



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

August 15, 2025

Michael Craft  
Craft Care Homes Inc.  
1800 N. Cedar  
Holt, MI 48842

RE: License #: AM330288742  
**Craft Care Home**  
**588 S. Edgar Rd.**  
**Mason, MI 48854**

Dear Mr. Craft:

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 to address Rule 400.14511 (1) by September 2, 2025.
- You are to submit a Statement of Correction to address the remaining rules by September 2, 2025.

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 black ink, appearing to read "Mahtina Rubritius". The signature is written in a cursive style with some loops and flourishes.

Mahtina Rubritius, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa  
P.O. Box 30664  
Lansing, MI 48909  
(517) 262-8604

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

**I. IDENTIFYING INFORMATION**

**License#:** AM330288742

**Licensee Name:** Craft Care Homes Inc.

**Licensee Address:** 1800 N. Cedar  
Holt, MI 48842

**Licensee Telephone #:** (517) 204-0750

**Licensee/Licensee Designee:** Michael Craft

**Administrator:** Sue Craft

**Name of Facility:** Craft Care Home

**Facility Address:** 588 S. Edgar Rd.  
Mason, MI 48854

**Facility Telephone #:** (517) 676-1558

**Original Issuance Date:** 09/12/2008

**Capacity:** 11

**Program Type:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
AGED  
ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/13/2025

Date of Bureau of Fire Services Inspection if applicable: 02/11/2025

Date of Health Authority Inspection if applicable: 04/16/2025

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 6

No. of others interviewed 0 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.
- 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.  
Incident reports are no longer required to be submitted to LARA.
- 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 400.14203 Licensee and administrator training requirements.**

**(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:**

**(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.**

- There were no training records provided to demonstrate that the administrator had completed the 16 hours of training in 2024.

**R 400.14205 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.**

- Employee #1 was hired on March 15, 2024. The health care review for Employee #1 was completed on August 12, 2025; thus, it was not completed within 30-days of hire.

**R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

**(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be**

maintained by the home and shall be available for department review.

- An annual health care review was not completed for Employee #2 in 2024.

**R 400.14312 Resident medications.**

(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:

(b) Complete an individual medication log that contains all of the following information:

(i) The medication.

(ii) The dosage.

(iii) Label instructions for use.

(iv) Time to be administered.

(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

(vi) A resident's refusal to accept prescribed medication or procedures.

- The medication logs for Resident A and Resident B were reviewed. In Resident B's file, the staff did not initial the medication log or document an explanation as to why the medication, (Rosuvastatin 20 mg), was not administered on August 6, 2025, at 8:00 p.m.

**R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

- While the licensee conducted three fire drills during the 3<sup>rd</sup> quarter of 2024, there was no record that a fire drill had been conducted during the daytime hours.

**R 400.14407 Bathrooms.**

(3) 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.

- The front bathroom door was equipped with locking against-egress hardware.

**R 400.14511      Flame-producing equipment; enclosures.**

(1) If the heating plant is located in the basement of a small group home, standard building material may be used for the floor separation. Floor separation shall also include at least 1 3/4-inch solid core wood door or equivalent to create a floor separation between the basement and the first floor.

- The heat plant is located in the basement of the facility, and the fire door is at the stop of the stairway. There was a gap between the fire door and the floor, which interfered with floor separation.

A corrective action plan was requested and approved on 08/13/2025. 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.



08/15/2025

---

Mahtina Rubritius  
Licensing Consultant

Date