



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 7, 2025

Todd Olivieri
Cencare Foster Care Homes
1933 Churchill
Mt Pleasant, MI 48858

RE: License #: AS370011292
Cencare #3
1066 N. School Road
Weidman, MI 48893

Dear Mr. Olivieri:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance:
 - Please send updated *Health Care Appraisals* for Resident A and Resident B by May 20, 2025.
 - Continue to ensure there are monthly fire drills at the appropriate times and that Mr. Olivieri completes 16 hours of training per calendar year.

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) 335-5985.

Sincerely,

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
browningj1@michigan.gov - 989-444-9614

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

I. IDENTIFYING INFORMATION

License #:	AS370011292
Licensee Name:	Cencare Foster Care Homes
Licensee Address:	1933 Churchill Mt Pleasant, MI 48858
Licensee Telephone #:	(989) 773-6200
Licensee Designee:	Todd Olivieri
Administrator:	Todd Olivieri
Name of Facility:	Cencare #3
Facility Address:	1066 N. School Road Weidman, MI 48893
Facility Telephone #:	(989) 644-3664
Original Issuance Date:	08/01/1989
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED
Certified Programs:	DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/06/2025

Date of Bureau of Fire Services Inspection if applicable: Not applicable

Date of Environmental/Health Inspection if applicable: 01/29/2025

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Home manager C. Roberts

- 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.
The inspection was not done during meal times. The food at the facility appeared safe and free from spoilage and contamination, the food service equipment was in good repair, and the facility appeared equipped to prepare and serve adequate meals.
- 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: 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 400.14203 Licensee and administrator training requirements.**
- (1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:**
- (a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.**
- (b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.**

Licensee designee Todd Olivieri did not have 16 hours of training for 2023. Mr. Olivieri did complete 16 training hours for 2024.

- R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**
- (10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.**

Resident A and Resident B's resident record did not include an updated Health Care Appraisal. Resident A was due on March 15 and Resident B was due on April 16 for 2025.

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.

There was no fire drill completed in November 2024.

A corrective action plan was requested and approved on 05/06/2025. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license and special certification.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license and special certification are recommended.



Jennifer Browning
Licensing Consultant

5/7/2025

Date