



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

November 30, 2023

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

RE: License #: AL710406406
Investigation #: 2024A0360001
Golden Beach Manor

Dear Ms. Tuck:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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".

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

License #:	AL710406406
Investigation #:	2024A0360001
Complaint Receipt Date:	10/03/2023
Investigation Initiation Date:	10/04/2023
Report Due Date:	12/02/2023
Licensee Name:	Tucks Health Services LLC
Licensee Address:	18955 Us 23 N Millersburg, MI 49759
Licensee Telephone #:	(989) 351-8091
Administrator:	Angela Tuck
Licensee Designee:	Angela Tuck
Name of Facility:	Golden Beach Manor
Facility Address:	18955 Us 23 N Millersburg, MI 49759
Facility Telephone #:	(989) 351-8091
Original Issuance Date:	03/01/2022
License Status:	REGULAR
Effective Date:	09/01/2022
Expiration Date:	08/31/2024
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL, AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
There is a lack of food at the facility.	No
There are mice in the facility.	No
Resident rooms are not being cleaned and smell like feces.	No

III. METHODOLOGY

10/03/2023	Special Investigation Intake 2024A0360001
10/04/2023	Special Investigation Initiated - Letter APS
10/04/2023	APS Referral APS
10/05/2023	Inspection Completed On-site DCS Carrie Sherman, Residents A, B, C, D, E.
10/10/2023	Contact - Document Received APS Sarah Purol
11/21/2023	Inspection Completed On-site DCS Carrie Sherman
11/21/2023	Contact - Telephone call received Licensee Designee Angie Tuck
11/30/2023	Exit Conference With licensee designee Angie Tuck

ALLEGATION: There is a lack of food at the facility.

INVESTIGATION: On 10/03/2023 I was assigned a complaint from the LARA online complaint system.

On 10/05/2023 I conducted an unannounced onsite inspection at the facility. Direct care staff Carrie Sherman stated they have plenty of food in the facility. Ms. Sherman showed me the refrigerators, freezers, and dry food storage. There was plenty of food in the facility including several gallons of milk, fresh fruit, bread, pastas, butter, dozens of eggs, coffee, juices, cereals, and a variety of canned

vegetables. The facility was just finishing their lunch meal which was consistent with the menu posted for beef stroganoff, Jello, and fresh baked bread.

While at the facility on 10/05/2023 I interviewed Residents A, B, C, D and E. They all stated they received three meals during the day. They all stated they get plenty of food. They all stated if they want seconds, they receive additional food. Resident E stated she has never experienced a lack of food. She stated the staff substitute meals if a resident does not like what is being served.

On 10/10/2023 I contacted Sarah Purol from Adult Protective Services (APS). She stated she has been to the facility and was not substantiating her APS complaint.

On 11/21/2023 I conducted another unannounced onsite inspection at the facility. I again found the facility to have plenty of food.

On 11/21/2023 I received a call from the licensee designee Angie Tuck. Ms. Tuck stated they shop for groceries weekly for the facility and there is always plenty of food available and served to the residents.

APPLICABLE RULE	
R 400.15313	Resident nutrition.
	(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.
ANALYSIS:	<p>The complaint alleged the facility has a lack of food.</p> <p>I conducted two unannounced onsite inspections at the facility on 10/05/2023 and 11/21/2023. During both inspections I found there to be plenty of food.</p> <p>Residents A, B, C, D and E each stated they receive plenty of food in the facility.</p> <p>The direct care staff Carrie Sherman stated they have plenty of food in the facility.</p> <p>APS worker Sarah Purol stated she was not substantiating her APS investigation.</p> <p>The licensee designee Angie Tuck stated she shops regularly for the facility and there is always plenty of food available.</p> <p>There is not a preponderance of evidence that a minimum of 3 regular nutritious meals are served daily.</p>

CONCLUSION:	VIOLATION NOT ESTABLISHED
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ALLEGATION: There are mice in the facility.

INVESTIGATION: On 10/05/2023 I conducted an inspection of the facility. Direct care staff Carrie Sherman stated she has found no evidence of mice in the facility. She stated the facility has Orkin come monthly. I then inspected all the food cabinets and kitchen area. I found no evidence of any mice. I then inspected bedrooms 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13 and 14. I found no evidence of any mice in the facility.

While at the facility on 10/05/2023 I interviewed Resident's A, B, C, D and E. Each resident denied that they have seen any evidence of mice in the facility.

On 11/21/2023 I conducted another unannounced onsite inspection at the facility. I again inspected the kitchen and food storage areas and found no evidence of any mice.

APPLICABLE RULE	
R 400.15401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.
ANALYSIS:	<p>The complaint alleged there are mice in the facility.</p> <p>I conducted two unannounced onsite inspections on 10/05/2023 and 11/21/2023 and found no evidence of any mice.</p> <p>Direct care staff Carrie Sherman stated she has not seen any mice in the facility.</p> <p>Residents A, B, C, D and E each denied seeing any evidence of mice in the facility.</p> <p>There is not a preponderance of evidence that the facility does not have a pest control program that continually protects the health of the residents.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Resident rooms are not being cleaned and smell like feces.

INVESTIGATION: On 10/05/2023 I conducted an unannounced onsite inspection at

the facility. Direct care staff Carrie Sherman stated the facility is continuously being cleaned and any messes are picked up immediately. I then inspected bedrooms 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13 and 14. I also observed both living room areas, and all the facility furniture. There was no smell of feces, and the bedrooms were all clean. Most of the living room furniture had covers on them but none had any odor.

While at the home on 10/05/2023 I interviewed Residents A, B, C, D and E. Each of the residents stated the facility and bedrooms are always kept clean.

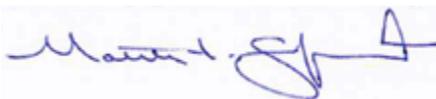
On 11/21/2023 I conducted another unannounced onsite inspection at the facility. I observed bedrooms 1, 2, 3, 4, 5, 6 and 7 and all the rooms were clean and in good condition. I did not smell any odor of feces in the facility.

APPLICABLE RULE	
R 400.15403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	<p>The complaint alleged resident rooms are not being cleaned and smell like feces.</p> <p>I conducted two unannounced onsite inspections on 10/05/2023 and 11/21/2023. During both inspections the resident bedrooms appeared clean and did not have any odor of feces.</p> <p>There is not a preponderance of evidence that the home is not maintained for the health, safety, and well-being of occupants.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 11/30/2023 I conducted an exit conference with licensee designee Angie Tuck. Ms. Tuck concurred with the findings of the investigation.

IV. RECOMMENDATION

I recommend no change in the status of the license.



11/30/2023

Matthew Soderquist
Licensing Consultant

Date

Approved By:



11/30/2023

Jerry Hendrick
Area Manager

Date