



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

January 25, 2023

Robert Ambler  
Mulberry Hill Senior Living LLC  
12553 Cove Hollow Dr.  
Papillion, NE 68046

RE: License #: AS130410907  
**Mulberry Hill Senior Living LLC**  
**17332 11 Mile Rd**  
**Battle Creek, MI 49014**

Dear Mr. Ambler:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- An on-site inspection will be conducted.

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,

*Kevin L. Sellers*

Kevin Sellers, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 230-3704



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

**I. IDENTIFYING INFORMATION**

**License #:** AS130410907

**Licensee Name:** Mulberry Hill Senior Living LLC

**Licensee Address:** 17332 11 Mile Road  
Battle Creek, MI 49014

**Licensee Telephone #:** (269) 966-6843

**Licensee Designee:** Robert Ambler

**Administrator:** Ellen Grove

**Name of Facility:** Mulberry Hill Senior Living LLC

**Facility Address:** 17332 11 Mile Rd  
Battle Creek, MI 49014

**Facility Telephone #:** (269) 719-2855

**Original Issuance Date:** 07/28/2022

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
DEVELOPMENTALLY DISABLED  
ALZHEIMERS  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/24/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: 12/14/2021

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 6

No. of others interviewed 0 Role: N/A

- 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.
- 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:  
CAP 01/24/2023, 301 (10), 510 (2) and 511 (4). 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:

**R 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

**(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.**

During the onsite inspection, an updated health care appraisal for Resident A was not observed or found in the resident's file. In accordance with AFC licensing rules, every resident must have a written health care appraisal completed annually.

**R 400.14510      Heating equipment generally.**

**(2) A furnace, water heater, heating appliances, pipes, wood-burning stoves and furnaces, and other flame-or heat producing equipment shall be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and shall be maintained in a safe condition.**

At the time of the inspection, the clothes dryer was observed having an inaccurate venting system. In accordance with AFC licensing rules, clothes dryers must be properly vented to the outside with metal (no aluminum or vinyl) duct work.

**R 400.14511      Flame-producing equipment; enclosures.**

**(4) Combustible materials shall not be stored in rooms that contain heating equipment, a water heater, an incinerator, or other flame-producing equipment.**

At the time of the inspection, combustible materials were observed lying next to the furnace.

A corrective action plan was requested and approved on 01/25/2023. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

#### IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

*Kevin L Sellers*

01/25/2023

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Kevin Sellers  
Licensing Consultant

Date

Approved:

*Dawn Timm*

01/25/2023

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Dawn Timm  
Area Manager

Date