



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 4, 2025

LaToshia Baruti  
Vintage Specialized Services LLC  
P.O. Box 541  
Leslie, MI 49251

RE: License #: AS380390596  
**Creekside Residential Care**  
**2055 Perrine Road**  
**Rives Junction, MI 49277**

Dear LaToshia Baruti:

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 designee 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 (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Mahtina Rubritius".

Mahtina Rubritius, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa  
P.O. Box 30664  
Lansing, MI 48909  
(517) 262-8604

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

**I. IDENTIFYING INFORMATION**

**License#:** AS380390596

**Licensee Name:** Vintage Specialized Services LLC

**Licensee Address:** 207 E. Bellevue St.  
Leslie, MI 49521

**Licensee Telephone #:** (313) 567-0709

**Licensee/Licensee Designee:** LaToshia Baruti

**Administrator:** LaToshia Baruti

**Name of Facility:** Creekside Residential Care

**Facility Address:** 2055 Perrine Road  
Rives Junction, MI 49277

**Facility Telephone #:** (517) 574-2401

**Original Issuance Date:** 03/05/2018

**Capacity:** 5

**Program Type:** PHYSICALLY HANDICAPPED  
DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
AGED  
TRAUMATICALLY BRAIN INJURED  
ALZHEIMERS

## II. METHODS OF INSPECTION

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

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: Requested

No. of staff interviewed and/or observed 5

No. of residents interviewed and/or observed 2

No. of others interviewed 0 Role: [REDACTED]

- 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.  
Incident Reports are no longer required to be submitted to LARA.
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- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
R 330.1803 (5), R 400.14204 (3)(b)(c), R 400.14205(3)(4), R 400.14208 (1),  
R 400.14301 (4)(9), R 400.14305 (3), R 400.14318 (5), R 400.14403 (1),  
R 400.14407(3), R 400.14408 (4), R 400.14507 (5), R 400.14511 (2)(4)
- 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.**

**(1) A facility that has a capacity of 4 to 6 clients shall be equipped with an interconnected multistation smoke detection system which is powered by the household electrical service and which, when activated, initiates an alarm that is audible in all areas of the home. The smoke detection system shall be installed on all levels, including basements, common activity areas, and outside each sleeping area, but excluding crawl spaces and unfinished attics, so as to provide full coverage of the home. The system shall include a battery backup to assure that the system is operable if there is an electrical power failure and accommodate the sensory impairments of clients living in the facility, if needed. A fire safety system shall be installed in accordance with the manufacturer's instructions by a licensed electrical contractor and inspected annually. A record of the inspections shall be maintained at the facility.**

- There was no record that the fire safety system had been inspected annually (2024), as required by the rule.

**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:**

- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**

- There was no record that Employee #1 had been trained in First Aid and CPR.
- **This is a REPEAT VIOLATION: See LSR Dated 02/28/2023.**

**R 400.14312      Resident medications.**

(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:

(b) Complete an individual medication log that contains all of the following information:

(i) The medication.

(ii) The dosage.

(iii) Label instructions for use.

(iv) Time to be administered.

(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

(vi) A resident's refusal to accept prescribed medication or procedures.

- Staff did not document when Resident A refused his prescribed topical medication (Miconazole).

**R 400.14318      Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

- During the second quarter of 2024, there was no record that fire drills had been conducted in the daytime and evening hours.
- During the third quarter of 2024, there was no record that fire drills had been conducted during the sleeping hours.
- During the fourth quarter of 2024, there was no record that fire drills had been conducted during the daytime, evening, or sleeping hours.
- **This is a REPEAT VIOLATION: See LSR Dated 02/28/2023.**

**R 400.14403          Maintenance of premises.**

(12) Sidewalks, fire escape routes, and entrances shall be kept reasonably free of hazards, such as ice, snow, and debris.

- The sidewalk leading to the front door was uneven, causing a tripping hazard.

**R 400.14407          Bathrooms.**

(1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.

- The small bathroom was not equipped with a window or a mechanical fan.

**R 400.14408          Bedrooms generally.**

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

- The non-locking against egress hardware on Resident B's bedroom door required repair.

**R 400.14511          Flame-producing equipment; enclosures.**

(4) Combustible materials shall not be stored in rooms that contain heating equipment, a water heater, an incinerator, or other flame-producing equipment.

- There were combustible materials and chemicals stored in the heat plant room.
- **This is a REPEAT VIOLATION: See LSR Dated 02/28/2023.**

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable written corrective action plan and an approved Environmental Health Inspection Report, renewal of the license is recommended.

*Mahtina Rubritius*

03/04/2025

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Mahtina Rubritius  
Licensing Consultant

Date