

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

May 9, 2024

Michelle Cloyd Crystal Creek Assisted Living Inc 8121 N. Lilley Canton, MI 48187

RE: License #: AL820307374

Crystal Creek Assisted Living 4

8041 Lilley

Canton, MI 48187

Dear Ms. Cloyd:

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: (*choose one or more*)

An on-site inspection will be conducted.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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 (313) 456-0380.

Sincerely,

Edith Richardson, Licensing Consultant

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Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100 3026 W. Grand Blvd

Detroit, MI 48202

(313) 919-1934

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

I. IDENTIFYING INFORMATION

License #: AL820307374

Licensee Name: Crystal Creek Assisted Living Inc

Licensee Address: 8121 N. Lilley

Canton, MI 48187

Licensee Telephone #: (734) 927-7025

Licensee/Licensee Designee: Michelle Cloyd, Designee

Administrator: Michelle Cloyd

Name of Facility: Crystal Creek Assisted Living 4

Facility Address: 8041 Lilley

Canton, MI 48187

Facility Telephone #: (734) 927-7025

Original Issuance Date: 04/08/2011

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED

AGED

ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/20/2024
Date of Bureau of Fire Services Inspection if applicable: 11/22/2023
Date of Health Authority Inspection if applicable:
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:
 Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. No residents in care. Medication(s) and medication record(s) reviewed? Yes ☐ No ☒ If no, explain the residents in care.
 No residents in care. Resident funds and associated documents reviewed for at least one resident? Yes \(\subseteq \text{No } \subseteq \text{If no, explain. No residents in care.} \) Meal preparation / service observed? Yes \(\subseteq \text{No } \subseteq \text{If no, explain.} \) No residents in care.
 Fire drills reviewed? Yes No If no, explain. No residents in care.
• Fire safety equipment and practices observed? Yes ☐ No ☒ If no, explain. No residents in care.
 E-scores reviewed? (Special Certification Only) Yes ☐ No ☐ N/A ☐ If no, explain.
 Water temperatures checked? Yes No If no, explain. No residents in care.
 Incident report follow-up? Yes ☐ No ☐ If no, explain. N/A
 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:

MCL 400.713

License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.

- (3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and (11), the department shall issue or renew a license if satisfied as to all of the following:
- (b) The applicant's compliance with this act and rules promulgated under this act.

I am unable to determine the standards of care because there were no residents in care.

A corrective action plan was requested and approved on 03/20/2024. 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. I recommend issuance of a provisional license.

Edith Richardson

Licensing Consultant

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05/09/2024

Date