



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 27, 2023

Angela Tuck  
Tucks Health Services LLC  
7236 Pawnee Trail  
Rogers City, MI 49779

RE: License #: AL710406406  
Investigation #: 2023A0360018  
Golden Beach Manor

Dear Ms. Tuck:

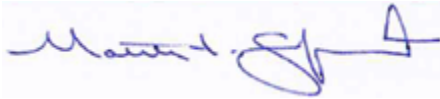
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 contact the local office at (866) 865-0006.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matthew Soderquist", with a stylized flourish at the end.

Matthew Soderquist, Licensing Consultant  
Bureau of Community and Health Systems  
Ste 3  
931 S Otsego Ave  
Gaylord, MI 49735  
(989) 370-8320

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
SPECIAL INVESTIGATION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL710406406
<b>Investigation #:</b>	2023A0360018
<b>Complaint Receipt Date:</b>	01/30/2023
<b>Investigation Initiation Date:</b>	01/30/2023
<b>Report Due Date:</b>	03/01/2023
<b>Licensee Name:</b>	Tucks Health Services LLC
<b>Licensee Address:</b>	18955 Us 23 N Millersburg, MI 49759
<b>Licensee Telephone #:</b>	(989) 351-8091
<b>Administrator:</b>	Angela Tuck
<b>Licensee Designee:</b>	Angela Tuck
<b>Name of Facility:</b>	Golden Beach Manor
<b>Facility Address:</b>	18955 Us 23 N Millersburg, MI 49759
<b>Facility Telephone #:</b>	(989) 351-8091
<b>Original Issuance Date:</b>	03/01/2022
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	09/01/2022
<b>Expiration Date:</b>	08/31/2024
<b>Capacity:</b>	20
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL, AGED, ALZHEIMERS

## II. ALLEGATION(S)

	Violation Established?
The facility does not have enough food and staff are bringing in food to feed residents.	No
Resident A cut his scrotum on a toilet seat.	Yes
The sinks and toilets in resident bathrooms are not working.	Yes
Additional Findings	Yes

## III. METHODOLOGY

01/30/2023	Special Investigation Intake 2023A0360018
01/30/2023	Special Investigation Initiated - Telephone Relative 1-A
01/31/2023	Inspection Completed On-site DCS Mandy Smith, Brittany Habecker, Residents A, B, C.
01/31/2023	Contact - Telephone call received Licensee Angie Tuck
02/01/2023	Contact - Telephone call received Licensee Angie Tuck
02/22/2023	Inspection Completed On-site DCS Carrie Sherman
02/27/2023	Exit Conference With licensee designee Angie Tuck

**ALLEGATION:** The facility does not have enough food and staff are bringing in food to feed residents.

**INVESTIGATION:** On 1/30/2023 I was assigned a complaint from the LARA online complaint system.

On 1/30/2023 I contacted Relative 1-A. Relative 1-A stated there is limited food in the facility and there are staff who are bringing in food on their own.

On 1/31/2023 I conducted an unannounced onsite inspection at the facility. I conducted the inspection during the lunch meal and the facility was serving lasagna and the option for a vegetable lasagna. Direct care staff Mandy Smith stated they

receive food deliveries every two weeks on Thursdays from Sysco. Ms. Smith stated they have not been using menus and prepare food based on what was ordered through the groceries. I observed plenty of fresh food including dozens of eggs, milk, carrots, lemons, apples, butter and other fruits and vegetables. I also observed two freezers full of frozen food including breads, pork, chicken, beef, and French toast. I then observed the dry food storage which included many pastas, rice, cakes, oatmeal's and cereals. Ms. Smith stated sometimes the staff make a grocery run for a specific food item they run out of like milk, but most of the food is ordered through Sysco. She denied that the facility runs out of food. She stated the facility provides three meals a day in addition to making snacks available to residents. I then interviewed direct care staff Brittany Habecker. Ms. Habecker stated the facility has plenty of food and they provide three meals a day in addition to snacks as needed. Ms. Habecker provided me a copy of the most recent Sysco food order which was delivered on 1/19/2023 for a total of \$939. She stated the next order was due to be delivered this Thursday.

