

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

November 20, 2023

Timothy Adams 7280 Belding Rd. NE Rockford, MI 49341

RE: License #:	AM610009232
	Cedar Creek Personal Care Home I
	8840 Cedar Creek Drive
	Holton, MI 49425

Dear Mr. Adams:

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 (616) 356-0100.

Sincerely, Elizabeth Ellicott

Elizabeth Elliott, Licensing Consultant Bureau of Community and Health Systems 350 Ottawa, N.W. Grand Rapids, MI 49503

(616) 901-0585

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

I. IDENTIFYING INFORMATION

License #:	AM610009232
Licensee Name:	Timothy Adams
Licensee Address:	7280 Belding Rd. NE Rockford, MI 49341
Licensee Telephone #:	(616) 459-9331
Licensee/Licensee Designee:	Timothy Adams, LD
Advisor	T. U. A.I. A.I. I. I.
Administrator:	Timothy Adams, Administrator
Name of Facility:	Cedar Creek Personal Care Home I
Facility Address:	8840 Cedar Creek Drive Holton, MI 49425
Facility Telephone #:	(231) 821-0281
Original Issuance Date:	01/07/1991
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	11/09/2	2023
Date	e of Bureau of Fire Services Inspection if appli	icable:	02/22/2023
Date	e of Health Authority Inspection if applicable:	08/09/	2023
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Sheila Page 1	attersor	3 10 n, Manager
•	Medication pass / simulated pass observed? At the time of the inspection, resident medicated review of the resident MARs and medication Medication(s) and medication record(s) review	itions w was coi	ere not being passed so a nducted.
•	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 On If no, explain. Water temperatures checked? Yes ⊠ No □		
•	Incident report follow-up? Yes ⊠ No ☐ If r	no, expl	ain.
•	Corrective action plan compliance verified? \\306.2, 306.3, 401.2, 403.1 N/A \Boxed{\Boxed} Number of excluded employees followed-up?		CAP date/s and rule/s:
	Variances? Ves (nlease explain) No	Ν/Δ 🔯	1

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:		
R 400.14403	Maintenance of premises.	
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and wellbeing of occupants.	

Finding:

- The kitchen drawers do not have bottoms in them.
- Smoke detectors in the facility were chirping.
- Room #8 had a large hole in the wall behind the door.
- Room #5 had a large hole near the door, a hole in the closet door and a broken window.
- Room #4 had exposed dry wall tape on the ceiling as though the ceiling was fixed but possibly not all the way completed.
- Blinds are broken in resident bathroom #2 (the bathroom in the resident bedroom hallway) and resident bathroom #2, the flooring, walls and vanity are worn.
- The ceiling above the fireplace has a hole where the plaster/drywall has come off.
- A vent next to the fireplace is missing.
- The carpet in the living room is worn.
- There is a window missing in the living room.
- The light in the foyer is missing and duct tape is covering the electrical opening.

Licensee Response: Mr. Adams stated he will have his maintenance person out to the facility to address the findings in this renewal inspection.

R 400.14407	Bathrooms.
	(1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.

Finding: The resident bathroom #1 off the kitchen area does not have a window that opens and there is not forced ventilation to the outside from the bathroom.

Licensee Response: Mr. Adams acknowledged that when they remodeled the bathroom, the window that did open was replaced by glass blocks and a fan was not put in the bathroom. Mr. Adams stated he will add a fan to the bathroom for ventilation.

R 400.14407	Bathrooms.
	(2) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

Finding: The door on resident bathroom #1, off the kitchen area, does not close easily or latch when closed.

Licensee Response: Mr. Adams stated he will have the bathroom door fixed so it closes and latches easily.

IV. RECOMMENDATION

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

11/20/2023

Elizabeth Elliott

Date

Licensing Consultant

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