



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 6, 2023

Lorraine Morales
1050 W. Colonial Park
Grand Ledge, MI 48837

RE: License #: AS230337351
Colonial Park Adult Assisted Living
1050 W. Colonial Park Dr
Grand Ledge, MI 48837

Dear Lorraine Morales:

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 the licensee or licensee designee or home for the aged authorized representative and a date.

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

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) 284-9730.

Sincerely,

A handwritten signature in black ink that reads "Jana Lipps". The signature is written in a cursive style with a large initial 'J' and a long, sweeping underline.

Jana Lipps, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #: AS230337351

Licensee Name: Lorraine Morales

Licensee Address: 1050 W. Colonial Park
Grand Ledge, MI 48837

Licensee Telephone #: (517) 622-0313

Licensee/Licensee Designee: Lorraine Morales

Administrator: Lorraine Morales

Name of Facility: Colonial Park Adult Assisted Living

Facility Address: 1050 W. Colonial Park Dr
Grand Ledge, MI 48837

Facility Telephone #: (517) 622-0701

Original Issuance Date: 01/24/2013

Capacity: 6

Program Type: AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/06/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

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. Licensee is not managing funds for any of the current residents.
- 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.
- 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

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

R 400.14203 Licensee and administrator training requirements.

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

Licensee, Lorraine Morales, did not have documentation of 16 hours of annual training for the current renewal period.

R 400.14303 Resident care; licensee responsibilities.

(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.

During on-site inspection I reviewed Resident A's written assessment plan. The assessment plan noted that the direct care staff will "encourage" the use of a cane/walker for Resident A. Ms. Morales reported that Resident A does not use a walker and there was not a walker available in the facility for Resident A's use. Direct care staff were not able to follow Resident A's assessment plan as written.

R 400.14509 Means of egress; wheelchairs.

(2) The slope of ramp shall not be more than 1 foot of rise in 12 feet of run and shall terminate on a firm surface or solid unobstructed ground which will allow the wheelchair occupant to move a safe distance away from the building. Ramps shall have handrails on the open sides and be constructed in accordance with the requirements specified in Section 816.0 of the BOCA National Building Code, 1990, eleventh edition.

At the time of the on-site inspection, it was observed that the second means of emergency egress for wheelchair accessibility did not allow a wheelchair bound resident to move a safe distance away from the facility in the event of an emergency. The ramp at this exit, from the deck, terminated at the base of the deck into the grass.

IV. RECOMMENDATION

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



Jana Lipps
Licensing Consultant

07/06/23

_____ Date