While at the facility on 1/31/2023 I interviewed Resident A. Resident A stated he had vegetable lasagna for lunch. He stated there is not a lot of variety at the facility and they make a lot of pork which he does not eat. He stated he is a vegetarian. He stated they do serve three meals a day, but it is a lot of pastas and rice. He stated they do offer him alternatives to the meals being served. He stated he eats a lot of eggs and cereals for breakfasts. I then interviewed Resident B. Resident B stated the food is good and they serve three meals a day and have big portions. He stated they do repeat meals a lot, but they eat chicken, pork, and beef meals for dinner. He stated they have lots of eggs and cereals for breakfasts. He stated they have a lot of soups and sandwiches for lunches. I then interviewed Resident C. Resident C stated they have good food and get plenty. He stated they have three meals a day and have a wide variety of food.

While at the facility on 1/31/2023 I received a call from the licensee designee Angie Tuck. Ms. Tuck stated she has a Sysco food order every other Thursday and supplements as needed. She stated they bake all their own bread and provide three meals a day in addition to snacks available to residents. She denied that staff have had to buy food on their own. She stated if they do get low on a specific item, they may pick something up, but they are not buying food on their own because there is no food in the facility.

On 2/22/2023 I conducted another unannounced onsite inspection at the facility. The lunch meal was just finishing when I arrived and included spaghetti, salad and bread. Direct care staff Carrie Sherman stated there is plenty of food in the facility. I again went through the fridges, freezers, and dry food storage which had a large variety of meats, fruits, vegetables, soups, and dry foods. Ms. Sherman stated they serve three meals a day in addition they have snacks available to residents as needed.

<b>APPLICABLE RULE</b>	
<b>R 400.15313</b>	<b>Resident nutrition.</b>
	<b>(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.</b>
<b>ANALYSIS:</b>	<p>The complaint alleged the facility does not have enough food and the staff are bringing in food to feed residents.</p> <p>I conducted two unannounced inspections on 1/31/2023 and 2/22/2023 and there was a variety of fresh, frozen and dry foods available.</p> <p>Resident's A, B and C all stated that they receive three meals a day and snacks as needed. Direct care staff Mandy Smith, Brittany Habecker and Carrie Sherman all stated the facility has adequate food and receives regular shipments from Sysco every other week. The licensee designee Angie Tuck stated the facility receives food shipments from Sysco every other Thursday and they supplement as needed.</p> <p>There is not a preponderance of evidence that the facility is not providing three regular, nutritious meals daily.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION: Resident A cut his scrotum on a toilet seat.**

**INVESTIGATION:** On 1/30/2023 I contacted Relative 1-A. Relative 1-A stated his brother sat on a rusty toilet seat rail and it broke cutting his scrotum. He stated this resulted in several stitches to Resident A.

On 1/31/2023 I conducted an unannounced onsite inspection at the facility. Resident A stated he sat on an old toilet seat rail that was mounted to the toilet seat in resident bathroom 1 and it broke and cut his scrotum requiring several stitches. While at the facility I interviewed direct care staff Mandy Smith who confirmed that on 1/27/2023 Resident A had cut his scrotum on a broken toilet seat rail. She stated direct care staff Carrie Sherman was at the facility when this occurred. Ms. Smith stated the toilet seat rail has been replaced with a new one. She stated the old one was worn and rusting. She showed me the old rusty toilet seat rail which was outside, and it was broken and had blood on it. I then interviewed Resident A. Resident A stated he was cut on the toilet seat cover and had to get several stitches on his scrotum.

On 1/31/2023 I received a call from the licensee designee Angie Tuck. Ms. Tuck stated she was not aware of the poor condition of the toilet seat rail and because Resident A is so large when he sat on the toilet the toilet seat rail broke resulting in Resident A getting a cut on his scrotum. She stated she has purchased new toilet seat rails and they will be installed soon.

On 2/22/2023 I conducted another unannounced inspection at the facility. Direct care staff Carrie Sherman stated she was working on the day that Resident A cut his scrotum on the toilet seat rail. She stated new toilet seat safety rails were installed in Resident bathrooms 1, 2, and 3 which I observed.

<b>APPLICABLE RULE</b>	
<b>R 400.15403</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>
<b>ANALYSIS:</b>	<p>The complaint alleged Resident A cut his scrotum on a toilet seat.</p> <p>Resident A cut his scrotum on a rusty toilet seat railing. Resident A required several stitches. Three of the resident bathrooms that had old toilet seat railings have been replaced.</p> <p>There is a preponderance of evidence that the home was not maintained to provide adequately for the health, safety, and well-being of occupants.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ALLEGATION:** The sinks and toilets in resident bathrooms are not working.

