

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

February 27, 2023

Leslie Bancroft Wildwoods Assisted Living LLC 1595 Parmenter Road Corunna, MI 48817

RE: License #: AS780404606

Wildwoods Assisted Living 1595 Parmenter Road Corunna, MI 48817

Dear Ms. Bancroft:

Attached is the Licensing Study Report for the above referenced facility. The study has 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. If I am not available and you need to speak to someone immediately, you may contact the local office at (517) 284-9730.

Sincerely,

Candace Com

Candace Coburn, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #: AS780404606

Licensee Name: Wildwoods Assisted Living LLC

Licensee Address: 1595 Parmenter Road

Corunna, MI 48817

Licensee Telephone #: (989) 743-6163

Licensee/Licensee Designee: Leslie Bancroft

Administrator: Leslie Bancroft

Name of Facility: Wildwoods Assisted Living

Facility Address: 1595 Parmenter Road

Corunna, MI 48817

Facility Telephone #: (989) 743-6163

Original Issuance Date: 09/08/2020

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

AGED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	2/27/20	23
Date	e of Bureau of Fire Services Inspection if appli	cable:	N/A
Date	e of Health Authority Inspection if applicable:	1	11/22/2022
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role:		1 5
•	Medication pass / simulated pass observed?	Yes 🖂	No ☐ If no, explain.
•	Medication(s) and medication record(s) review	wed? Ye	es 🗵 No 🗌 If no, explain.
•	Resident funds and associated documents re Yes ⊠ No ☐ If no, explain. Meal preparation / service observed? Yes ⊠		
•	Fire drills reviewed? Yes ⊠ No ☐ If no, ex	plain.	
•	Fire safety equipment and practices observed	d? Yes[⊠ No If no, explain.
	E-scores reviewed? (Special Certification Onlif no, explain. Water temperatures checked? Yes ⊠ No □		
•	Incident report follow-up? Yes ⊠ No ☐ If r	no, expla	in.
	Corrective action plan compliance verified? \ N/A ⊠ Number of excluded employees followed-up?		CAP date/s and rule/s: N/A ⊠
•	Variances? Yes ☐ (please explain) No ⊠	N/A 🗍	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is not in compliance with the following rules and statutes:

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

At the time of the inspection, the fire drill facility record did not show any required sleeping hour conducted drills.

R 400.14506 Fire extinguishers; location, examination, and maintenance.

(2) Fire extinguishers shall be examined and maintained as recommended by the manufacturer.

At the time of inspection, one out of three required fire extinguishers were not examined or maintained since 2017.

R 400.14316 Resident records.

- (1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:
 - (e) Resident care agreement.

At the time of inspection, three out of three reviewed resident files did not have an updated annual resident care agreement.

Direct care staff and employee records.

R 400.14208

(h) Medical information, as required.

One out of three employee records did not have an updated annual health review.

IV. RECOMMENDATION

Contingent upon receipt of a	n acceptable corrective	e action plan, renewa	I of the license
is recommended.			

Candace Coburn Date Licensing Consultant