



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 7, 2023

Kari Sexton
Sage Creek Senior Living LLC
PO Box 69
Metamora, MI 48455

RE: License #: AL740375736
Sage Creek Senior Living, LLC
11849 Belle River Road
Memphis, MI 48041

Dear Ms. Sexton:

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 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 (517) -643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

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 #: AL740375736

Licensee Name: Sage Creek Senior Living LLC

Licensee Address: 11849 Belle River Road
Memphis, MI 48041

Licensee Telephone #: (810) 533-8940

Licensee/Licensee Designee: Kari Sexton

Administrator: Kari Sexton

Name of Facility: Sage Creek Senior Living, LLC

Facility Address: 11849 Belle River Road
Memphis, MI 48041

Facility Telephone #: (810) 533-8940

Original Issuance Date: 10/31/2018

Capacity: 19

Program Type: PHYSICALLY HANDICAPPED
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/04/2023

Date of Bureau of Fire Services Inspection if applicable: 10/31/2022

Date of Health Authority Inspection if applicable: 05/20/2021

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 5

No. of others interviewed 1 Role: Licensee

- 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.
- 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.
No IR's to review.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

IV. RECOMMENDATION

Contingent upon receipt of an approved Environmental Health Inspection, renewal of the license is recommended.

 April 7, 2023

Sabrina McGowan
Licensing Consultant

Date