



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 06, 2025

David Zebley
Cambrian Assisted Living
333 N. Occidental Highway
Tecumseh, MI 49286

RE: License #: AH460277873
Cambrian Assisted Living
333 N. Occidental Highway
Tecumseh, MI 49286

Dear Licensee:

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 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 that I am not available and you need to speak to someone immediately, please feel free to contact the local office at 877-458-2757.

Sincerely,

Jessica Rogers, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 285-7433

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH460277873
Licensee Name:	Cambrian of Tecumseh, LLC
Licensee Address:	333 N. Occidental Tecumseh, MI 49286
Licensee Telephone #:	(517) 414-8881
Authorized Representative:	David Zebley
Administrator:	Stacey Short
Name of Facility:	Cambrian Assisted Living
Facility Address:	333 N. Occidental Highway Tecumseh, MI 49286
Facility Telephone #:	(517) 423-5300
Original Issuance Date:	10/24/2005
Capacity:	70
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/04/2025

Date of Bureau of Fire Services Inspection if applicable: 04/23/2024

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 03/04/2025

No. of staff interviewed and/or observed 9

No. of residents interviewed and/or observed 22

No. of others interviewed 0 Role

- 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. No resident funds held.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
Bureau of Fire Services reviews fire drills. Disaster plan reviewed.
- 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: CAP dated 3/2/2023 to Renewal Licensing Study Report (LSR) dated 2/17/2023: R 325.1953(1), R 325.1954, R 325.1976(13)
- Number of excluded employees followed up? N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1932 Resident medications.

(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.

A review of the January and February 2025 medication administration records (MARs) revealed that some residents had more than one as-needed (PRN) medications prescribed for the same purpose. For example, Residents A and E were both prescribed Tylenol and morphine for pain, and Resident B had both Haloperidol and Lorazepam prescribed for restlessness. However, the medication orders did not provide clear written instructions for staff regarding whether these medications should be administered together, separately, in tandem, or one in place of the other, depending on the severity of the condition.

Additionally, Resident B's MARs indicated she was prescribed Insulin Lispro to be injected subcutaneously according to a sliding scale before meals and at night, with the following dosages: 100-149 = 0 units, 150-199 = 1 unit, 200-249 = 3 units, 250-299 = 5 units, 300-349 = 7 units, and greater than 349 = 8 units. However, staff documented the medication as administered even when her blood sugar levels were 149 or less on the following dates for one or more doses: 1/2/2025, 1/5/2025, 1/12/2025, 1/15/2025, 1/21/2025, 1/23/2025, 1/25/2025, 1/26/2025, 2/2/2025, 2/6/2025, 2/7/2025, 2/9/2025, 2/11/2025, 2/23/2025, 2/24/2025, 2/26/2025, and 2/28/2025. The MARs were left blank on 1/13/2025 and 2/5/2025, making it unclear whether Resident B received insulin on those dates.

VIOLATION ESTABLISHED.

R 325.1954 Meal and food records.

The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.

Review of the January and February 2025 meal census and production logs revealed one or more meals were left blank on the following dates: 1/22/2025, 1/25/2025, 2/27/2025, and 2/28/2025.

REPEAT VIOLATION ESTABLISHED.

[For reference, see licensing study report (LSR) dated 2/17/2023; CAP dated 3/2/2023].

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.

A review of the January and February 2025 dishwasher temperature logs showed that staff were required to record the time, dishwasher temperature, and initial the log twice daily. However, the log revealed that one or both temperatures were not recorded on the following dates: 1/3/2025, 1/4/2025 through 1/6/2025, 1/8/2025, 1/9/2025, 1/12/2025 through 1/14/2025, 1/16/2025 through 1/21/2025, 1/24/2025, 1/26/2025, 1/30/2025, 1/31/2025, 2/3/2025, 2/5/2025 through 2/9/2025, 2/11/2025 through 2/16/2025, 2/18/2025, 2/19/2025, 2/21/2025, and 2/23/2025 through 2/28/2025.

REPEAT VIOLATION ESTABLISHED.

[For reference, see licensing study report (LSR) dated 2/17/2023; CAP dated 3/2/2023].

IV. RECOMMENDATION

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



03/06/2025

Date

Licensing Consultant