**INVESTIGATION:** On 1/30/2023 I contacted Relative 1-A. Relative 1-A stated the bathroom sinks and toilets in resident bathrooms 1, 2 and 3 in the main hallway were not working.

On 1/31/2023 I conducted an unannounced onsite inspection at the facility. Resident bathroom 1 sink and toilet were functioning properly. Resident bathroom 2 toilet did not have a toilet seat and the sink was draining slow and a note hung on the wall stating, "don't use sink it's plugged." Direct care staff Mandy Smith stated she did not see that sign there before and did not know how long the sink has been plugged. Resident bathroom 3 sink was draining very slowly and the tile surrounding the toilet was cracked and broken. I then observed resident bathrooms 4-10 which were all functioning properly.

On 1/31/2023 I was contacted by the licensee designee Angie Tuck. Ms. Tuck stated they have been treating the slow sink drains and will make sure that they are clear. She stated she will be replacing the broken tile in the bathroom soon.

On 2/22/2023 I conducted another unannounced onsite inspection. I observed Resident bathroom 1, 2 and 3 to have working toilets and sinks. The tile had not yet been replaced.

<b>APPLICABLE RULE</b>	
<b>R 400.15403</b>	<b>Maintenance of premises.</b>
	<b>(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.</b>
<b>ANALYSIS:</b>	<p>The complaint alleged resident bathroom sinks and toilets were not working.</p> <p>Resident bathroom 2 did not have a toilet seat and the sink was not draining properly. Resident bathroom 3 sink was not draining well and the tile surrounding the toilet was cracked and broken.</p> <p>There is a preponderance of evidence that the plumbing fixtures were not maintained in good working condition.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### **ADDITIONAL FINDINGS:**

**INVESTIGATION:** On 1/31/2023 I conducted an unannounced onsite inspection at the facility. Direct care staff Mandy Smith stated they do not have menus posted at least one week in advance. I observed a menu calendar on the wall, but it was not filled out.

On 1/31/2023 I received a call from the licensee designee Angie Tuck. Ms. Tuck stated the staff are supposed to be working off a menu and there is a menu book, but they may not have it posted. I informed her that there is no menu posted at the facility. She stated she will make sure that the staff post a menu one week in advance.

On 2/22/2023 I conducted an unannounced onsite inspection at the facility. There were no menus posted.



<b>APPLICABLE RULE</b>	
<b>R 400.15313</b>	<b>Resident nutrition.</b>
	<b>(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.</b>
<b>ANALYSIS:</b>	During two unannounced onsite inspections at the facility there were not menus posted at least one week in advance.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### **ADDITIONAL FINDINGS:**

**INVESTIGATION:** On 1/31/2023 I conducted an unannounced onsite inspection at the facility. Direct care staff Mandy Smith stated they do have menus however they have not been using them lately. She showed me an old menu book that did not have any recent menus since January 2023.

On 1/31/2023 I received a call from the licensee designee Angie Tuck. Ms. Tuck stated the staff are supposed to be working off a menu and there is a menu book. I informed her that there are no menus for the month of January 2023. She stated she will make sure that the staff are using menus.

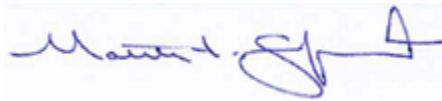
On 2/22/2023 I conducted an unannounced onsite inspection at the facility. Direct care staff Carrie Sherman stated she documents on the menus when she cooks although she stated she did not today because they have had two staff quit recently and they are short staffed. She provided me the menu book and the most recent menus documented were from 2/4/2023 and 2/08/2023.

<b>APPLICABLE RULE</b>	
<b>R 400.15313</b>	<b>Resident nutrition.</b>
	<b>(5) Records of menus, including special diets, as served shall be provided upon request by the department.</b>
<b>ANALYSIS:</b>	There was no record of menus for January 2023 and only two days menus documented for February 2023.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 2/27/2023 I conducted an exit conference with the licensee designee Angie Tuck. Ms. Tuck concurred with the findings and stated she would submit a corrective action plan for approval.

#### **IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license.



02/27/2023

---

Matthew Soderquist  
Licensing Consultant

Date

Approved By:



02/27/2023

---

Jerry Hendrick  
Area Manager

Date