



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 13, 2026

Jill Long
2395 Loupin Drive 44 D
Clarksville, TN 37042

RE: License #: AS130397946
Kerak
14077 Stone Jug Rd.
Battle Creek, MI 49015

Dear Mrs. Long:

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 verification of completion of the required corrections below.

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 (616) 356-0100.

Sincerely,

Kevin L. Sellers

Kevin Sellers, Licensing Consultant
Department of Licensing and Regulatory Affairs
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(517) 230-3704
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**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License#: AS130397946

Licensee Name: Jill Long

Licensee Address: 2395 Loupin Drive 44 D
Clarksville, TN 37042

Licensee Telephone #: (269) 565-3109

Licensee Designee: Jill Long

Administrator: Dwayne Long

Name of Facility: Kerak

Facility Address: 14077 Stone Jug Rd.
Battle Creek, MI 49015

Facility Telephone #: (931) 217-7606

Original Issuance Date: 09/23/2019

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
AGED
TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/12/2026

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: 11/19/2025

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: Licensee

- 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:
CAP on 3/12/26 637(4) and 685(10) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in compliance with all applicable rules and statutes.

R 400.637	Handling of resident funds and valuables.
	(4) A licensee shall record in the resident record a resident funds and itemized transactions including payment for services provided for each resident.
	At the time of the onsite inspection, while reviewing resident records. Resident B did not have a copy of Resident Funds Part I and Part II form observed in the record book. In accordance to AFC rules, Resident Funds Part I and Part II forms must be found in each resident records booklet.
R 400.685	Resident admission; resident assessment plan; resident care agreement; health care appraisal.
	(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.
	At the time of the onsite inspection, while reviewing resident records. Residents A, B and C did not have updated Health Care Appraisal (HCA) forms observed in their records booklets. The last HCA forms completed by Residents A, B and C were in 2024. In accordance to AFC rules, Health Care Appraisals for each resident must be updated annually.

IV. RECOMMENDATION

An acceptable corrective action plan was requested and approved on 3/12/26. Verification of completion of the corrective action plan must still occur by submitting documents of the above violations. However, I recommend renewal of a regular 2 year license of this AFC small group home.

Kevin L. Sellers

3/13/26

Kevin Sellers
Licensing Consultant

Date