

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 20, 2022

Tammi Carey Carey's Young at Heart LLC 2167 Vernor Road Lapeer, MI 48446

RE: License #: AL790342299

Carey's Young at Heart 1341 S Colling Road Caro, MI 48723

Dear Mrs. Carey:

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 will be renewed upon the receipt of an approved report from the Bureau of Fire Services (BFS) and the Tuscola County Environmental Health Department. It is valid only at your present address and is nontransferable.

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 (906) 226-4171.

Sincerely,

Sabrina McGowan, Licensing Consultant

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(810) 835-1019

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

I. IDENTIFYING INFORMATION

License #: AL790342299

Licensee Name: Carey's Young at Heart LLC

Licensee Address: 2167 Vernor

Lapeer, MI 48446

Licensee Telephone #: (810) 656-3568

Licensee/Licensee Designee: Tammi Carey

Administrator: Tammi Carey

Name of Facility: Carey's Young at Heart

Facility Address: 1341 S Colling Road

Caro, MI 48723

Facility Telephone #: (810) 656-3568

Original Issuance Date: 07/26/2013

Capacity: 20

Program Type: MENTALLY ILL

ALZHEIMERS

AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		01/11/2022	
Date of Bureau of Fire Serv	vices Inspection if appli	cable:	Pending
Date of Health Authority Ins	spection if applicable: I	Pending	
Inspection Type:	☐ Interview and Obs ☐ Combination	ervation	
No. of staff interviewed and No. of residents interviewed No. of others interviewed			2 8
Medication pass / simu	ılated 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. Residents had already eaten at the time of the inspection. 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. 			
No IR's to review Corrective action plan 11/29/2021-R401(1) N	ıp? Yes ☐ No ☒ If n compliance verified? `\ /A ☐ mployees followed-up?	∕es⊠ (
Variances? Yes ☐ (p)	lease explain) No 🔲 I	N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in compliance with all applicable rules and statutes.

IV. RECOMMENDATION

Upon the receipt of an approved report from the Bureau of Fire Services (BFS) and the Tuscola County Environmental Health Department, I recommend issuance of a regular license to this AFC adult large group home (capacity 13-20).

abrua McGonan January 20, 2022

Sabrina McGowan Licensing Consultant Date