



STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ORLENE HAWKS  
DIRECTOR

September 24, 2021

Anna Paige  
Paige's Supervised Comm Living Inc  
G 3472 W Pasadena Ave  
Flint, MI 48504

RE: License #:	AS250010947 <b>Reid Road Home</b> <b>7214 Reid Rd</b> <b>Swartz Creek, MI 48473</b>
----------------	--

Dear Ms. Paige:

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 and special certification 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 (906) 226-4171.

Sincerely,

A handwritten signature in black ink that reads "Susan Hutchinson". The signature is written in a cursive, flowing style.

Susan Hutchinson, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(989) 293-5222

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS250010947
<b>Licensee Name:</b>	Paige's Supervised Comm Living Inc
<b>Licensee Address:</b>	G 3472 W Pasadena Ave Flint, MI 48504
<b>Licensee Telephone #:</b>	(810) 732-6485
<b>Licensee/Licensee Designee:</b>	Anna Paige
<b>Administrator:</b>	Anna Paige
<b>Name of Facility:</b>	Reid Road Home
<b>Facility Address:</b>	7214 Reid Rd Swartz Creek, MI 48473
<b>Facility Telephone #:</b>	(810) 635-4674
<b>Original Issuance Date:</b>	09/25/1991
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED
<b>Certified Programs:</b>	DEVELOPMENTALLY DISABLED

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 09/22/2021

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

Date of Environmental/Health Inspection if applicable: 09/20/2021

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 3  
No. of residents interviewed and/or observed 5  
No. of others interviewed 0 Role: N/A

- 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.  
My inspection did not take place during a mealtime
- 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

This facility was found to be in non-compliance with the following rules:	
<b>R 400.14203</b>	<b>Licensee and administrator training requirements.</b>
	<p><b>(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:</b></p> <p><b>(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.</b></p> <p><b>(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.</b></p>
At the time of my inspection, the licensee was only able to produce documentation of 14.5 hours of annual training in 2019 and was unable to produce documentation of 16 hours of annual training in 2020.	
<b>R 400.14401</b>	<b>Environmental health.</b>
	<b>(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.</b>
At the time of my inspection, the hot water at the kitchen faucet only reached 74.5 degrees Fahrenheit yet the hot water heater was set to "very hot." The hot water heater must be repaired or replaced in order to maintain a safe hot water temperature.	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	<b>(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</b>

At the time of my inspection, I noted that the patio cement in the backyard was uneven which caused standing water to pool in the middle. The patio cement must be repaired to prevent standing water from pooling in the middle.

**IV. RECOMMENDATION**

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

*Susan Hutchinson*

September 24, 2021

Susan Hutchinson Licensing Consultant	Date
--	------