



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 9, 2025

Matthew Maletich
Maple Ridge Manor of Manistee
1967 Maple Ridge Dr.
Manistee, MI 49660

RE: License #: AH510404870
Maple Ridge Manor of Manistee
1967 Maple Ridge Dr.
Manistee, MI 49660

Dear Licensee:

Attached is the Licensure Survey 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 home for the aged authorized representative and a date.
-

If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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 feel free to contact the local office at (877) 456-2757.

Sincerely,

Lauren Wohlfert, Licensing Staff
Bureau of Community and Health Systems
350 Ottawa NW Unit 13 7th Floor
Grand Rapids, MI 49503
(616) 260-7781
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH510404870
Licensee Name:	HM Land Holdings of Manistee, LLC
Licensee Address:	8661 Conservation St NE Ada, MI 49301
Licensee Telephone #:	(231) 794-5037
Authorized Representative:	Matthew Maletich
Administrator:	Kim Miller
Name of Facility:	Maple Ridge Manor of Manistee
Facility Address:	1967 Maple Ridge Dr. Manistee, MI 49660
Facility Telephone #:	(231) 794-5037
Original Issuance Date:	07/02/2021
Capacity:	87
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/08/2025

Date of Bureau of Fire Services Inspection if applicable: 12/24/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 12/08/2025

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 25
No. of others interviewed 0 Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. No resident funds held in trust
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Safety (BFS) reviews fire drills, disaster plans were reviewed with staff
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
Special Investigation report (SIR) 2023A1021010 CAP dated 01/05/2023 rule 21333(2), SIR 2024A1028011 CAP dated 01/19/2024 rule 1922(5), SIR 2024A1028025 CAP dated 05/05/2024 rule 1932(3), SIR 2025A1021053 CAP dated 05/27/2025 rule 1931(2)
- Number of excluded employees followed up? 0 N/A

II. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1923	Employee's health.
	<p>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005" (http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.</p>
ANALYSIS:	<p>Inspection of the facility's staff TB records revealed Staff Person 1 (SP1) was not screened for TB within 10 days of her hire and before occupational exposure. The facility also did not complete an annual TB risk assessment to determine the local risk of TB. As a result, the facility was not in compliance with this rule.</p>
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1964	Interiors.
	<p>(9) Ventilation shall be provided throughout the facility in the following manner:</p> <p>(a) A room shall be provided with a type and amount of ventilation that will control odors and contribute to the comfort of occupants.</p> <p>(b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.</p>

ANALYSIS:	Inspection of the ventilation in the facility's laundry rooms, bathing rooms, and the beauty shop revealed there was not a minimum of 10 air exchanges per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms. As a result, the facility was not in compliance with this rule.
CONCLUSION:	VIOLATION ESTABLISHED

III. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



10/31/2025

Licensing Consultant

Date