GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 17, 2025

Justin Niemi
Clinton Creek Holdings, LLC
Ste 100, 840 Apollo St.
El Segundo, CA 90245

RE: License #: AH500387884
Investigation #: 2025A0585060
Clinton Creek Assisted Living

Dear Mr. Niemi:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action. Pease 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 contact the local office at (517) 335-5985.

Sincerely,

Brender L. Howard

Brender Howard, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street, P.O. Box 30664
Lansing, MI 48909
(313) 268-1788
enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AH500387884
Investigation #:	2025A0585060
Complaint Receipt Date:	06/03/2025
Investigation Initiation Date:	06/04/2025
Report Due Date:	07/03/2025
Licensee Name:	Clinton Creek Holdings, LLC
Licensee Address:	Ste 100 840 Apollo St. El Segundo, CA 90245
Licensee Telephone #:	(586)354-2700
Administrator:	Geralyn Cummings
Authorized Representative:	Justin Niemi
Name of Facility:	Clinton Creek Assisted Living
Facility Address:	40500 Garfield Road Clinton Township, MI 48038
Facility Telephone #:	(586) 354-2700
Original Issuance Date:	07/18/2019
License Status:	REGULAR
Effective Date:	08/01/2024
Expiration Date:	07/31/2025
Capacity:	62
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Facility has bed bugs.	No
Additional Findings	Yes

III. METHODOLOGY

06/03/2025	Special Investigation Intake 2025A0585060
06/04/2025	Special Investigation Initiated - On Site Conducted at the facility. Interviewed the administrator.
06/04/2025	Inspection Completed On-site Completed with observation, interview and record review.
06/04/2025	Inspection Completed-BCAL Sub. Compliance
06/17/2025	Exit Conference Conducted via email to authorized representative Justin Niemi and administrator Geralyn Cummings.

ALLEGATION:

Facility has bed bugs.

INVESTIGATION:

On 06/03/2025, the licensing department received an anonymous complaint from Adult Protective Service (APS) via BCHS online complaint. The complaint alleged that the resident was complaining of itching all over his body and he had bed bugs in his room. The complaint alleged that when staff complain, management is not taking it seriously. Due to the nature of the complaint, no additional information could not be obtained.

On 06/04/2025, an onsite visit was completed at the facility. I interviewed the administrator Geralyn Cummings who stated that they did not have a bed bug infestation. The administrator stated that a staff came to her from the midnight shift and said they saw a bug. She said they moved the resident(A) in that room to another room and washed all of his clothes. She said maintenance went in the room to inspect it but didn't see anything. She said maintenance checked the beds, checked the outlets, the blinds and took the bed down in the room that was suspected to have bed bugs. She said they also lifted the corner of the carpet to

inspect for bed bugs. She said that the pest control company was called. She said they have regular pest control that comes to the facility every month. She said that pest control didn't find any bed bugs. The administrator shared copies of the pest control invoice and pest control contract for review.

During the onsite, I interviewed Employee #1 at the facility. Employee #1 stated she has not seen any bed bugs and they do have a pest control that came out and sprayed the facility.

During the onsite, I interviewed Employee #2 at the facility. Employee #2's statement was consistent with the administrator and Employee #1 regarding bed bugs and pest control.

Resident A was sleep and he wasn't able to be interviewed. He was in his room.

I interviewed Resident B who stated there were ants in her room by the window but no bed bugs. She said that there was somebody spraying for insects.

I interviewed Resident C who stated that he dropped jelly one time, and ants were in his room. He said that he has not seen any pest control.

I interviewed Resident D who stated that she has not seen any bugs in her room.

During the onsite, rooms, kitchen and common areas were inspected. There were no bugs noted at that time.

I reviewed the invoice from the pest control company. The invoice showed that pest control was completed monthly. I interviewed the pest control contract showed that they will provide regularly scheduled service program designed to correct existing and prevent future pest problems covered under this agreement.

The Bed Bug inspection report showed that an intensive inspection for bed bugs was done on 06/03/2025 and none were found.

APPLICABLE RULE	
R 325.1978	**Insect and vermin control.**
	(1) A home shall be kept free from insects and vermin.(2) Pest control procedures shall comply with MCL 324.8301 et seq.

ANALYSIS:	The complaint alleged that the facility has bed bugs. The facility has contracted services with a local pest control company. Review of a recent invoice reveals the facility did not have bed bugs. Given these facts, the facility has reasonably complied with this rule.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ADDITIONAL FINDINGS

INVESTIGATION:

During the onsite, I observed Resident B and Resident D's beds both had assistive devices attached to the bed. These devices had a gap large enough for a limb to slip through causing an entrapment zone. Additionally, it was observed that the bed assistive devices were loose and shook easily.

APPLICABLE RULE	
R 325.1921	**Governing bodies, administrators, and supervisors.**
	(1) The owner, operator, and governing body of a home shall do all of the following: **(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.**

ANALYSIS:	The owner, operator, governing body did not assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents as evidenced by the following: At the time of my inspection, two residents had a device affixed to the bed frame. Resident B and Resident D had bed rail assist bars. These devices had a gap large enough for a limb to slip through causing an entrapment zone. Additionally, it was observed that that the bed assist devices were loose and shook easily. Resident B and Resident D's service plans lacked any information about the use of the device, nor is there any specific staff training for the use of this assistive device on or about the bed. While onsite, facility was unable to produce any physician's order for the bed rails. Upon inspection, it was discovered that the distance between the slats, horizontal or vertical supports between the perimeter of the bed rails, was large enough for a hand/foot or limb to fit through and cause possible entangling/entrapment. The facility had no manufacturer's guidelines for proper installation and use of the bed device in the resident's record.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION:

The administrator shared copies of the service plan for Resident B and Resident D. The service plan was reviewed and there was nothing that showed the need for an assistive device.

APPLICABLE RULE	
R 325.1922	**Admission and retention of residents.**
	(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.
R 325.1901	**Definitions.**
	21) "Service plan" means a written statement prepared by the home in cooperation with a resident and/or the

	resident's authorized representative or agency responsible for a resident's placement, if any, and that identifies the specific care and maintenance, services, and resident activities appropriate for each individual resident's physical, social, and behavioral needs and well-being and the methods of providing the care and services while taking into account the preferences and competency of the resident.
ANALYSIS:	Service plans for Resident B and Resident D with assistive devices on or about the bed either completely omit or lack vital information pertaining to the devices. The plans must contain information for the specific care and maintenance in using the various devices as well as include methods of providing the care and services regarding implementation in the use of the device, including a means for the resident to summon staff, methods for on-going monitoring of the resident, methods of monitoring the equipment by trained staff for maintenance of the device and for monitoring measurements of gaps to protect the resident from the possibility of physical harm related to entrapment, entanglement, strangulation, etc.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license

06/17/2025

Brender Howard Date
Licensing Staff

Approved By:

06/17/2025

Andrea L. Moore, Manager Date
Long-Term-Care State Licensing Section