



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 7, 2025

Chris Milowe
Brookdale Senior Living Communities, Inc.
105 Westwood Place
Brentwood, TN 37027

RE: License #: AL230079864
Brookdale Delta AL
7323 Delta Commerce
Lansing, MI 48917

Dear Chris Milowe:

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.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Ondrea Johnson".

Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems

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

I. IDENTIFYING INFORMATION

License #:	AL230079864
Licensee Name:	Brookdale Senior Living Communities, Inc.
Licensee Address:	105 Westwood Place Brentwood, TN 37027
Licensee Telephone #:	(615) 221-2250
Licensee Designee:	Chris Milowe
Administrator:	Sarah LeBarre
Name of Facility:	Brookdale Delta AL
Facility Address:	7323 Delta Commerce Lansing, MI 48917
Facility Telephone #:	(517) 327-5566
Original Issuance Date:	03/17/1998
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/11/2025

Date of Bureau of Fire Services Inspection if applicable: 5//12/2025

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 4
No. of residents interviewed and/or observed 10
No. of others interviewed 0 Role: 0

- 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:
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 400.15201 **Qualifications of administrator, direct care staff, licensee, and members of household; provision of names of employee, volunteer, or member of household on parole or probation or convicted of felony; food service staff.**

(3) Before a temporary license is issued, an applicant and an administrator shall be competent in all of the following areas:

- (a) Nutrition.**
- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**
- (e) Safety and fire prevention.**

FINDINGS: Licensee designee unable to verify training in CPR, first aid, and nutrition upon request. The administrator is unable to verify training in safety and fire prevention and nutrition.

R 400.15204 **Direct care staff; qualifications and training.**

(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) First aid.**
- (c) Cardiopulmonary resuscitation.**

FINDINGS: Employee Adrienne Holmes does not have CPR and first aid training for the department to review.

R 400.15205 **Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

FINDINGS: Employee Chad Fender does not have a current physical on file for the department to review.

R 400.15205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

FINDINGS: Employee Chad Fender does not have current TB test results on file for the department to review.

R 400.15207 Required personnel policies.

(1) A licensee shall have written policies and procedures that include all of the following:

- (a) Mandatory reporting, including reporting that is required by law.
- (b) Resident care related prohibited practices.
- (c) Confidentiality requirements, including requirements specified in law.
- (d) Training requirements.
- (e) Resident rights.
- (f) The process for reviewing the licensing statute and administrative rules.

(2) The written policies and procedures identified in subrule (1) of this rule shall be given to employees and volunteers at the time of appointment. A verification of receipt of the policies and procedures shall be maintained in the personnel records.

(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record.

FINDINGS: Licensee unable to show written employee policies and job descriptions and verification of receipt of the policies and job descriptions given to employees.

R 400.15208

Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(f) Verification of reference checks.

FINDINGS: No reference checks for employee Chris Fender for the department to review.

R 400.15210

Resident register.

A licensee shall maintain a chronological register of residents who

are admitted to the home. The register shall include all of the following information for each resident:

(a) Date of admission.

(b) Date of discharge.

(c) Place and address to which the resident moved, if known.

FINDINGS: No resident register on file for the department to review.

R 400.15301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's

admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days

after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

FINDINGS: Signature of licensee missing for resident assessment plans and AFC care agreements to verify plans were reviewed between the licensee designee and resident. Resident A does not have a current health care appraisal for the department to review.

R 400.15312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

FINDINGS: Resident A missing Acetaminophen Oral tablet 325 mg, Loperamide HCl Oral tablet 2 mg, and both medications are not stored in the facility.

R 400.15315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

FINDINGS: No Funds I and II forms for any resident maintained in resident files.

R 400.15401 Environmental health.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

FINDINGS: Water at kitchen faucet exceeds 120 degrees Fahrenheit.

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.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

FINDINGS: Combustible items are stored in both furnace rooms and feces covered on toilet in resident bedroom #4 private bedroom.

R 400.15408 Bedrooms generally.

(6) For 2 adjoining rooms to be considered as 1 bedroom, there shall be a 7-foot horizontal opening between the rooms.

FINDINGS: Bedrooms #6 and #7 combined together as 1 bedroom without a 7-foot horizontal opening between the rooms.

A corrective action plan was requested and approved on 07/07/2025. 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.



7/7/2025
Date

Licensing Consultant