



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

August 23, 2024

Katie Edwards  
Symphony of Linden Health Care Center, LLC  
30150 Telegraph Rd  
Suite 167  
Bingham Farms, MI 48025

RE: License #:	AL250331295 <b>Homer House Inn</b> <b>202 S Bridge Street</b> <b>Linden, MI 48451</b>
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Dear Katie Edwards:

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. 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 black ink that reads "Susan Hutchinson". The signature is written in a cursive, flowing style.

Susan Hutchinson, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(989) 293-5222

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL250331295
<b>Licensee Name:</b>	Symphony of Linden Health Care Center, LLC
<b>Licensee Address:</b>	7257 N. Lincoln Lincolnwood, IL 60712
<b>Licensee Telephone #:</b>	(810) 735-9400
<b>Licensee/Licensee Designee:</b>	Katie Edwards
<b>Administrator:</b>	Katie Edwards
<b>Name of Facility:</b>	Homer House Inn
<b>Facility Address:</b>	202 S Bridge Street Linden, MI 48451
<b>Facility Telephone #:</b>	(810) 735-9400
<b>Original Issuance Date:</b>	05/01/2014
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/22/2024

Date of Bureau of Fire Services Inspection if applicable: 12/05/2023

Date of Health Authority Inspection if applicable: 08/22/2024

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 5

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:  
02/05/24: R 400.15312(2), 12/05/23: R 400.15206(2), R 400.15312(2), 01/03/23:  
R 400.15312(2), R 400.15314(1), R 400.15403(2), 12/09/22: R 400.15305(3),  
R 400.15304(1)(o), 08/23/22: R 400.15312(2), 09/14/22: R 400.15301(6)(10),  
R 400.15310(3), R 400.15403(6) 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:	
<b>R 400.15204</b>	<b>Direct care staff; qualifications and training.</b>
	<p><b>(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:</b></p> <ul style="list-style-type: none"> <li><b>(a) Reporting requirements.</b></li> <li><b>(b) First aid.</b></li> <li><b>(c) Cardiopulmonary resuscitation.</b></li> <li><b>(d) Personal care, supervision, and protection.</b></li> <li><b>(e) Resident rights.</b></li> <li><b>(f) Safety and fire prevention.</b></li> <li><b>(g) Prevention and containment of communicable diseases.</b></li> </ul>
At the time of my inspection, I noted that one staff's CPR and First Aid certificate expired in March 2024. The licensee designee said that this staff person is scheduled for the next CPR and First Aid class.	

**IV. RECOMMENDATION**

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

*Susan Hutchinson*

August 23, 2024

Susan Hutchinson Licensing Consultant	Date
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