

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 14, 2021

Miranda Labarge 1357 Terrace St Muskegon, MI 49442

RE: License #:	AS610407159
	Cottage House Retreat
	2171 Monte Dr.
	Fruitport, MI 49442

Dear Mrs. Labarge:

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. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

Elizabeth Elliott

Elizabeth Elliott, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 (616) 901-0585

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

I. IDENTIFYING INFORMATION

License #:	AS610407159
Licensee Name:	Miranda Labarge
Licensee Address:	1357 Terrace St
	2171 Monte Dr
	MUSKEGON, MI 49442
Licensee Telephone #:	(231) 375-0060
	(===)
Licensee/Licensee Designee:	N/A
Administrator:	N/A
Nows of Facility	Cattoria Haves Datinet
Name of Facility:	Cottage House Retreat
Facility Address:	2171 Monte Dr.
1 40 1 14 1 10	Fruitport, MI 49442
Facility Telephone #:	(231) 375-0060
Original Isassanas Batas	05/24/2021
Original Issuance Date:	05/24/2021
Capacity:	6
-	
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL
	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		08/2021		
Date of Bureau of Fire Ser	vices Inspection if applicab	le: N/A		
Date of Health Authority In	spection if applicable: 02/1	8/2021		
Inspection Type:	☐ Interview and Observa☐ Combination	ation ⊠ Worksheet □ Full Fire Safety		
No. of staff interviewed and No. of residents interviewed No. of others interviewed	ed and/or observed	0 0		
Residents were not in	ulated pass observed? Yes the facility during the inspe dication record(s) reviewed			
 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. A the time of the renewal, a meal was not being prepared so a review of the meal prep area and food available in the facility conducted. 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.		
N/A 🖂	compliance verified? Yes			
	employees followed-up?	N/A 🖂		
 Variances? Yes ☐ (r 	olease explain) No 🔲 N/A	\boxtimes		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:		
R 400.14204	Direct care staff; qualifications and training.	
	(1) Direct care staff shall not be less than 18 years of age and shall be able to complete required reports and follow written and oral instructions that are related to the care and supervision of residents.	
Finding: Files on st for review.	aff that included direct care staff qualifications were not available	
•	e: Miranda LaBarge stated she would put together staff files to be y for department review.	
R 400.14204	Direct care staff; qualifications and training.	
	(2) Direct care staff shall possess all of the following qualifications: (a) Be suitable to meet the physical, emotional, intellectual,	
	and social needs of each resident. (b) Be capable of appropriately handling emergency situations.	
Finding: Files on st review.	aff that included direct care staff suitablity were not available for	
•	e: Ms. LaBarge stated she would put together staff files to be y for department review.	
R 400.14204	Direct care staff; qualifications and training.	
	(3) 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 competent before performing assigned tasks, which shall include being competent in all of the following areas: (a) Reporting requirements.	
	 (b) First aid. (c) Cardiopulmonary resuscitation. (d) Personal care, supervision, and protection. (e) Resident rights. (f) Safety and fire prevention. 	

	(g) Prevention and containment of communicable diseases.		
Finding: Files on s review.	staff that included training for direct care staff were not available for		
Licensee Response: Ms. LaBarge stated she would put together staff files to be stored at the facility for department review.			
R 400.14315	Handling of resident funds and valuables.		
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department. Funds I & Funds II forms were not included in resident files. se: Ms. LaBarge stated she will include Resident Funds I & II forms states.		
R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.		
	(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.		
Finding: Fire drill records were not available for review at the time of the inspection.			
Licensee Response: Ms. LaBarge stated she practices fire drills with all residents during daytime, evening and sleeping hours at least once per quarter and will have the documentation with the dates, time of day and evacuation time, available for			

IV. RECOMMENDATION

department review.

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

Elizabeth Ellisett

12/14/2021

Date

Licensing Consultant