



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 31, 2025

Patrice Weber
Portland Assisted Living & Memory Center, LLC
11284 W. Culter Rd.
Portland, MI 48875

RE: License #: AM340396420
Portland Assisted Living & Memory Manor
233 Charlotte Hwy
Portland, MI 48875

Dear Ms. Weber:

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 of the following:
 1. Pictures of posted emergency plan
 2. Updated fire drill form
 3. Updated weight form
 4. Medical clearances for direct care workers identified
 5. Workforce background clearances for direct care workers identified
 6. CPR certificates for direct care workers identified
 7. Annual health review for direct care worker identified

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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,

A handwritten signature in black ink, appearing to read 'Amanda Blasius', written in a cursive style.

Amanda Blasius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #: AM340396420

Licensee Name: Portland Assisted Living & Memory Center, LLC

Licensee Address: 223 Charlotte Highway
Portland, MI 48875

Licensee Telephone #: (517) 643-2073

Licensee/Licensee Designee: Patrice Weber, Designee

Administrator: Patrice Weber

Name of Facility: Portland Assisted Living & Memory Manor

Facility Address: 233 Charlotte Hwy
Portland, MI 48875

Facility Telephone #: (517) 643-2073

Original Issuance Date: 05/02/2019

Capacity: 9

Program Type: AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/30/2025

Date of Bureau of Fire Services Inspection if applicable: 4/17/2025

Date of Health Authority Inspection if applicable: NA

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 5

No. of others interviewed [redacted] 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. Funds are not kept on file for residents
- 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:
10/18/2023: as204(3)(g) as307(3) as318(5) as408(4) as318(1) 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 400.713 License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.

(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and (11), the department shall issue or renew a license if satisfied as to all of the following:

(e) The good moral character of the licensee or licensee designee, owner, partner, director, and person responsible for the daily operation of the facility. The applicant is responsible for assessing the good moral character of the employees of the facility. The person responsible for the daily operation of the facility shall be not less than 18 years of age.

At the time of inspection, direct care workers, Kristin Ouelette, Faith Smith, Summer Delafuente and Tracie Dawson-Lower did not have a workforce background clearances completed for Portland Assisted Living and Memory Manor.

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:

(c) Cardiopulmonary resuscitation.

At the time of inspection, direct care workers, Kristin Ouelette, Faith Smith, Summer Delafuente and Tracie Dawson-Lower did not have current cardiopulmonary resuscitation certificates on file.

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

At the time of inspection, direct care workers, Kristin Ouelette, Faith Smith and Summer Delafuente did not have verification of a completed statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of their physical health.

R 400.14208 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:
(f) Verification of reference checks.

At the time of inspection, direct care workers, Kristin Ouelette and Faith Smith did not have verification of reference checks within their file.

R 400.14208 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:
(h) Medical information, as required.

At the time of inspection, direct care worker, Tracie Dawson-Lower did not have medical information on file for 2025.

R 400.14310 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.

At the time of inspection, Resident A was missing weight documentation for the months of March, June and October of 2024 and January of 2025. Resident B was missing weight records for June and October of 2024 and January of 2025.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(1) A licensee shall have a written emergency procedure and evacuation plan to be followed in case of fire, medical, or severe weather emergencies. The evacuation plan shall be prominently posted in the home. Residents who require special assistance shall be identified in the written procedure.

At the time of inspection, an evacuation plan was not prominently posted in the home.

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.

At the time of inspection, fire drills were not documented in 2024 for the following months: September, October, November and December. A fire drill was not documented for January 2025, which should have been an evening drill.

A corrective action plan was requested and approved on 10/30/2025. 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.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.



10/31/2025

Amanda Blasius
Licensing Consultant

Date