



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 17, 2023

David Zebley
Cambrian Assisted Living
333 N. Occidental Highway
Tecumseh, MI 49286

RE: License #: AH460277873
Cambrian Assisted Living
333 N. Occidental Highway
Tecumseh, MI 49286

Dear Mr. Zebley:

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 home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (517) 241-1970.

Sincerely,

Jessica Rogers, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 285-7433
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH460277873
Licensee Name:	Cambrian of Tecumseh, LLC
Licensee Address:	333 N. Occidental Tecumseh, MI 49286
Licensee Telephone #:	(517) 414-8881
Authorized Representative:	David Zebley
Administrator:	Stacey Short
Name of Facility:	Cambrian Assisted Living
Facility Address:	333 N. Occidental Highway Tecumseh, MI 49286
Facility Telephone #:	(517) 423-5300
Original Issuance Date:	10/24/2005
Capacity:	70
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/16/2023

Date of Bureau of Fire Services Inspection if applicable: 06/07/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 02/16/2023

No. of staff interviewed and/or observed 12

No. of residents interviewed and/or observed 25

No. of others interviewed One Role Elara Home Care Occupational Therapist

- 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. No resident funds held.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews fire drills. Disaster plan reviewed and staff interviewed regarding disaster plan.
- 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: 2022A1019003 dated 10/22/2021 to CAP dated 10/29/2021: R 325.1932(3)
- Number of excluded employees followed up? Four N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1953

Menus.

- (1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.**

Review of a diet binder revealed some residents were prescribed a diet by their physician including but not limited to diabetic, no added salt, renal and dysphagia advanced.

Interview with Employee #1 revealed the kitchen lacked special and therapeutic diet menus as well as posting them.

VIOLATION ESTABLISHED

R 325.1954

Meal and food records.

- The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.**

Review of the meal census binder revealed records of the daily meal census were not always maintained. For example, review of the records revealed on 2/8/2023, 2/7/2023, 2/4/2023 and 1/31/2023 the dinner meal was not recorded. The records revealed no meal census was recorded on 2/6/2023 and 2/3/2023. The records revealed on 2/1/2023 and 2/2/2023, the meal census lacked record of breakfast and lunch meals.

VIOLATION ESTABLISHED

R 325.1976

Kitchen and dietary.

- (13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.**

Interview with Employee #1 revealed use of chemical sanitization was utilized and tested daily, however the task was not recorded, thus it could not be confirmed if proper and adequate sanitization of dishware was completed.

VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Jessica Rogers

02/17/2023

Licensing Consultant Date