



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 27, 2026

Krystyna Badoni  
Bickford of Canton  
5969 N Canton Center Rd  
Canton, MI 48187

RE: License #: AH820395445  
Bickford of Canton  
5969 N Canton Center Rd  
Canton, MI 48187

Dear Licensee:

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 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 that I am not available and you need to speak to someone immediately, please feel free to contact the local office at 877-458-2757.

Sincerely,

A handwritten signature in cursive script that reads "Jessica Rogers".

Jessica Rogers, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 285-7433

enclosure

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

**I. IDENTIFYING INFORMATION**

|                                   |  |
|-----------------------------------|--|
| <b>License #:</b>                 | AH820395445  |
| <b>Licensee Name:</b>             | Bickford of Canton, LLC                              |
| <b>Licensee Address:</b>          | Suite 301<br>13795 S Mur-Len Rd.<br>Olathe, KS 66062 |
| <b>Licensee Telephone #:</b>      | (913) 782-3200                                       |
| <b>Authorized Representative:</b> | Krystyna Badoni                                      |
| <b>Administrator:</b>             | Jennifer Finley                                      |
| <b>Name of Facility:</b>          | Bickford of Canton                                   |
| <b>Facility Address:</b>          | 5969 N Canton Center Rd<br>Canton, MI 48187          |
| <b>Facility Telephone #:</b>      | (734) 656-5580                                       |
| <b>Original Issuance Date:</b>    | 04/02/2020   |
| <b>Capacity:</b>                  | 78   |
| <b>Program Type:</b>              | AGED<br>ALZHEIMERS                                   |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/20/2026

Date of Bureau of Fire Services Inspection if applicable: 04/08/2026

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 04/20/2026

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 28

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. No resident funds held.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Bureau of Fire Services reviews fire drills. Disaster plan reviewed.
- 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:
- CAP dated 10/31/2023 to Licensing Study Report (LSR) dated 9/20/2023: 333.20201(1), R 325.1913(4), R 325.1932(2), R 325.1931(3), R 325.1943(1)(d), R 325.1953(1), R 325.1970(7), R 325.1976(13), R 325.1976(7), R 325.1954, R 325.1981(1), R 325.1931(6), R 325.1922(7), R 325.1923(2)
- CAP dated 5/11/2023 to SIR 2023A0585014 dated 3/8/2023: R 325.1922(5)
- CAP dated 6/21/2024 to SIR 2024A0784046 dated 5/28/2024: R 325.1921(1)(b), R 325.1922(5)
- CAP dated 10/27/2024 to SIR 2024A1027095 dated 10/14/2024: R 325.1931(2)
- CAP dated 11/26/2024 to Special Investigation Report (SIR) 2024A0585068 dated 11/13/2024: R 325.1924(7)
- CAP dated 3/22/2025 to SIR 2025A0784025 dated 3/14/2025: R 325.1933(1)
- Number of excluded employees followed up? Zero, as verified in the workforce background check account on date of survey. N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

**R 325.1923 Employee's health.**

**(2) A home shall provide initial TB screening at no cost for its employees. New employees shall be screened within 10 days after hire and before occupational exposure. The screening type and frequency of routine TB testing must 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 the 2019 update to these recommendations as described in the 2019 MMWR "Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019" (<http://dx.doi.org/10.15585/mmwr.mm6819a3>.) These guidelines are adopted by reference and available free of charge at the links specified in this subrule. A copy of these guidelines is available for inspection and distribution from the Bureau of Community and Health Services, Department of Licensing and Regulatory Affairs, at 611 West Ottawa Street, P.O. Box 30664, Lansing, Michigan 48909 at a cost of 15 cents per page as of the time of the adoption by reference of these guidelines. A 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.**

Employee #1's personnel file did not contain documentation of a tuberculosis (TB) screening upon hire and prior to occupational exposure. Employee #2, with a hire date of May 6, 2025, had a TB screening completed on January 2, 2024, and read on January 4, 2024, which was not completed at the time of hire.

**REPEAT VIOLATION ESTABLISHED.**

[For reference, see LSR dated 9/20/2023, CAP dated 10/31/2023].

**MCL 333.20173a** Covered facility; employees or applicants for employment; prohibitions; criminal history check; procedure; conditional employment or clinical privileges; knowingly providing false information as misdemeanor; prohibited use or dissemination of criminal history information as misdemeanor; review by licensing or regulatory department; conditions of continued employment; failure to conduct criminal history checks as misdemeanor; storage and retention of fingerprints; notification; electronic web-based system; definitions.

**(1) Except as otherwise provided in subsection (2), a covered facility shall not employ, independently contract with, or grant clinical privileges to an individual who regularly has direct access to or provides direct services to patients or residents in the covered facility if the individual satisfies 1 or more of the following:**

Employee #3 did not have documentation of a valid workforce background check.

**VIOLATION ESTABLISHED.**

**R 325.1953** Menus.

**(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.**

The therapeutic and special diet menu posted in the facility reflected weekly menus; however, the menus were outdated and labeled for the week of March 27, 2026.

**REPEAT VIOLATION ESTABLISHED.**

[For reference, see LSR dated 9/20/2023, CAP dated 10/31/2023].

**R 325.1976** Kitchen and dietary.

**(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and**

**sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.**

There was no chemical sanitization logs maintained for March and April 2026.

**REPEAT VIOLATION ESTABLISHED.**

**[For reference, see LSR dated 9/20/2023, CAP dated 10/31/2023].**

**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.**

Food items, including meat, mushrooms, grapes, and cheese, were observed stored in the refrigerator uncovered or improperly wrapped. Additionally, Oreo cookies were found open in the dry storage area.

**VIOLATION ESTABLISHED.**

**R 325.1976            Kitchen and dietary.**

**(7) Perishable foods shall be stored at temperatures which will protect against spoilage.**

**(8) A reliable thermometer shall be provided for each refrigerator and freezer.**

Observations of resident refrigerator and freezer thermometers showed inconsistent temperature readings ranging from 20°F to 60°F. The accuracy of these readings could not be verified due to the absence of temperature logs.

Additionally, kitchen refrigerator and freezer temperature logs were not maintained for March and April 2026.

**VIOLATION ESTABLISHED.**

**[For reference, see LSR dated 9/20/2023, CAP dated 10/31/2023].**

**R 325.1979            General maintenance and storage.**

**(2) Hazardous and toxic materials shall be stored in a safe manner.**

Cleaning chemicals and sprays were observed in unlocked kitchen cupboards within the memory care unit, creating a potential safety risk. These items were removed at the time of inspection.

**VIOLATION ESTABLISHED.**

**IV. RECOMMENDATION**

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



04/27/2026

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Date

Licensing Consultant