



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

April 5, 2022

James Tuttle  
Downriver Estates Senior Living  
19697 Allen Road  
Brownstown Township, MI 48183

RE: License #: AH820391900  
**Downriver Estates Senior Living**  
**19697 Allen Road**  
**Brownstown Township, MI 48183**

Dear Mr. Tuttle:

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.

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 (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Brender d. Howard".

Brender Howard, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(313) 268-1788

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH820391900
<b>Licensee Name:</b>	EC Opco Downriver, LLC
<b>Licensee Address:</b>	Ste. 200 500 North Hurstbourne Pkw Louisville, KY 40222
<b>Licensee Telephone #:</b>	(502) 357-9000
<b>Authorized Representative/Administrator:</b>	James Tuttle
<b>Name of Facility:</b>	Downriver Estates Senior Living
<b>Facility Address:</b>	19697 Allen Road Brownstown Township, MI 48183
<b>Facility Telephone #:</b>	(734) 479-0437
<b>Original Issuance Date:</b>	06/28/2019
<b>Capacity:</b>	133
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 4/5/2022

Date of Bureau of Fire Services Inspection if applicable: 7/13/2021

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 4/5/2022

No. of staff interviewed and/or observed 9  
No. of residents interviewed and/or observed 37  
No. of others interviewed 2 Role Residents' family members

- 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. No funds held for residents.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain. Interviewed staff on the policies and procedure.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: 1/27/2022 N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: 2/10/2020 1922(1), 1923(1), 1932(3), 1932(2), 1979, 1981, 1953, 1952(4), 1954, 1981, 1931(6), 1964(9), 1976(8)
- Number of excluded employees followed up? 2 N/A

**III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

This facility was found to be in non-compliance with the following rules:	
<b>R 325.1964</b>	<b>Interiors.</b>
	<b>(9) Ventilation shall be provided throughout the facility in the following manner:</b>  <b>(b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.</b>
	A sample test of exhaust vents revealed the vents in the public toilet rooms, janitor closet and soiled linen room located in the assisted living unit, was not functioning.
<b>R 325.1981</b>	<b>Disaster plans.</b>
	<b>3) Personnel shall be trained to perform assigned tasks in accordance with the disaster plan.</b>
	During the onsite, staff was interviewed on the disaster plan. Two of the staff did not know the procedure of getting residents to safety if there was a fire in the facility.

**IV. RECOMMENDATION**

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

*Brandon D. Howard*

4/5/2022

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Licensing Consultant

\_\_\_\_\_  
Date