



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 29, 2021

Nozmi Elder  
Cedar Woods Assisted Living  
44401 I-94 S Service Dr  
Belleville, MI 48111

RE: License #: AH820304947  
Cedar Woods Assisted Living  
44401 I-94 S Service Dr  
Belleville, MI 48111

Dear Mr. Elder:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed. It is valid only at your present address and is nontransferable.

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 (517) 284-9730.

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  
enclosure

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

**I. IDENTIFYING INFORMATION**

|   |   |
|---|---|
| <b>License #:</b>                       | AH820304947                                       |
| <b>Licensee Name:</b>                   | Willow Commons, LLC                               |
| <b>Licensee Address:</b>                | 44401 I-94 S. Service Dr.<br>Belleville, MI 48111 |
| <b>Licensee Telephone #:</b>            | (734) 699-2900                                    |
| <b>Authorized Representative:</b>       | Nozmi Elder                                       |
| <b>Administrator/Licensee Designee:</b> | Robin Wojtowicz                                   |
| <b>Name of Facility:</b>                | Cedar Woods Assisted Living                       |
| <b>Facility Address:</b>                | 44401 I-94 S Service Dr<br>Belleville, MI 48111   |
| <b>Facility Telephone #:</b>            | (734) 699-2900                                    |
| <b>Original Issuance Date:</b>          | 05/21/2010  |
| <b>Capacity:</b>                        | 210   |
| <b>Program Type:</b>                    | AGED<br>ALZHEIMERS                                |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/29/2021

Date of Bureau of Fire Services Inspection if applicable: 10/6/2020

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 7/29/21

No. of staff interviewed and/or observed 15

No. of residents interviewed and/or observed 55

No. of others interviewed [redacted] Role No visitors at the time of inspection.

- 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.
- 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 and staff interviewed regarding disaster plans.
- 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 9/1/20 for Renewal LSR dated 7/31/20: R325.1944(2), R325.1964(9), R325.1923(2), R325.1922(7), R325.1932(5), R325.1923(1), R325.1922(2), R325.1932(1), R325.1932(3)
- Number of excluded employees followed up? Two N/A

**III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

The facility was found to be in substantial compliance with the public health code and administrative rules regulating home for the aged.

**IV. RECOMMENDATION**

I recommend issuance of a regular license to this home for the aged.

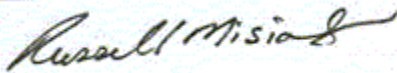


8/11/21

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Date

Licensing Consultant



8/11/21

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Date

Russell Misiak  
Area Manager