



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 22, 2024

Susan Turner
Copper Country Community Mental Health Svcs Bd
901 W Memorial Drive
Houghton, MI 49931

RE: License #: AM310008381
Portage House
1400 Ravine Side Dr
Houghton, MI 49931

Dear Ms. Turner:

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 and special certification will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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) 643-7960.

Sincerely,

A handwritten signature in grey ink, appearing to be 'G. Peters', with a large loop and a horizontal stroke extending to the right.

Garrett Peters, Licensing Consultant
Bureau of Community and Health Systems
234 W. Baraga Ave.
Marquette, MI 49855
(906) 250-9318

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

I. IDENTIFYING INFORMATION

License #:	AM310008381
Licensee Name:	Copper Country Community Mental Health Srvs Bd
Licensee Address:	901 W Memorial Drive Houghton, MI 49931
Licensee Telephone #:	(906) 482-9400
Licensee Designee:	Susan Turner
Administrator:	Susan Turner
Name of Facility:	Portage House
Facility Address:	1400 Ravine Side Dr Houghton, MI 49931
Facility Telephone #:	(906) 487-1746
Original Issuance Date:	09/01/1983
Capacity:	8
Program Type:	DEVELOPMENTALLY DISABLED
Certified Programs:	DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 3/15/2024

Date of Bureau of Fire Services Inspection if applicable: 8/3/24

Date of Environmental/Health Inspection if applicable:

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 2

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.
- Meal preparation / service observed? Yes No If no, explain.
I was not there during meal time.
- 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 400.14316

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:

(g) Weight record.

During my inspection I noticed resident weight records were not being kept up to date. Per AFC policy, a resident's weight must be recorded monthly.

IV. RECOMMENDATION

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



3/22/24

Garrett Peters
Licensing Consultant

Date