



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 3, 2025

Breana Wallace  
The Village of Westland, A Senior Living Community  
32001 Cherry Hill Road  
Westland, MI 48186-7902

RE: License #: AL820244670  
**Ivy Cottage**  
**32151 Cherry Hill Road**  
**Westland, MI 48186**

Dear Ms. Wallace:

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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink that reads "K. Robinson". The signature is written in a cursive, flowing style.

K. Robinson, MSW, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 919-0574

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL820244670
<b>Licensee Name:</b>	The Village of Westland, A Senior Living Community
<b>Licensee Address:</b>	32001 Cherry Hill Road Westland, MI 48186-7902
<b>Licensee Telephone #:</b>	(734) 762-8969
<b>Licensee/Licensee Designee:</b>	Breana Wallace
<b>Administrator:</b>	Breana Wallace
<b>Name of Facility:</b>	Ivy Cottage
<b>Facility Address:</b>	32151 Cherry Hill Road Westland, MI 48186
<b>Facility Telephone #:</b>	(734) 762-8885
<b>Original Issuance Date:</b>	06/19/2002
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/20/2025

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 04

No. of residents interviewed and/or observed 05

No. of others interviewed 01 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.
- 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: 3/13/23: 403(5) 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:

**MCL 400.705            Definitions; G to N.**

**(4) "Licensee designee" means the individual designated in writing by the owner or person with legal authority to act on behalf of the company or organization on licensing matters. The licensee designee must meet the licensee qualification requirements of this act, and rules promulgated under this act. The licensee designee who is not an owner, partner, or director of the applicant shall not sign the original license application or amendments to the application.**

Breana Wallace is appointed as the licensee designee; however, Ms. Wallace cannot act on behalf of the organization on licensing matters as it pertains to quality of care for 7 out of 16 residents. According to Ms. Wallace, those 7 residents are under the care and services of the Homes for the Aged program type despite their physical location at Ivy Cottage and she is prevented from access to their resident and employee files.

**R 400.15102            Definitions.**

**(1) As used in these rules:**

**(b) "Administrator" means the individual that is designated by the licensee to be responsible for the daily operation and management of the adult foster care large group home. The administrator may be the licensee.**

Breana Wallace is appointed as the administrator; however, Ms. Wallace cannot carry out the responsibilities associated with the daily operation and management of Ivy Cottage as it pertains to 7 out of 16 residents. According to Ms. Wallace, those 7 residents have their “own administrator,” under the care and services of the Homes for the Aged program type despite their physical location at Ivy Cottage and she is prevented from access to their resident and employee files.

**R 400.15201                      Qualifications of administrator, direct care staff, licensee, and members of household; provision of names of employee, volunteer, or member of household on parole or probation or convicted of felony; food service staff.**

(9) A licensee and the administrator shall possess all of the following qualifications:

(c) Be capable of assuring program planning, development, and implementation of services to residents consistent with the home's program statement and in accordance with the resident's assessment plan and care agreement.

Ms. Wallace does not have the capability to assure program planning and development or implementation of services to 7 of 16 residents in care because she is not authorized to manage their care. According to Ms. Wallace, those 7 residents have “their own administrator” assigned under the Homes for the Aged program type despite their physical location at Ivy Cottage and she is prevented from access to their resident and employee files.

**R 400.15204                      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:

(d) Personal care, supervision, and protection.

Direct care staff, Parilee Hadden was hired to work at the facility on 11/18/24; her employee record has no verification of Personal care, supervision, and protection training. Ms. Wallace was not able to produce verification of said training upon request.

**R 400.15208                      Direct care staff and employee records.**

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

- (a) Name, address, telephone number, and social security number.
- (b) The professional or vocational license, certification, or registration number, if applicable.
- (c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.
- (d) Verification of the age requirement.
- (e) Verification of experience, education, and training.
- (f) Verification of reference checks.
- (g) Beginning and ending dates of employment.
- (h) Medical information, as required.
- (i) Required verification of the receipt of personnel policies and job descriptions.

On the day of inspection, Ms. Wallace could not produce employee records for 2 of 4 direct care staff on shift. Ms. Wallace indicated that those 2 staff were reassigned to work at Ivy Cottage for the sole purpose of providing care to 7 of 16 residents under the Homes for the aged program type and despite their physical location at Ivy Cottage, she is prevented from access to their employee files. Therefore, the licensee failed to maintain employee records for department review.

