



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 22, 2021

Randall Gasser
Woodhaven Retirement Community
29667 Wentworth Ave.
Livonia, MI 48154

RE: License #:	AS090380411 Woodhaven at Bay City 3740 Two Mile Road Bay City, MI 48706
----------------	--

Dear Mr. Gasser:

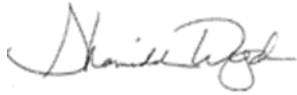
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (810) 787-7031.

Sincerely,

A handwritten signature in dark ink, appearing to read "Shamidah Wyden". The signature is fluid and cursive, with the first name being more prominent.

Shamidah Wyden, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48605
989-395-6853

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

I. IDENTIFYING INFORMATION

License #:	AS090380411
Licensee Name:	Woodhaven Retirement Community
Licensee Address:	29667 Wentworth Ave. Livonia, MI 48154
Licensee Telephone #:	(734) 730-2360
Licensee Designee:	Randall Gasser
Administrator:	Randall Gasser
Name of Facility:	Woodhaven at Bay City
Facility Address:	3740 Two Mile Road Bay City, MI 48706
Facility Telephone #:	(734) 261-9000
Original Issuance Date:	07/19/2016
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/14/2021

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination ☐ Full Fire Safety

No. of staff interviewed and/or observed 2
No. of residents interviewed and/or observed 5
No. of others interviewed 1 Role: Licensee Designee

- 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.
There were no recent incident reports requiring follow-up.
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s:
01/09/2019 R401(2), R301(10), R316(1)(i), R306(3), R402(3) N/A ☐
- Number of excluded employees followed-up? 1 N/A ☐
- Variances? Yes ☐ (please explain) No ☐ N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This inspection was conducted virtually due to the COVID-19 Pandemic. This facility was found to be in non-compliance with the following rules:	
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.
	(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.
At the time of inspection, staff Cherie Horne did not have an annual health review on file.	
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.
At the time of inspection, several resident's personal sinks in the facility had water temperature readings below 105 degrees Fahrenheit.	
REPEAT VIOLATION ESTABLISHED, LSR date: 01/16/2019 CAP date: 01/09/2019	

IV. RECOMMENDATION

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



01/22/2021

Shamidah Wyden
Licensing Consultant

Date