

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

MARLON I. BROWN, DPA ACTING DIRECTOR

October 9, 2023

Carl Schuler Sawyer Adult Care, LLC 10059 E. Airport Rd. St. Helen, MI 48656

> RE: License #: AL720283253 The Horizon Senior Living 10059 Airport Rd. St. Helen, MI 48656

Dear Carl 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:

• You are to submit documentation of compliance.

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) 356-0183.

Sincerely,

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Matthew Soderquist, Licensing Consultant Bureau of Community and Health Systems Ste 3 931 S Otsego Ave Gaylord, MI 49735 (989) 370-8320

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

I. IDENTIFYING INFORMATION

License #:	AL720283253
Licensee Name:	Sawyer Adult Care, LLC
Licensee Address:	10059 E. Airport Rd. St. Helen, MI 48656
Licensee Telephone #:	(989) 389-4900
Licensee/Licensee Designee:	Carl Schuler
Administrator:	Paula Cassiday
Name of Facility:	The Horizon Senior Living
Name of Facility: Facility Address:	The Horizon Senior Living 10059 Airport Rd. St. Helen, MI 48656
-	10059 Airport Rd.
Facility Address:	10059 Airport Rd. St. Helen, MI 48656
Facility Address: Facility Telephone #:	10059 Airport Rd. St. Helen, MI 48656 (989) 389-4900

II. METHODS OF INSPECTION

Dat	e of On-site Inspection(s):	10/04/2023	
Dat	e of Bureau of Fire Services Inspection if applicable:	11/07/2022	
Dat	e of Health Authority Inspection if applicable:	06/30/2023	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:	4 14	
•	Medication pass / simulated pass observed? Yes \boxtimes	No 🗌 If no, explain.	
•	Medication(s) and medication record(s) reviewed? Ye	es 🛛 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 \boxtimes No \square If no, explain.		
•	Fire drills reviewed? Yes 🖂 No 🗌 If no, explain.		
•	Fire safety equipment and practices observed? Yes $oxtimes$ No $oxtimes$ If no, explain.		
•	E-scores reviewed? (Special Certification Only) Yes If no, explain. Water temperatures checked? Yes 🛛 No 🗌 If no, e		
•	Incident report follow-up? Yes 🛛 No 🗌 If no, expla	in.	
•	Corrective action plan compliance verified? Yes □ 0 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 400.15401 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.

Resident room number 13 bathroom faucet was 126 degrees Fahrenheit.

R 400.15408 Bedrooms generally.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, nonlocking-against-egress hardware.

Resident bedrooms 5 and 13 both did not have nonlocking-against-egress hardware.

On 10/04/2023 I conducted an exit conference with administrator Paula Cassiday. Ms. Cassiday concurred with the findings of the inspection. A corrective action plan was requested and approved on 10/04/2023. 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

An acceptable corrective action plan has been received. Renewal of the license is recommended.

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10/09/2023

Matthew Soderquist Licensing Consultant Date