



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 2, 2021

Todd Dockerty  
Woodland Terrace at Longmeadow  
13 Longmeadow Village Dr.  
Niles Township, MI 49120

RE: License #: AH110353051  
Woodland Terrace at Longmeadow  
13 Longmeadow Village Dr.  
Niles Township, MI 49120

Dear Mr. Dockerty:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed until 8/10/2022. It is valid only at your present address and is nontransferable.

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 feel free to contact the local office at (616) 356-0100.

Sincerely,

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

Julie Viviano, Licensing Staff  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 204-4300

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH110353051
<b>Licensee Name:</b>	Dockerty Health Care Services, Inc.
<b>Licensee Address:</b>	8850 Red Arrow Hwy. Bridgman, MI 49106
<b>Licensee Telephone #:</b>	(269) 465-7600
<b>Authorized Representative:</b>	Todd Dockerty
<b>Administrator/Licensee Designee:</b>	Gina Huebner
<b>Name of Facility:</b>	Woodland Terrace at Longmeadow
<b>Facility Address:</b>	13 Longmeadow Village Dr. Niles Township, MI 49120
<b>Facility Telephone #:</b>	(269) 683-7900
<b>Original Issuance Date:</b>	01/22/2014
<b>Capacity:</b>	90
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/02/2021

Date of Bureau of Fire Services Inspection if applicable: 3/11/21 - A

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 09/02/2021

No. of staff interviewed and/or observed 11

No. of residents interviewed and/or observed 22

No. of others interviewed 0 Role N/A

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. The home does not hold resident funds in trust.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Reviewed disaster plans along with interviewed staff on policy and procedures.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: N/A
- Number of excluded employees followed up? N/A

**III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

The facility is in compliance with all applicable rules and statutes.

**IV. RECOMMENDATION**

Renewal of the license is recommended.

*Julie Miranda*

9/2/21

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Licensing Consultant

Date