



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 18, 2022

Terrie Parker  
Winter Wood Inc.  
307 Broadway  
Middleville, MI 49333

RE: License #: AM080007779  
**Middleville AFC**  
**307 Broadway**  
**Middleville, MI 49333**

Dear Ms. Parker:

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 (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Leslie Herrguth".

Leslie Herrguth, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 256-2181

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM080007779
<b>Licensee Name:</b>	Winter Wood Inc.
<b>Licensee Address:</b>	307 Broadway Middleville, MI 49333
<b>Licensee Telephone #:</b>	(269) 795-3011
<b>Licensee Designee:</b>	Terrie Parker
<b>Administrator:</b>	Terrie Parker
<b>Name of Facility:</b>	Middleville AFC
<b>Facility Address:</b>	307 Broadway Middleville, MI 49333
<b>Facility Telephone #:</b>	(269) 795-3011
<b>Original Issuance Date:</b>	12/08/1989
<b>Capacity:</b>	12
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/16/2022 & 03/10/2022

Date of Bureau of Fire Services Inspection if applicable: 02/18/2022

Date of Health Authority Inspection if applicable: Not applicable

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 7

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.  
Worksheet inspection; not required
- 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:  
08/02/21 for rules 312(2) and 311(1) 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:

**MCL 400.734**      **400.734b. This amended section is effective January 9, 2009 except Section 734b(1)(e)(iv) after the word "or" which will not be effective until October 31, 2010.**

**Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.**

Direct care staff member Ernest "Denny" Parker was scheduled for but did not complete fingerprinting through the Michigan Workforce Background Check criminal history clearance system.

**R 400.14203**      **Licensee and administrator training requirements.**

**(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:**

**(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.**

Licensee designee and administrator Terrie Parker did not complete 32 hours of training in total during the renewal period.

**R 400.14204**      **Direct care staff; qualifications and training.**

**(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:**

**(b) First aid.**

**(c) Cardiopulmonary resuscitation.**

Staff member Ernest “Denny” Parker did not have a current CPR and first aid certification.

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, issuance of a 2 – year regular license is recommended.



03/18/22

\_\_\_\_\_  
Date

Licensing Consultant