



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 30, 2021

Kristi Fleischfresser
Pleasant Lake Lodge, Inc.
2085 S. 33 1/2 Mile Rd.
Cadillac, MI 49601

RE: License #: AS830405112
Pleasant Lake Lodge Center
2085 S 33 1/2 Road
Cadillac, MI 49601

Dear Ms. Fleischfresser:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your Adult Foster Care small group home license are renewed. The license is valid only at your present address and is nontransferable.

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 (616) 356-0183.

Sincerely,

A handwritten signature in red ink that reads "Bruce A. Messer".

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

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

I. IDENTIFYING INFORMATION

License #: AS830405112

Licensee Name: Pleasant Lake Lodge, Inc.

Licensee Address: 2085 S. 33 1/2 Mile Rd.
Cadillac, MI 49601

Licensee Telephone #: (231) 775-0522

Licensee Designee: Kristi Fleischfresser

Administrator: Kristi Fleischfresser

Name of Facility: Pleasant Lake Lodge Center

Facility Address: 2085 S 33 1/2 Road
Cadillac, MI 49601

Facility Telephone #: (231) 775-0522

Original Issuance Date: 10/13/2020

Capacity: 5

Program Type: AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/29/2021

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

Date of Health Authority Inspection if applicable: 08/23/2021

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 2
No. of others interviewed 0 Role: [REDACTED]

- 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:
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

On September 29, 2021, I provided Licensee Designee Kristi Fleischfresser with an exit conference. I explained my finding as noted above. Ms. Fleischfresser stated she understood and had no further questions pertaining to this renewal inspection.

IV. RECOMMENDATION

I recommend issuance of a 2 year regular adult foster care license.

 September 30, 2021

Bruce A. Messer
Licensing Consultant

Date