the "basic fee" was blank. The RAC was signed by Relative A1 and administrator Nancy Posey, however neither signature was dated. The bottom of the form stated "BCAL 3266 (Rev 1-16).
- The second document was a *Michigan Department of Licensing and Regulatory Affairs Adult Foster Care Licensing and Home for the Aged Licensing* form. This document had been completely filled out which included Resident A's name, name of home, license number and a basic fee amount. This form had been signed by Relative A1 and administrator Nancy Posey on 7/14/2025. The "name of the home" and "license number" were for another license facility owned and operated by licensee Theresa Posey and administrator Nancy Posey, not Green Acres where Resident A was residing.

On 10/02/2025, I conducted an unannounced investigation. Direct care worker (DCW) Holly Walters reported that Resident A moved out on 9/26/2025. DCW Walters could not locate the *Resident Register* nor Resident A's resident record. DCW Walters contacted administrator Nancy Posey by phone and she reported that neither she nor licensee Theresa Posey could bring Resident A's resident record to the facility.

On 10/03/2025, I emailed administrator Nancy Posey and requested Resident A's record to be at the facility no later than 10/06/2025 by noon.

On 10/09/2025, I went to the facility for a second time and DCW Layla Riojaz was on duty. I reviewed the *Resident Register* which documented that Resident A was admitted to the facility on 8/27/2025 and discharged on 9/26/2025.

I reviewed Resident A's record which contained a *Resident Care Agreement* that was completed and signed by Relative A1 and administrator Nancy Posey on 7/14/2025, which was prior to Resident A's admission to this facility. The *Resident Care Agreement* was the same document that was provided by Complainant and it documented that it was completed for admission to another licensed facility (owned and operated by Theresa Posey and Nancy Posey) and not the licensed facility where Resident A was last living.

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	<p>(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:</p> <p>(a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.</p> <p>(b) A description of services to be provided and the fee for the service.</p> <p>(c) A description of additional costs in addition to the basic fee that is charged.</p> <p>(d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.</p> <p>(e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.</p> <p>(f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.</p> <p>(g) An agreement by the resident to follow the house rules that are provided to him or her.</p>

	<p>(h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.</p> <p>(i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.</p> <p>(j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.15315.</p> <p>(k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.</p> <p>(l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.</p>
ANALYSIS:	Resident A was admitted to the facility on 8/27/2025 and at the time of investigation Resident A's resident record did not contain a current <i>Resident Care Agreement</i> . Resident A's record did not contain documentation that the <i>Resident Care Agreement</i> was completed with the resident or the resident's designated representative at the time of admission. Resident A's record contained a <i>Resident Care Agreement</i> from a different licensed facility owned and operated by licensee Theresa Posey and administrator Nancy Posey. Therefore a violation has been established as there was no current resident care agreement for Resident A for this facility.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 10/02/2025, I conducted an unannounced investigation and DCW Walters could not provide a resident register for review. At the time of the investigation, DCW Walters contacted administrator Nancy Posey who reported that neither she nor licensee Theresa Posey were available to come to the facility nor were they able to bring the document to the facility.

APPLICABLE RULE	
R 400.14209	Home records generally.
	<p>(1) A licensee shall keep, maintain, and make available for department review, all the following home records:</p> <p>(e) A resident register.</p>

ANALYSIS:	On 10/02/2025, I conducted an unannounced investigation and the facilities <i>Resident Register</i> was not available for review as required.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 10/09/2025, I reviewed the *Resident Register* which documented that Resident A was admitted to the facility on 8/27/2025.

I reviewed Resident A's record. At the time of admission, a written assessment plan, *Assessment Plan for AFC Residents* (written assessment plan), had not been completed for Resident A. The written assessment plan in Resident A's record was dated 7/14/2025 which was prior to Resident A's admission to this facility and the same date that the *Resident Care Agreement* was signed. Both documents were completed while Resident A was living at another licensed facility owned and operated by administrator Nancy Posey and licensee Theresa Posey.

Resident A's record contained a *Health Care Appraisal* that was dated 07/19/2024.

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	<p>(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.</p> <p>(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.</p>

ANALYSIS:	<p>Resident A was admitted to the facility on 8/27/2025 and the resident record did not contain a completed written assessment plan upon admission as required.</p> <p>Resident A's record contained a <i>Health Care Appraisal</i> that was dated 07/19/2024. The Health Care Appraisal was not completed 90 days prior to admission or 30 days after, therefore a violation has been established.</p>
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 10/02/2025, I conducted an unannounced investigation and DCW Walters could not locate Resident A's record. At the time of the investigation, DCW Walters contacted administrator Nancy Posey who reported that neither she nor licensee Theresa Posey were available to come to the facility nor were they able to bring the record over. Consequently, I was not able to review Resident A's resident records as required.

Special Investigation Report dated 09/16/2024 and completed by AFC licensing consultant Julie Elkins documented violation of Rule 400.14316 (2). At the time of the Special Investigation Report there was sufficient evidence found that a resident record was not available in the AFC facility for department review. Licensee Theresa Posey signed the CAP dated 09/16/2024 that stated: "Resident records shall be kept on file in the home for 2 years after the date of resident's discharge from a home. Compliance: Staff will be reminded that discharged resident records are kept in a container marked as such. Licensee/designee will be responsible for placing the records of the discharged resident in the proper container and staff is aware of the location."

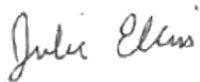
APPLICABLE RULE	
R 400.14316	Resident records.
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident

	<p>record shall include, at a minimum, all of the following information:</p> <p>(a) Identifying information, including, at a minimum, all of the following:</p> <ul style="list-style-type: none"> (i) Name. (ii) Social security number, date of birth, case number, and marital status. (iii) Former address. (iv) Name, address, and telephone number of the next of kin or the designated representative. (v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home. (vi) Name, address, and telephone number of the preferred physician and hospital. (vii) Medical insurance. (viii) Funeral provisions and preferences. (ix) Resident's religious preference information. <p>(b) Date of admission.</p> <p>(c) Date of discharge and the place to which the resident was discharged.</p> <p>(d) Health care information, including all of the following:</p> <ul style="list-style-type: none"> (i) Health care appraisals. (ii) Medication logs. (iii) Statements and instructions for supervising prescribed medication, including dietary supplements and individual special medical procedures. (iv) A record of physician contacts. (v) Instructions for emergency care and advanced medical directives. <p>(e) Resident care agreement.</p> <p>(f) Assessment plan.</p> <p>(g) Weight record.</p> <p>(h) Incident reports and accident records.</p> <p>(i) Resident funds and valuables record and resident refund agreement.</p> <p>(j) Resident grievances and complaints.</p> <p>(2) Resident records shall be kept on file in the home for 2 years after the date of a resident's discharge from a home.</p>
<p>ANALYSIS:</p>	<p>On 10/02/2025, I conducted an unannounced investigation and Resident A's resident record was not available for review as required.</p>

CONCLUSION:	REPEAT VIOLATIONS ESTABLISHED [SEE SPECIAL INVESTIGATION REPORT DATED AND CORRECTIVE ACTION PLAN BOTH DATED 09/16/2024.]
--------------------	---

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in license status.



10/20/2025

Julie Elkins
Licensing Consultant

Date

Approved By:



10/20/2025

Dawn N. Timm
Area Manager

Date