



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 1, 2025

Mary North
Brookdale Portage MC
3150 Old Centre Avenue
Portage, MI 49002

RE: License #: AH390236936
Brookdale Portage MC
3150 Old Centre Avenue
Portage, MI 49002

Dear Mary North:

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 action plan, a regular license will be issued. 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 I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 335-5985.

Sincerely,

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AH390236936
Licensee Name:	Brookdale Senior Living Communities, Inc.
Licensee Address:	105 Westwood Place Brentwood, TN 37027
Licensee Telephone #:	(615) 221-2250
Authorized Representative:	Mary North
Administrator/Licensee Designee:	Charles Venable
Name of Facility:	Brookdale Portage MC
Facility Address:	3150 Old Centre Avenue Portage, MI 49002
Facility Telephone #:	(269) 324-3141
Original Issuance Date:	10/01/1999
Capacity:	38
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 4/30/2025

Date of Bureau of Fire Services Inspection if applicable: 2024

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 4/30/2025

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 14
No. of others interviewed 0 Role N/A

- 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. The home does not keep resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: 0 N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 0 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1922	Admission and retention of residents.
	(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority.
ANALYSIS:	Review of eight resident records revealed one resident did not have an appropriate TB screening. A chest x-ray was found in the record, but it was for complaints of chest pain. An appropriate or identifying TB screen was not completed for the resident. A resident TB screening must be performed by the local health professional 12 months prior to admission to the facility.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1923	Employee's health.
	(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.
ANALYSIS:	Review of eight employee records revealed one employee TB screening was out of compliance and not completed within 10 days of hire. It was completed 15 days after hire. A TB screen must be completed within 10 days of hire and before occupational exposure.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1975	Laundry and linen requirements.
	(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following: (b) A separate clean linen storage room.
ANALYSIS:	Inspection revealed clean linens were being stored on the floor and with other items such as a shelf, small waste can, and personal clothing/items in the clean linen storage areas. Clean linens are not to be stored with any other items. Clean linens must have a separate storage area/room to prevent risk of cross-contamination.
CONCLUSION:	VIOLATION ESTABLISHED

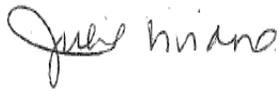
R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	An on-site inspection revealed multiple food items were found unlabeled in the activity's cabinets, and the main kitchen. These items were not labeled with the appropriate open date, and it could not be determined if the food items were safe for human consumption. An open date must be placed on food items served to residents in the facility once opened.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
ANALYSIS:	Inspection revealed hazardous and toxic chemicals were stored in an unlocked bathroom cabinet. The items were easily accessible to anyone in the facility, and this presents a potential

	risk of ingestion, harm, and/or injury to residents in the home with impaired cognition and/or function.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Receipt of an acceptable corrective action plan is requested and due by 5/16/2025.



5/1/2025

Date

Licensing Consultant