

April 24, 2026

Lorraine Morales
1050 W. Colonial Park
Grand Ledge, MI 48837

RE: License #: AS340400717
Four Seasons Adult Assisted Living
7555 Knox Road
Portland, MI 48875

Dear Lorraine Morales:

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 or licensee designee

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) 335-5985.

Sincerely,



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 #: AS340400717

Licensee Name: Lorraine Morales

Licensee Address: 1050 W. Colonial Park
Grand Ledge, MI 48837

Licensee Telephone #: (517) 622-0313

Licensee/Licensee Designee: Lorraine Morales

Administrator: Lorraine Morales

Name of Facility: Four Seasons Adult Assisted Living

Facility Address: 7555 Knox Road
Portland, MI 48875

Facility Telephone #: (517) 526-1195

Original Issuance Date: 11/14/2019

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/23/2026

Date of Bureau of Fire Services Inspection if applicable: NA

Date of Health Authority Inspection if applicable: 01/15/2026

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 3

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. No funds kept on file
- 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:
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 400.629 Direct care staff; qualifications and training.

(4) 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 trained and competent in all of the following areas before performing assigned tasks independently:

(c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training.

At the time of inspection, direct care worker, Catherine Myers did not have current hands-on demonstration on file.

R 400.645 Environmental health.

(3) A licensee shall provide hot and cold running water under pressure. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the fixture.

At the time of inspection, the water temperature was tested and measured at 100 degrees Fahrenheit.

R 400.675 Resident medications.

(1) Medication must be given, taken, or applied as prescribed, ordered, or directed by an appropriately licensed health care professional.

At the time of inspection, the over-the-counter pressure sore relief healing cream was located in Resident A's medication drawer. No documentation was available for review confirming it was prescribed or order by a licensed health care professional. No documentation was available within Resident A's medication administration record for the pressure sore relief healing cream. Direct care worker, Catherine Myers reported that she bought the cream at the store for Resident A. She reported that it was never administered to Resident A.

At the time of inspection, two creams were located in Resident A's medication drawer, Ammonium Lactate 12%. One bottle was dated 01/12/2026 and stated apply to both feet once daily and the other bottle was dated 9/10/2025 and stated apply topically to the right and left feet and toenails daily. No documentation was listed on the medication administration record for Resident A that the order was discontinued. The prescribed creams were not listed on Resident A's April, 2026 medication administration record despite being located in Resident A's medication drawer.

R 400.675 Resident medications.

(7) Prescription medication that is no longer required by a resident or expired must be properly disposed of.

At the time of inspection, ten prescribed medications were found for Resident A that were no longer required by Resident A. Six of Resident A's prescribed medications expired.

R 400.685 Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.

At the time of inspection, Resident A did not have health care appraisal on file for the annual review period of 2025.

R 400.685 Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident, resident's designated representative, or responsible agency at least annually or more often if necessary. Any changes to the resident care agreement must be re-signed by all applicable parties. If the annual review results in no changes to the resident care agreement the resident care agreement does not need to be re-signed but the licensee shall document that all applicable parties were contacted and agreed that no changes were necessary.

At the time of inspection, Resident A did not have a Resident Care Agreement for the reporting period of 2025 on file.

R 400.729 Heating equipment.

(2) A furnace, water heater, heating appliances, pipes, wood-burning stoves and furnaces, and other flame- or heat-producing equipment must be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and maintained in a safe condition. Clothes dryers must be properly vented to the outside using permanent metal duct work.

At the time of inspection, Four Seasons Adult Assisted Living did not have a hard metal duct installed for their dryer. At the time of inspection, a furnace inspection was not on file for 2024-2026.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.



04/24/2026

Amanda Blasius
Licensing Consultant

Date