



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 2, 2026

Jennia Cook
Community Health Care Management
1805 E Jordan
Mt. Pleasant, MI 48858

RE: License #: AM370085651
Country Place II
1807 E. Jordan
Mount Pleasant, MI 48858

Dear Ms. Cook:

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 by submitting pictures to show the repairs were done on the wall in Resident B's room.
- A bed frame was placed in Resident A's room or a physicians letter to determine he does not require a bed in his room.
- CAP compliance has been received regarding 647.12 showing the deck has been completed.

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 #:	AM370085651
Licensee Name:	Community Health Care Management
Licensee Address:	2033 Westbrook Ionia, MI 48846
Licensee Telephone #:	(989) 773-6320
Licensee Designee:	Jennia Cook
Administrator:	Jennia Cook
Name of Facility:	Country Place II
Facility Address:	1807 E. Jordan Mount Pleasant, MI 48858
Facility Telephone #:	(989) 773-6320
Original Issuance Date:	07/02/2001
Capacity:	10
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED ALZHEIMERS
Certified Programs:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/28/2026

Date of Bureau of Fire Services Inspection if applicable: 11/13/2025

Date of Health Authority Inspection if applicable: 11/3/2025

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 9

No. of others interviewed Role:

- 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:
Missing fire drills were addressed in SI 2026A1029001 and cited in that investigation. 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 400.647	Safety and maintenance of premises.
	(12) Stairway risers and treads must be a uniform and consistent size. Stairways that form a part of a required means of egress must change direction at landings only. Spiral staircases and staircases that incorporate wedge-shaped steps are not allowed as a part of a required means of egress. This subrule does not apply to family or congregate facilities licensed on or before promulgation of these rules that have been continuously licensed.
The deck stairs entering the facility had one board that was not secured causing a trip hazard. Ms. Cook sent a picture on 06/01/2026 showing the deck stairs were redone showing CAP compliance for this violation.	
R 400.647	Safety and maintenance of premises.
	(4) Roofs, exterior walls, doors, skylights, and windows must be weathertight and watertight and maintained in good repair.
Resident B's bedroom has a hole in the wall that needs repaired.	
R 400.661	Bedroom furnishings.
	(1) Bedroom furnishings must include all of the following: (a) A bed that is not less than 36 inches wide and not less than 72 inches long with a foundation that is clean, in good condition, and provides adequate support.
Resident A did not have a bed frame, his mattress was on the floor, and there was no foundation for the mattress.	

A corrective action plan was requested and approved on 05/28/2026. 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

Jennifer Browning
Licensing Consultant

06/02/2026
Date