



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

October 12, 2023

Lisa Sikes
Care Cardinal Kentwood
4352 Breton Rd SE
Kentwood, MI 49546

RE: License #: AH410413166
Care Cardinal Kentwood
4352 Breton Rd SE
Kentwood, MI 49546

Dear Mrs. Licensee:

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 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,

A handwritten signature in blue ink that reads "Lauren Wohlfert".

Lauren Wohlfert, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 260-7781
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH410413166
Licensee Name:	CSM Kentwood LLC
Licensee Address:	1435 Coit Ave. NE Grand Rapids, MI 49505
Licensee Telephone #:	(616) 308-6915
Authorized Representative:	Lisa Sikes
Administrator:	Diana Billows
Name of Facility:	Care Cardinal Kentwood
Facility Address:	4352 Breton Rd SE Kentwood, MI 49546
Facility Telephone #:	(616) 288-4151
Original Issuance Date:	04/13/2023
Capacity:	131
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/11/2023

Date of Bureau of Fire Services Inspection if applicable: 07/06/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 10/11/2023

No. of staff interviewed and/or observed 11
No. of residents interviewed and/or observed 29
No. of others interviewed 1 Role Relative

- 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 in trust
- 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 plans reviewed with staff
- 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:
Observed policies and practices put in place during the facility's Corrective Notice Order (CNO) are still in place.
- Number of excluded employees followed up? 1 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1942	Resident records.
	<p>(2) A home shall assure that a current resident record is maintained and that all entries are dated and signed.</p> <p>(3) The resident record shall include at least all of the following:</p> <p>(h) The resident's service plan.</p>
ANALYSIS:	Review of the facility's initial and updated resident service plans revealed they were not signed or dated by the resident and/or their designated authorized representative.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
ANALYSIS:	Inspection of several resident mini refrigerators and freezers and the refrigerators and freezers in the dining room common areas in the facility revealed reliable thermometers were not present to ensure food was stored at the required temperatures of 40 degrees Fahrenheit and zero degrees Fahrenheit and below.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Lauren Wohlfart

10/12/2023

Health Care Surveyor

Date