



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 3, 2022

Heather Watt
Westgate Living Center
1500 N Lowell St.
Ironwood, MI 49938

RE: License #: AH270236923
Westgate Living Center
1500 N Lowell St.
Ironwood, MI 49938

Dear Ms. Watt:

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 home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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) 241-1970.

Sincerely,

Jessica Rogers, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 285-7433
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH270236923
Licensee Name:	C.C.G. Ironwood, Inc.
Licensee Address:	Suite 600 5000 Hakes Dr Norton Shores, MI 49441
Licensee Telephone #:	(614) 416-0600
Authorized Representative/ Administrator:	Heather Watt
Name of Facility:	Westgate Living Center
Facility Address:	1500 N Lowell St. Ironwood, MI 49938
Facility Telephone #:	(906) 932-3867
Original Issuance Date:	05/01/1999
Capacity:	34
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/29/2022

Date of Bureau of Fire Services Inspection if applicable: 04/06/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 09/29/2022

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 8
No. of others interviewed 0 Role No visitors at the time of inspection

- 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. Facility maintained a surety bond, however there were no HFA residents' funds held at the time of inspection.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews fire drills. Disaster plan reviewed. Staff interviewed regarding disaster plan.
- 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

This facility was found to be in non-compliance with the following rules:

R 325.1922 Admission and retention of residents.

(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.

Resident A's service plan was dated 4/10/2021.

VIOLATION ESTABLISHED

R 325.1954 Meal and food records.

The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.

Interview with the kitchen director revealed the facility did not maintain a meal census.

VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



10/03/2022

Date

Licensing Consultant