



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 19, 2024

Lauren Gowman
Appledorn Assisted Living Center
727 Apple Avenue
Holland, MI 49423

RE: License #: AH700236753
Appledorn Assisted Living Center
727 Apple Avenue
Holland, MI 49423

Dear Lauren Gowman:

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 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 I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 284-9730.

Sincerely,

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AH700236753
Licensee Name:	Appledorn Living Center LLC
Licensee Address:	950 Taylor Ave. Grand Haven, MI 49417
Licensee Telephone #:	(616) 842-2425
Authorized Representative:	Lauren Gowman
Administrator/Licensee Designee:	Morgan Jones
Name of Facility:	Appledorn Assisted Living Center
Facility Address:	727 Apple Avenue Holland, MI 49423
Facility Telephone #:	(616) 392-4650
Original Issuance Date:	03/01/2000
Capacity:	174
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/18/2024

Date of Bureau of Fire Services Inspection if applicable: BFS – A; 8/2/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 11/18/2024

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 42

No. of others interviewed 0 Role N/A

- 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. The home does not keep resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- 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: N/A
- Number of excluded employees followed up? 0 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1922	Admission and retention of residents.
	(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority.
ANALYSIS:	Review of eight resident files revealed Resident A's TB screen could not be found in the record. Resident A was admitted to the facility on 10/23/2023 and a TB screen could not be found in the record prior to admission. A TB screen must be completed within 12 months before admission.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1923	Employee's health.
	(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure.
ANALYSIS:	Review of eight employee files revealed seven employees did not have evidence of TB screen completed or the TB screen was completed outside of the 10 days of hire and/or after occupational exposure. An employee TB screen must be completed within the 10 days of hire and prior to occupational exposure.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1932	Resident medications.
	(3) If a home or the home's administrator or direct care staff member supervises the taking of medication by a resident, then the home shall comply with all of the following provisions: (a) Be trained in the proper handling and administration of medication.
ANALYSIS:	Inspection revealed Resident B's prescribed medication bottle was found on the top of the medication cart unattended and with no staff present. Medication is to be handled and secured to ensure or assure that prescription medication is not used by a person other than the resident for whom the medication is prescribed.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1975	Laundry and linen requirements.
	(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following: (b) A separate clean linen storage room.
ANALYSIS:	Inspection revealed items such as trash bins, vacuum cleaner, gait belts, and housekeeping cleaning items stored with the clean linens. This poses a risk for cross contamination. Clean linens must be stored separate of all other items in the clean linen storage area/room.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(12) Food service equipment and work surfaces shall be installed in such a manner as to facilitate cleaning and be maintained in a clean and sanitary condition, and in good repair.

ANALYSIS:	Inspection of the assisted living common area kitchenettes, memory care kitchenettes, and the main service kitchen revealed the surfaces of the cabinets, countertops, refrigerators, and freezers were not clean or kept in a sanitary condition.
CONCLUSION:	VIOLATION ESTABLISHED

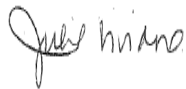
R 325.1976	Kitchen and dietary.
	(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.
ANALYSIS:	Review of the dishwasher sanitization logs for October 2024 to November 2024 revealed incomplete and/or blank entries of dishwasher sanitization temperatures. It could not be determined if the dishwasher was tested thoroughly to ensure cleanliness and sanitization of dishware and utensils due to the incomplete and/or blank entries.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	On-site inspection revealed multiple food items were found unlabeled in the assisted living and memory care kitchenettes the main service kitchen cold and dry food storage, activities room kitchenette, and the employee lounge. These items were not labeled with the appropriate open date, and it could not be determined if the food items were safe for human consumption. An open date must be placed on all food items in the facility once opened.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
ANALYSIS:	Inspection revealed hazardous and toxic chemicals stored in cabinet with a broken lock in the memory care unit. Also, a sharp item was found in the memory care unit kitchenette during inspection. The items were easily accessible to anyone in the facility, and this presents a potential risk of ingestion, harm and/or injury to residents in the home with impaired cognition and/or function.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



11/19/2024

Date

Licensing Consultant