

GRETCHEN WHITMER GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 12, 2022

Carl Schuler Mersadies Adult Care, LLC 617 Riverview Court Gladwin, MI 48624

RE: License #:	AL060312454
	The Horizon Senior Living IV
	218 Airpark Drive
	Standish, MI 48658

Dear Mr. Schuler:

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:

• An on-site inspection will be conducted.

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.

#### www.michigan.gov/lara • 517-335-1980

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,

Shamidah Wyden, Licensing Consultant Bureau of Community and Health Systems

411 Genesee P.O. Box 5070 Saginaw, MI 48607 989-395-6853

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

#### I. IDENTIFYING INFORMATION

License #:	AL060312454		
Licensee Name:	Mersadies Adult Care, LLC		
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Licensee Address:	617 Riverview Court		
	Gladwin, MI 48624		
Licensee Telephone #:	(989) 846-0000		
Licensee Designee:	Carl Schuler		
	Carreditate		
Administrator:	Shelly Dekay		
Name of Facility:	The Horizon Senior Living IV		
Facility Address:	218 Airpark Drive		
	Standish, MI 48658		
Facility Telephone #:	(989) 846-0000		
Original Issuance Date:	11/23/2011		
Capacity:	20		
Program Type:	AGED		

### II. METHODS OF INSPECTION

Dat	te of On-site Inspection(s):	04/07/2	2022		
Date of Bureau of Fire Services Inspection if applicable: 11/09/2021					
Dat	te of Health Authority Inspection if applicable: N	I/A			
Insp	spection Type:	ervatio	n ⊠ Worksheet □ Full Fire Safety		
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed N/A Role:					
•	Medication pass / simulated pass observed?	Yes ∑	No ☐ If no, explain.		
•	Medication(s) and medication record(s) review	ved? `	Yes ⊠ No □ If no, explain		
•	Resident funds and associated documents reviewed for at least one resident? Yes $\boxtimes$ No $\square$ If no, explain.  Meal preparation / service observed? Yes $\square$ No $\boxtimes$ If no, explain.  The inspection was not completed during a mealtime.  Fire drills reviewed? Yes $\boxtimes$ No $\square$ If no, explain.				
•	Fire safety equipment and practices observed	l? Yes	s⊠ No  lf 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 There were no recent incident reports requiring Corrective action plan compliance verified? Yes 10/05/2021 R304(1)(o), R306(2), R306(3) N/AN Number of excluded employees followed-up?	ig follo ′es ⊠ \	w-up.		
•	Variances? Yes ☐ (please explain) No ☐ 1	√A/A			

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:				
R 400.15401	Environmental health.			
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.			
At the time of inspection, temperatures were taken at multiple faucets in resident				
bedrooms. The water temperatures were outside of the 105-to-120-degree Fahrenheit range.				
R 400.15403	Maintenance of premises.			
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.			
At the time of inspection, the fire door to the basement was observed to not be				
automatically self-closing. The door needs to be repaired so that it is automatic self-closing.				
R 400.15403	Maintenance of premises.			
	(3) All living, sleeping, hallway, storage, bathroom, and kitchen areas shall be well lighted and ventilated.			
At the time of inspection, the main shower room vent in the north hall of the facility was observed to not be in working order.				

A corrective action plan was requested and approved on 04/12/2022. 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.

Shamidah Wyden Date Licensing Consultant