



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

August 11, 2020

Renaë Kiehler  
Innovative Housing Dev Corp  
3051 Commerce Drive, Suite 5  
Fort Gratiot, MI 48059

RE: License #: AM740255580  
**Abbotsford**  
**830 Johnstone Street**  
**Port Huron, MI 48060**

Dear Mr. Kiehler:

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) 975-5053.

Sincerely,

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

Kristine Cilluffo, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(248) 285-1703

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM740255580
<b>Licensee Name:</b>	Innovative Housing Dev Corp
<b>Licensee Address:</b>	Suite 5 3051 Commerce Drive Fort Gratiot, MI 48059
<b>Licensee Telephone #:</b>	(810) 385-4463
<b>Licensee/Licensee Designee:</b>	Renae Kiehler
<b>Administrator:</b>	Melinda Wiegand
<b>Name of Facility:</b>	Abbottsford
<b>Facility Address:</b>	830 Johnstone Street Port Huron, MI 48060
<b>Facility Telephone #:</b>	(810) 966-9159
<b>Original Issuance Date:</b>	09/04/2003
<b>Capacity:</b>	8
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 08/11/2020

Date of Bureau of Fire Services Inspection if applicable: Pending

Date of Health Authority Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 6

No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes  No  If no, explain. Completed worksheet renewal inspection.
- 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. Licensee measured water temperature during virtual inspection.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: CAP date 06/07/2018- AS301(9), AS306(3) 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:

<b>R 400.14310</b>	<b>Resident health care.</b>
	<b>(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.</b>
Resident A's weight was not recorded for September 2018, October 2018 and January 2019.	
<b>R 400.14318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	<b>(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.</b>
A sleep time fire drill was not completed for the 4 <sup>th</sup> quarter of 2018.	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	<b>(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.</b>
During the onsite inspection, I observed small cracks in tile in shower bathroom.	

### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and approved Bureau of Fire Services inspection, renewal of the license is recommended.

*Kristine Cilluffo*

08/11/2020

Kristine Cilluffo  
Licensing Consultant

Date