



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 16, 2026

Betiann Borton
8586 28 Mile Road
Washington, MI 48094

RE: License #: AF500086086
Creekside Home
8586 28 Mile Road
Washington, MI 48094

Dear Ms. Borton:

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 plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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 (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 West Grand Blvd Ste 9-100
Detroit, MI 48202
(248) 285-1703

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

I. IDENTIFYING INFORMATION

License #:	AF500086086
Licensee Name:	Betiann Borton
Licensee Address:	8586 28 Mile Road Washington, MI 48094
Licensee Telephone #:	(586) 243-2669
Licensee/Licensee Designee:	Betiann Borton
Administrator:	N/A
Name of Facility:	Creekside Home
Facility Address:	8586 28 Mile Road Washington, MI 48094
Facility Telephone #:	(586) 786-7247
Original Issuance Date:	07/09/1999
Capacity:	1
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/14/2026

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 1

No. of others interviewed 2 Role: Licensee and household member

- Medication pass / simulated pass observed? Yes No If no, explain.
Reviewed medications with licensee.
- 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.
Inspection did not occur during a meal preparation.
- 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 date 04/22/2024- AF418(4)(a) 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:

<p>R 400.675</p>	<p>Resident medications.</p>
	<p>(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident: (b) Complete an individual medication log that contains all of the following: (v) Initials of the individual who administered the medication at the time given.</p>
<p>Medication log was not initialed by licensee at the time medication was given. During the onsite inspection, I observed that Resident A's medication log was not initialed by licensee for 8:00 pm doses of Metoprolol 25 mg, Sertraline 25 mg and Extra Strength Tylenol on 04/13/2026.</p>	
<p>R 400.685</p>	<p>Resident admission; resident assessment plan; resident care agreement; health care appraisal.</p>
	<p>(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.</p>
<p>Resident A did not have an updated assessment plan in file. Resident A's assessment plan was dated 02/10/2025.</p>	
<p>R 400.685</p>	<p>Resident admission; resident assessment plan; resident care agreement; health care appraisal.</p>
	<p>(9) A licensee shall review the written resident care agreement with the resident, resident's designated representative, or responsible agency at least annually or more often if necessary. Any changes to the resident care agreement must be re-signed by all applicable parties. If the annual review results in no changes to the resident care agreement the resident care agreement does not need to be re-signed but the licensee shall document that all applicable parties were contacted and agreed that no changes were necessary.</p>

Resident A did not have an updated resident care agreement in file. Resident A's resident care agreement was dated 02/12/2025.	
R 400.727	Smoke detection equipment for family home and small group home with 6 or less residents after March 27, 1980.
	(6) For new construction, conversions to an adult foster care facility, and changes of adult foster care licensing type, approved smoke alarms must be installed in accordance with the requirements contained in the national fire protection association entitled NFPA 101, Life Safety Code, 2021 edition, powered from the building's electrical system, and, when activated, initiate an alarm that is audible in all sleeping rooms with the doors closed. Smoke alarms must be installed on all levels, including basements, but excluding crawl spaces and unfinished attics. Additional smoke alarms must be installed in living rooms, dens, dayrooms, and similar spaces. NFPA 101, Life Safety Code, 2021 edition, is adopted by reference in R 400.715(4)(b).
During the onsite inspection, I observed that the home's smoke detectors were not interconnected.	
Wireless systems that are interconnected are allowed per new ruleset.	
R 400.731	Flame-producing equipment; enclosures.
	(4) Combustible materials must not be stored in rooms that contain heating equipment, water heater, incinerator, or other flame-producing equipment.
During the onsite inspection, I observed items including a rug and fencing being stored next to the furnace. Items should be moved away from furnace area.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Kristine Cilluffo

04/16/2026

Kristine Cilluffo
Licensing Consultant

Date