



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 23, 2022

Toni and Steven Bump
6028 Cambria Rd
Hillsdale, MI 49242

RE: License #: AF300254367
Tri-State Country Care
6028 Cambria Road
Hillsdale, MI 49242

Dear Mr. and Mrs. Bump:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan: You are to submit documentation of compliance by April 5, 2022.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. 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 (313) 456-0380.

Sincerely,

A handwritten signature in cursive script that reads "Mahtina Rubritius".

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd., Ste. #9-100
Detroit, MI 48202
(517) 262-8604

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

I. IDENTIFYING INFORMATION

License #: AF300254367

Licensee Name: Toni and Steven Bump

Licensee Address: 6028 Cambria Rd
Hillsdale, MI 49242

Licensee Telephone #: (517) 357-4220

Licensee/Licensee Designee: N/A

Administrator: N/A

Name of Facility: Tri-State Country Care

Facility Address: 6028 Cambria Road
Hillsdale, MI 49242

Facility Telephone #: (517) 357-4220

Original Issuance Date: 08/25/2003

Capacity: 5

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/22/2022

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: 10/21/2021

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 4
No. of others interviewed 0 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.
The on-site inspection was not concurrent with the mealtimes.
- 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.
There were no incident reports submitted during this renewal period that required follow-up.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
R 400.1426 (1), R 400. 1430 (1), and R 400. 1437 (1) 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:

R 400.1421 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.

- The Resident Funds Part I form was not completed and contained within the file for Resident A.

R 400.1426 Maintenance of premises.

(1) The premises shall be maintained in a clean and safe condition.

- The hot water temperature was 127 degrees Fahrenheit at the faucet. This is a **REPEAT VIOLATION** (Renewal Inspection 3/17/2020).
- The dryer was equipped with a flexible foil duct, and it requires replacement with a flexible metal duct.

A corrective action plan was requested and approved on 02/23/2022. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Mahina Rubritius

2/23/2022

Licensing Consultant

Date