



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 16, 2024

Patricia Beaune
Hidden Creek AFC, Inc.
2848 Hartland Road
Hartland, MI 48353

RE: License #: AM470295474
Hidden Creek AFC
2848 Hartland Rd.
Hartland, MI 48353

Dear Ms. Beaune:

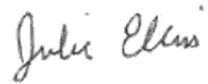
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 cursive script that reads "Julie Elkins".

Julie Elkins, 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 #:	AM470295474
Licensee Name:	Hidden Creek AFC, Inc.
Licensee Address:	2848 Hartland Road Hartland, MI 48353
Licensee Telephone #:	(810) 632-7670
Licensee Designee:	Patricia Beaune
Administrator:	Rita Zumbrunnen
Name of Facility:	Hidden Creek AFC
Facility Address:	2848 Hartland Rd. Hartland, MI 48353
Facility Telephone #:	(810) 632-7670
Original Issuance Date:	02/16/2012
Capacity:	12
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspections: 07/11/2024

Date of Bureau of Fire Services Inspection if applicable: 01/17/2024

Date of Health Authority Inspection if applicable: 04/10/2024

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 9

No. of others interviewed 2 Role: LD and administrator

- 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.
- 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:

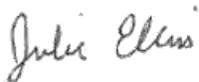
R 400.14312 Resident medications.

(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

At the time of inspection over the counter medications were observed on the kitchen counter not secured in a locked cabinet or drawer. Refrigerated resident medications were located in a separate small refrigerator however medications were not secured. Resident pain medications that are being provided by hospice are not stored in the medication cart, they are stored in an office closet that was not locked.

IV. RECOMMENDATION

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



07/16/2024

Julie Elkins
Licensing Consultant

Date