

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 30, 2022

Teresa Fowler Vineyard Assisted Living, LLC 14420 S. Helmer Rd. Battle Creek, MI 49015

RE: License #: AH390391941

Vineyard Assisted Living 8170 Vineyard Parkway Kalamazoo, MI 49009

Dear Ms. Fowler:

An administrative review of your licensing activity for the past year has revealed substantial compliance with the public health code and administrative rules regulating home for the aged facilities. However, in accordance with MCL 333.20155(1) Home for the Aged the license will be renewed once an approved BFS fire safety rating is received. The current BFS rating is C and dated 10/19/2021. The license cannot be renewed until an approved BFS fire safety rating is received.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (616) 356-0100.

Sincerely,

July hnano

Julie Viviano, Licensing Staff Bureau of Community and Health Systems

Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 Cell (616) 204-4300

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

I. IDENTIFYING INFORMATION

1:00000 #.	A11200204044	
License #:	AH390391941	
Licensee Name:	Vineyard Assisted Living, LLC	
	, J	
Licensee Address:	8170 Vineyard Parkway	
	Kalamazoo, MI 49009	
	Traidinazoo, ivii 10000	
Licensee Telephone #:	(269) 775-0001	
Authorized		
Representative/Administrator:	Teresa Fowler	
	1 or odd 1 owner	
Name of Facility:	Vineyard Assisted Living	
Traine or raciney.	Vinioyara / toolotoa Elvinig	
Facility Address:	8170 Vineyard Parkway	
r domity / tadi ooo!	Kalamazoo, MI 49009	
	Ivalamazoo, IVII 43003	
Facility Telephone #:	(269) 775-0001	
r domity relephone n.	(200) 110 0001	
Original Issuance Date:	10/31/2018	
Original issuance Date.	10/31/2010	
Consoite	05	
Capacity:	85	
Program Type:	AGED	

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 3/30/2022 - No On-site inspection				
Date of Bureau of Fire Services Inspection if applicable: BFS rating – C (10/19/2021)				
Inspection Type: ☐ Interview and Observation ☐ Worksheet ☐ Combination				
Date of Exit Conference: 3/03/2022				
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role				
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.				
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: 				
Number of excluded employees followed up? N/A				

III.	DECCRIPTION	OF FINIDINGS	& CONCLUSIONS
111.	DESCRIPTION	OF FINDINGS (* CONCLUSIONS

The facility is in compliance with applicable rules and statutes.

IV. RECOMMENDATION

Upon receipt of an approved BFS fire safety rating, renewal of the license is recommended.

Julis hnano	3/30/2022
Licensing Consultant	 Date