



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 8, 2024

Corinthia Calhoun  
Healing Rivers LLC  
6310 Timberview Dr  
East Lansing, MI 48823

RE: License #: AS330399006  
**Healing Rivers LLC**  
**1210 Stonegate Lane**  
**East Lansing, MI 48823**

Dear Ms. Calhoun:

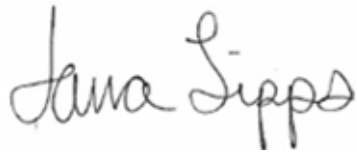
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 and special certification 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 "Jana Lipps". The ink is dark and the signature is centered horizontally.

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**

<b>License #:</b>	AS330399006
<b>Licensee Name:</b>	Healing Rivers LLC
<b>Licensee Address:</b>	6310 Timberview Dr East Lansing, MI 48823
<b>Licensee Telephone #:</b>	(517) 214-0646
<b>Licensee Designee:</b>	Corinthia Calhoun, Designee
<b>Administrator:</b>	Corinthia Calhoun
<b>Name of Facility:</b>	Healing Rivers LLC
<b>Facility Address:</b>	1210 Stonegate Lane East Lansing, MI 48823
<b>Facility Telephone #:</b>	(517) 721-1418
<b>Original Issuance Date:</b>	01/14/2020
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/08/2024

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 Designee

- 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. The licensee designee does not hold cash funds for any of the current residents.
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain. The inspection took place prior to the lunch meal.
- 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: CAP approved, 4/15/24, Rule 409(4). Confirmed CAP compliance today, 7/8/24. 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 330.1803                      Facility environment; fire safety.**

**(6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 months from the date of the finding to do either of the following:**

During the on-site inspection I reviewed resident records for Resident A & Resident B. There were no evacuation assessments available for review for either resident. Direct care staff, Juanita Ball, confirmed that evacuation assessments had not been completed and were not up to date for current residents.

**R 400.14204                      Direct care staff; qualifications and training.**

**(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:**  
**(c) Cardiopulmonary resuscitation.**

During the on-site inspection I reviewed the employee file for Ms. Ball. There was not documentation of a current cardiopulmonary resuscitation (CPR) training in Ms. Ball's employee file at the time of the on-site inspection. Ms. Ball reported that she is currently scheduled for a refresher course in CPR this month.

**R 400.14301                      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

**(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care**

appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

During the on-site inspection I reviewed the resident record for Resident A. Resident A's resident record did not contain a completed *Health Care Appraisal* document.

**R 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

During the on-site inspection I reviewed the resident record for Resident B. The *Assessment Plan for AFC Residents* form found in Resident B's resident record was dated for the year 2022. Ms. Ball reported that they did not have a current assessment plan available for my review on this date. The assessment plan must be updated at least annually.

**R 400.14316      Resident records.**

(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:

(d) Health care information, including all of the following:  
(v) Instructions for emergency care and advanced medical directives.

At the time of the on-site inspection, I reviewed the resident record for Resident A. Ms. Ball reported that the record did not contain a copy of Resident A's guardianship paperwork for review.

**R 400.14401            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.

During the on-site inspection I tested the water temperature at the kitchen sink. The water temperature read 141.3 degrees Fahrenheit. The water temperature must be between the range 105 – 120 degrees Fahrenheit.

**R 400.14401            Environmental health.**

(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.

During the on-site inspection I observed that cleaning products containing bleach were being kept in the resident bathrooms in an easily accessible cupboard under the bathroom sinks. The chemicals were not safeguarded in a nonresident area of the home.

**R 400.14402            Food service.**

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

During the on-site inspection the refrigerator was found to not be equipped with a thermometer. I could not determine the temperature of the refrigerator or its contents during this inspection due to the lack of thermometer.

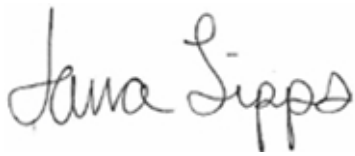
**R 400.14408            Bedrooms generally.**

(7) Bedrooms shall have at least 1 easily openable window.

During the on-site inspection I observed that the middle bedroom was equipped with two windows and neither of these windows were easily openable for resident use. Ms. Ball and licensee designee, Corinthia Calhoun, both had difficulty opening these windows during this inspection. These windows will need to be repaired.

#### IV. RECOMMENDATION

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



7/8/24

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Jana Lipps  
Licensing Consultant

Date