



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 11, 2025

Kathy Corbin
The Oaks at Jamestown
3145 Sunchase Ave.
Hudsonville, MI 49426

RE: Application #: AH700411554
The Oaks at Jamestown
3145 Sunchase Ave.
Hudsonville, MI 49426

Dear Kathy Corbin:

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.

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 - MSOTR/L, Health Care Surveyor
Long Term Care State Licensing Section
LARA Bureau of Community and Health Systems
350 Ottawa Ave NW Unit #14
Grand Rapids, MI 49503
Phone 616-204-4300
Fax 616-356-0101
Secretarial support 616-356-0100

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

I. IDENTIFYING INFORMATION

License #:	AH700411554
Licensee Name:	Trilogy Healthcare of Hudsonville, LLC
License Address:	Suite 200 303 N. Hurstbourne Pkwy. Louisville, KY 40222
License Telephone #:	(502) 412-5847
Authorized Representative:	Kathy Corbin
Administrator/Licensee Designee:	Elise Van De Steenoven
Name of Facility:	The Oaks at Jamestown
Facility Address:	3145 Sun Chase Ave. Hudsonville, MI 49426
Facility Telephone #:	(616) 229-4414
Original Issuance Date:	08/06/2024
Capacity:	41
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 2/10/2025

Date of Bureau of Fire Services Inspection if applicable: No available information.

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 2/10/2025

No. of staff interviewed and/or observed

7

No. of residents interviewed and/or observed

18

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:

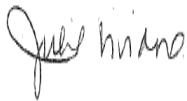
R 325.1932	Resident's medications.
	(3) Staff who supervise the administration of medication for residents who do not self-administer shall comply with all of the following: (b) Complete an individual medication log that contains all of the following information: (ii) The prescribed required dosage and the dosage that was administered. (v) The initials of the individual who administered the prescribed medication.
ANALYSIS:	On-site inspection revealed the narcotic count medication log contained a blank entry for 2/9/2025. It could not be determined if narcotic medication had appropriately been counted and verified between the day and night shifts on 2/9/2025. Therefore, the facility is in violation.
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 beverage station, the assisted living activities area, and the main service kitchen. 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 food item(s) served to or used for the residents in the facility.
CONCLUSION:	VIOLATION ESTABLISHED

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

IV. RECOMMENDATION

Receipt of an acceptable corrective action plan is requested and due by 2/26/2025.



2/11/2025

Date

Licensing Consultant