

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

June 21, 2023

Barbara Woodward-Boonstra Perry Farm Development Company 4241 Village Circle Dr. Harbor Springs, MI 49740

> RE: License #: AL240407728 The Birches at Perry Farm Village 4241 Village Circle Dr. Harbor Springs, MI 49740

Dear Ms. Woodward-Boonstra:

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. 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 (616) 356-0100.

Sincerely,

Eda Polinge

Adam Robarge, Licensing Consultant Bureau of Community and Health Systems 701 S. Elmwood, Suite 11 Traverse City, MI 49684 (231) 350-0939

611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909 www.michigan.gov/lara • 517-335-1980

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

I. IDENTIFYING INFORMATION

License #:	AL240407728	
Licensee Name:	Perry Farm Development Company	
Licensee Address:	4241 Village Circle Dr. Harbor Springs, MI 49740	
Licensee Telephone #:	(231) 526-1500	
Licensee Designee:	Barbara Woodward-Boonstra, Designee	
Administrator:	Jill Tibbits	
Name of Facility:	The Birches at Perry Farm Village	
Facility Address:	4241 Village Circle Dr. Harbor Springs, MI 49740	
Facility Telephone #:	(231) 526-1500	
Original Issuance Date:	12/22/2022	
Capacity:	20	
Program Type:	AGED ALZHEIMERS	

II. METHODS OF INSPECTION

Date	of On-site Inspection(s):	06/20/2	2023
Date of Bureau of Fire Services Inspection if applicable: 03/07/2023			
Date	of Health Authority Inspection if applicable:	10/17/2	2022
No. d	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 2 Role: Lic. Des	ignee &	6 11 Administrator
•	Medication pass / simulated pass observed?	Yes 🖂	🛾 No 🗌 If no, explain.
•	Medication(s) and medication record(s) revie	wed?	Yes 🛛 No 🗌 If no, explain.
•	 Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain. Meal preparation / service observed? Yes X No I If no, explain. 		
•	▶ Fire drills reviewed? Yes ⊠ No □ If no, explain.		
•	Fire safety equipment and practices observe	d? 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, expl	lain.
	Corrective action plan compliance verified? N/A 🖂 Number of excluded employees followed-up		CAP date/s and rule/s: 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 400.15318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

Only two fire drills were practiced during the first quarter of 2023.

R 400.15402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

Two resident refrigerators containing perishable items were not equipped with thermometers.

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.

A loose oxygen tank was stored in a resident's closet.

A corrective action plan was requested and approved on 06/20/2023. 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

I recommend issuance of a two-year regular adult foster care license.

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6/21/2023

Adam Robarge Licensing Consultant

Date