



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 13, 2026

Janice Hurst  
Progressive Residential Services Inc  
Suite # 265  
6001 N. Adams Road  
Bloomfield Hills, MI 48304

RE: License #: AS580015119  
**Borg**  
**1279 Borg**  
**Temperance, MI 48182**

Dear Mrs. Hurst:

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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink that reads "Pandora Robinson". The signature is written in a cursive, flowing style.

Pandrea Robinson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 319-9682

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

**I. IDENTIFYING INFORMATION**

**License #:** AS580015119

**Licensee Name:** Progressive Residential Services Inc

**Licensee Address:** Suite # 265  
6001 N. Adams Road  
Bloomfield Hills, MI 48304

**Licensee Telephone #:** (248) 641-7200

**Licensee/Licensee Designee:** Janice Hurst

**Administrator:** Janice Hurst

**Name of Facility:** Borg

**Facility Address:** 1279 Borg  
Temperance, MI 48182

**Facility Telephone #:** (734) 224-0091

**Original Issuance Date:** 05/18/1993

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/09/2026

Date of Bureau of Fire Services Inspection if applicable:

Date of Environmental/Health Inspection if applicable: 04/09/2026

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 4

No. of others interviewed [redacted] Role: [redacted]

- 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 dated 05/06/24 Rules 803(6), 301 (10), 301 (4), 301(9), 315 (3), 316(1), 310(3), 403 (5). N/A
- Number of excluded employees followed-up? 1 N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in substantial compliance with rules and requirements.

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

**R 400.619                      Emergency preparedness plan.**

**(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.**

At the time of inspection, fire drills were not conducted during the 3:00 p.m. to 11:00 p.m. and 11:00 p.m. to 7:00 a.m. shift during the 3<sup>rd</sup> and 4<sup>th</sup> quarter of 2024. Additionally, a fire drill was not conducted during the 7:00 a.m. to 3:00 p.m. shift in the 4<sup>th</sup> quarter of 2024.

**R 400.629                      Direct care staff; qualifications and training.**

**(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:**

**(h) Food safety, which includes food storage, preparation, distribution, and serving in a safe manner.**

At the time of inspection, staff, Candice Webster, had not been trained in food safety, which includes food storage, preparation, distribution, and serving in a safe manner. Ms. Webster start date was 01/13/26.

**R 400.629                      Direct care staff; qualifications and training.**

**(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:**

**(i) Nutrition and special diets.**

At the time of inspection, staff, Candice Webster, had not been trained in nutrition and special diets. Ms. Webster start date was 01/13/26.

**R 400.631                    Health screenings.**

(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.

At the time of inspection, staff Andy Diltz, did not have a physical completed within 30 days of his start date. Mr. Diltz start date was 07/15/24.

**R 400.639                    Staff records.**

(1) A licensee shall maintain a record for each staff that contains all of the following:  
(e) Verification of experience, highest level of education completed, and training.

At the time of inspection, staff, Candice Webster's, employee record did not contain verification of her highest level of education.

**R 400.661                    Bedroom furnishings.**

(4) Resident bedrooms must have lighting for reading and other activities, equipped with an accessible mirror appropriate for grooming, and provisions to allow a resident to mount pictures or decorative items on walls.

At the time of inspection, all of the resident's bedrooms were not equipped with a mirror appropriate for grooming.

**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 inspection, Resident A did not have an annual health care appraisal completed for 2025.

**R 400.707                      Staff training.**

(1) Staff who work with residents shall have successfully completed training that provides basic concepts required in providing specialized dependent care before working independently. Staff shall show the ability to comprehend and be competent to deliver each resident's individual plan of service as written. Training must include all of the following before working independently:

(c) An introduction to the special needs of residents that have developmental disabilities or have been diagnosed as having a mental illness and is specific to the needs of residents to be served by the facility.

At the time of inspection, staff, Candice Webster and Andy Diltz employee records did not contain verification that they had completed training specific to special needs of residents who have been diagnosed with a developmental disability or mental illness.

**IV. RECOMMENDATION**

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



Pandrea Robinson  
Licensing Consultant

04/13/26  
Date