



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 27, 2023

Kirt Stauffer
Birch Meadows AFC, LLC
710 N. Douglas Avenue
Three Rivers, MI 49093

RE: License #: AL750389345
Birch Meadows AFC, Inc.
710 N. Douglas Avenue
Three Rivers, MI 49093

Dear Mr. Stauffer:

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:

- You are to submit documentation of compliance.

Please provide documentation when the bedroom #20 window is replaced.

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,

A handwritten signature in black ink that reads "Nile Khabeiry, LMSW".

Nile Khabeiry, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #: AL750389345

Licensee Name: Birch Meadows AFC, LLC

Licensee Address: 710 N. Douglas Avenue
Three Rivers, MI 49093

Licensee Telephone #: (269) 528-3000

Licensee/Licensee Designee: Kirt Stauffer

Administrator: Kirt Stauffer

Name of Facility: Birch Meadows AFC, Inc.

Facility Address: 710 N. Douglas Avenue
Three Rivers, MI 49093

Facility Telephone #: (502) 649-1715

Original Issuance Date: 10/22/2018

Capacity: 20

Program Type: AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/21/2023

Date of Bureau of Fire Services Inspection if applicable: 12/28/23

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 19

No. of others interviewed [redacted] Role: [redacted]

- 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. Resident funds not held by the home.
- 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: 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 400.15408 Bedrooms generally.

(7) Bedrooms shall have at least 1 easily openable window.

FINDINGS: Bedroom #20 did not have an easily openable window.

A corrective action plan was requested and approved on 03/21/2023. 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.

Nile Khabeiry, LMSW

3/27/23

Nile Khabeiry
Licensing Consultant

Date