



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 17, 2026

Howard Barriger  
Maple Ridge Manor Of Lowell  
12020 Foreman St  
Lowell, MI 49331

RE: License #: AH410400509  
**Maple Ridge Manor Of Lowell**  
**12020 Foreman St**  
**Lowell, MI 49331**

Dear Howard Barriger:

Attached is the 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 home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, the status of the license will remain unchanged. If you fail to submit an acceptable corrective action plan, disciplinary action will result. Please 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 feel free to contact the local office at (517) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Kimberly Horst".

Kimberly Horst, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
Lansing, MI 48909

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH410400509
<b>Licensee Name:</b>	Maple Ridge Manor Of Lowell Land Holdings, LLC
<b>Licensee Address:</b>	12054 Foreman St Lowell, MI 49331
<b>Licensee Telephone #:</b>	(989) 903-5405
<b>Authorized Representative:</b>	Howard Barriger
<b>Administrator:</b>	Heather Kramer
<b>Name of Facility:</b>	Maple Ridge Manor Of Lowell
<b>Facility Address:</b>	12020 Foreman St Lowell, MI 49331
<b>Facility Telephone #:</b>	(989) 903-5405
<b>Original Issuance Date:</b>	09/04/2020
<b>Capacity:</b>	83
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/16/2026

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 04/17/2026

No. of staff interviewed and/or observed 7  
No. of residents interviewed and/or observed 15  
No. of others interviewed 0 Role N/A

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. Resident funds not kept in trust.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Diaster plans reveiwed and staff interviewed.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:
- Number of excluded employees followed up? N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<p><b>(7) An individual admitted to residence in the home shall have evidence of initial tuberculosis (TB) screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. The screening type and frequency of routine TB testing must be determined by a risk assessment as described in the 2005 Morbidity and Mortality Weekly Report (MMWR) "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005" (<a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a>), and the 2019 update to these recommendations as described in the 2019 MMWR "Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019" (<a href="http://dx.doi.org/10.15585/mmwr.mm6819a3">http://dx.doi.org/10.15585/mmwr.mm6819a3</a>.) A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.</b></p>
Review of Resident B and Resident E's records revealed the residents did not have a TB test prior to admission to the facility.	
<b>R 325.1923</b>	<b>Employee's health.</b>
	<p><b>(2) A home shall provide initial TB screening at no cost for its employees. New employees shall be screened within 10 days after hire and before occupational exposure. The screening type and frequency of routine TB testing must be determined by a risk assessment as described in the 2005 MMWR "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005" (<a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a>), Appendices B and C, and the 2019 update to these recommendations as described in the 2019 MMWR "Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019"</b></p>

	<p>(<a href="http://dx.doi.org/10.15585/mmwr.mm6819a3">http://dx.doi.org/10.15585/mmwr.mm6819a3</a>.) These guidelines are adopted by reference and available free of charge at the links specified in this subrule. A copy of these guidelines is available for inspection and distribution from the Bureau of Community and Health Services, Department of Licensing and Regulatory Affairs, at 611 West Ottawa Street, P.O. Box 30664, Lansing, Michigan 48909 at a cost of 15 cents per page as of the time of the adoption by reference of these guidelines. A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.</p>
	<p>Review of staff person 2 (SP2), SP4, and SP7's records revealed the facility did not have a TB test 10 days before occupation exposure.</p>
<b>R 325.1931</b>	<b>Employees; general provisions.</b>
	<p><b>(2) A home shall treat a resident with dignity and his or her personal needs, including protection and safety, shall be attended to consistent with the resident's service plan.</b></p>
	<p>Review of Resident D's service plan revealed it was not current of Resident D's current care needs as evidenced by the service plan read, "<i>Resident takes his blood sugar in his room. Document the latest 3 readings 2 times a day.</i>" However, review of Resident D's medication administration record (MAR) revealed that the facility was not taking the blood sugar.</p>
<b>R 325.1931</b>	<b>Employees; general provisions.</b>
	<p><b>(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:</b></p> <ul style="list-style-type: none"> <li><b>(a) Reporting requirements and documentation.</b></li> <li><b>(b) First aid and/or medication, if any.</b></li> <li><b>(c) Personal care.</b></li> <li><b>(d) Resident rights and responsibilities.</b></li> <li><b>(e) Safety and fire prevention.</b></li> <li><b>(f) Containment of infectious disease and standard precautions.</b></li> </ul>

Review of SP1 and SP4's employee records revealed the facility did not have record of the required staff training records.	
<b>R 325.1932</b>	<b>Resident's medications.</b>
	<b>(2) Prescribed medication managed by the home must be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed healthcare professional.</b>
Review of Resident B's MAR revealed Resident B was prescribed Lorazepam Tab 0.5mg with instruction to administer one tablet by mouth every four hours as needed for anxiety. Review of Resident B's service plan lacked detailed information on how the resident demonstrates anxiety and what behaviors require the administration of the medication or if staff can use nonpharmaceutical interventions. Similar findings were noted with Resident C and Resident E.	
<b>R 325.1953</b>	<b>Menus.</b>
	<b>(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.</b>
Inspection of the facility revealed there was no therapeutic menu posted.	
<b>R 325.1970</b>	<b>Water supply systems.</b>
	<b>(7) The temperature of hot water at plumbing fixtures used by residents shall be regulated to provide tempered water at a range of 105 to 120 degrees Fahrenheit.</b>
Review of facility documentation and testing of the water temperatures revealed the sink in the memory care was above 120 degrees Fahrenheit.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(1) A home shall have a kitchen and dietary area of adequate size to meet food service needs of residents. It shall be arranged and equipped for the refrigeration, storage, preparation, and serving of food, as well as for dish and utensil cleaning and refuse storage and removal.</b>
Inspection of the facility kitchen revealed the dishwasher sanitized with a heat cycle Inspection of documentation revealed the facility had no record of testing the heat	

sanitation. The lack of routine checks does not reasonably protect residents from infection should the machine malfunction.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.</b>
Inspection of the facility kitchen revealed that the kitchen contained items that were opened, unsealed, and were not dated (including but not limited to avocado, chocolate chips, and peanuts).	
<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(2) A room shall be provided in the home or on the premises for equipment and furniture maintenance and repair and storage of maintenance equipment and supplies.</b>
Inspection of the facility revealed the facility had furniture items stored in the laundry area.	

#### IV. RECOMMENDATION

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

*Kimberly Host*

04/17/2026

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Licensing Consultant

\_\_\_\_\_  
Date