**R 400.15208                      Direct care staff and employee records.**

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
  - (e) Verification of experience, education, and training.

Direct care staff, Binta Ceesay has no verification of education in her employee record; she was hired to work at the facility on 5/2/24.

**R 400.15301                      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.

Resident A and B's AFC Assessment Plans are incomplete; page 3 does not list resident medications as required.

Resident A's signature has been omitted from his assessment plan at admission dated 12/18/24.

Resident B's signature has been omitted from her annual assessment plan dated 2/26/24.

The licensee failed to complete a yearly assessment plan for Resident B due in Feb 2025.

**R 400.15301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

(b) A description of services to be provided and the fee for the service.

Resident A has no basic fee for service written on his Resident Care Agreement dated 12/21/24. According to Ms. Wallace, she doesn't know how much Ivy Cottage will receive for Resident A's cost of care since they've entered into an agreement with his previous placement. Ms. Wallace could only state, Ivy Cottage will receive a percentage of the funds received on his behalf from PACE (contractual agency).

**R 400.15301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(8) A copy of the signed resident care agreement shall be provided to the resident or the resident's designated representative. A copy of the resident care agreement shall be maintained in the resident's record.



Ms. Wallace didn't sign Resident A's Resident Care Agreement dated 12/21/24.

**R 400.15301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Ms. Wallace failed to furnish Resident B's 2023 Resident Care Agreement upon request.

**R 400.15310      Resident health care.**

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

Resident A's weight records do not document the actual day weights were taken. Only the month and year are recorded.

Resident B has no weight records documented for the months of Jan 2024, Feb 2024, and April 2024. Additionally, Resident B's weight dropped 28 pounds without explanation in 30 days. Specifically, on 11/1/23 Resident B's weight is recorded as 124 lbs. and on 12/1/23 Resident B's weight is recorded as 96 lbs.

**R 400.15315      Handling of resident funds and valuables.**

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Observed Resident A and B's Resident Funds Part I form is incomplete; Section B was left blank.

Resident A has no cost of care payments recorded. To date, Ms. Wallace explained no payments have been received for Resident A's cost of care. The amount owed to the home is not reflected on the Resident Funds Part II form. Ms. Wallace indicated she is not aware of Resident A's billing data.

**R 400.15401            Environmental health.**

(8) Hand-washing facilities that are provided in both the kitchen and bathroom areas shall include hot and cold water, soap, and individual towels, preferably paper towels.

I observed no paper towel was available in the kitchen after washing my hands.  
Corrected onsite.

**R 400.15312            Resident medications.**

(2) Medication shall be given, taken, or applied pursuant to label instructions.

Observed Resident A's 8:00 PM medication was not signed out as having been administered on 1/14/25. There is no documentation or explanation provided why his Insulin Glargine-YFGN U100 Pen, Melatonin 3mg tab, Simvastatin 40mg tab, and Ferrous Sulfate 325mg tab was not administered as prescribed. All medications listed are standing orders.

It should be noted that Ms. Wallace has no access to view or monitor Resident A's medication. When I requested to review Resident A's medication administration records, Ms. Wallace had to request the forms from the staff assigned to care for him under the Homes for the Aged program type despite his physical location at Ivy Cottage.

On 3/24/25, I completed an exit conference with licensee designee, Breana Wallace, Executive Director, Roger Myers, and Corporate Compliance Officer, Mark Pitchford. Ms. Wallace explained 7 out of 16 residents were relocated to Ivy Cottage for what was supposed to be 1 week because their home had no heat. Mr. Rogers explained those 7 residents reside in a Home for the Aged (HFA), so the company decided it would be best to house them at Ivy Cottage using a hybrid model where they have their own staff. Mr. Pitchford was argumentative as he stated, I had "No right" to review those records based on their contractual obligation with an unrelated source. Both Mr. Myers and Mr. Pitchford also reported they received approval to place the 7 HFA residents at Ivy Cottage by the assigned Healthcare Surveyor, Brenda Howard. On 3/28/25, I contacted Ms. Howard who denied giving the home permission to transfer the residents to Ivy Cottage. Ms. Howard acknowledged that not only does she not have the authority to authorize such an arrangement, but she also indicated that she knows better than to mix 2 separate licensing programs. Ms. Howard plans to meet with the licensee's executive team next week to discuss a resolution.

#### IV. RECOMMENDATION

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

A handwritten signature in blue ink that reads "K. Robinson".

04/03/25

Date

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Licensing Consultant