

GRETCHEN WHITMER
GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 22, 2021

Dionissia Sinning The Arbor Inn 14030 E Fourteen Mile Rd. Warren, MI 48088

> RE: License #: AH500236728 Investigation #: 2022A0585017 The Arbor Inn

Dear Ms. Sinning:

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.

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 contact the local office at (517) 284-9730.

Sincerely,

Brender Howard, Licensing Staff

Bureau of Community and Health Systems

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 #:	AH500236728
Investigation #:	2022A0585017
Commissint Descript Date:	40/00/0004
Complaint Receipt Date:	12/22/2021
Investigation Initiation Date:	12/22/2021
investigation initiation bate.	12/22/2021
Report Due Date:	02/21/2022
Licensee Name:	The Warren Arbor Co.
Licensee Address:	14030 E 14 Mile Rd.
	Warren, MI 48088
Licenses Telephone #	(596) 206 2260
Licensee Telephone #:	(586) 296-3260
Authorized	Dionissia Sinning
Representative/Administrator:	Diomissia omining
Name of Facility:	The Arbor Inn
Facility Address:	14030 E Fourteen Mile Rd.
	Warren, MI 48088
Facility Talanhana #	(586) 296-3260
Facility Telephone #:	(380) 290-3200
Original Issuance Date:	06/01/1999
July 100 days 100 day	
License Status:	REGULAR
Effective Date:	01/28/2021
	0.4.107.100.00
Expiration Date:	01/27/2022
Canacity	138
Capacity:	130
Program Type:	AGED
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### II. ALLEGATION(S)

### Violation Established?

The facility received a fire safety disapproval rating.	Yes
Additional Findings	No

### III. METHODOLOGY

12/22/2021	Special Investigation Intake 2022A0585017
12/22/2021	Special Investigation Initiated - Telephone Contacted fire inspector Brian Batten to discuss disapproval rating.
12/22/2021	Inspection Completed-BCAL Sub. Compliance
12/22/2021	Contact – Telephone call made. Contacted administrator/authorized representative Dionissia Sinning.
12/22/2021	Exit Conference. Conducted with authorized representative Dionissia Sinning.

#### ALLEGATION:

The facility received a fire safety disapproval rating.

### **INVESTIGATION:**

The department received an annual fire inspection report from the Bureau of Fire Services. State Fire Marshal Brian Batten completed an inspection at the facility on 12/17/21 issuing a "Disapproved" certification. The deficiencies in the report notes that the last inspection (9/17/21) was not satisfactorily corrected.

I reviewed the inspection reports dated 9/17/21 and 12/17/21.

The report dated 9/17/21 read:

Must conduct fire drills on all 3 shifts by the end of September for the 3rd quarter

All automatic sprinkler and standpipe systems required by this code shall be inspected, tested and maintained in accordance with NFPA 25, Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems. All required documentation regarding the design of the fire protection system and the procedures for maintenance, inspection, and testing of the fire protection system shall be maintained at an approved, secured location for the life of the fire protection system. 9.7.5, 9.7.8

Butterfly valves on sprinkler supply line are not electronically monitored.

The health care facility or authorized representative shall ensure that the electrical wiring and equipment, including an emergency electrical supply if installed, complies with the applicable provisions of the Michigan Electrical Code, R 408.30801 of the Michigan Administrative Code. R29.1807 Rule 7.

Kitchen - remove extension cord to plate warmer A door normally required to be kept closed shall not be secured in the open position at any time and shall be self-closing or automatic closing in accordance with 7.2.1.8.2, unless otherwise permitted by 7.2.1.8.3. 7.2.1.8.1

Clean linen door in laundry room did not self-close to a positive latch employee break area and time clock corridor door held open with a wire mechanical room double doors need the coordinator that has been removed replaced.

Door 34 to chapel needs a closing device replaced Door 35 to chapel needs a closing device replaced

Penetrations for cables, cable trays, conduits, pipes, tubes, combustion vents and exhaust vents, wires, and similar items to accommodate electrical, mechanical, plumbing, and communications systems that pass through a wall, floor, or floor/ceiling assembly constructed as a fire barrier shall be protected by a firestop system or device.

Seal above ceiling penetrations along east corridor where sprinkler pipe penetrates wall.

Seal above ceiling penetrations above door 39

Seal above ceiling penetrations above door 41

Seal above ceiling penetrations above the medication room door located across from the 400 corridor.

The report dated 12/17/21 read:

The requirement to conduct fire drills on all three shifts by the end of September for the 3rd quarter was not completed.

As of the date of this report only one fire drill was logged in the 4th quarter, with no informational paperwork to accompany it.

Management was told to conduct drills on all three shifts before the end of the year.

Maintenance supervisor complained that covid has caused a rapid turnover of staff, causing them to delay fire drills. Management was informed that covid should not prevent quarterly fire drills on each shift. if needed, additional fire drills will need to be done to train new staff members.

Failed to have butterfly valves on sprinkler supply line connected to the fire alarm system. Failed to comply with requirement to have fire dampers inspected/tested within a 4-year period.

Mechanical room double doors need a coordinator (maintenance failed to obtain one) clean linen door inside the laundry room did not self-close and latch above ceiling penetrations were not sealed along east corridor where sprinkler pipe penetrates the wall above door 39 above door 41 above med.rm across from 400 corridor.

On 12/22/21, I interviewed State Fire Marshal Brian Batten by telephone. Mr. Batten stated that he completed his inspection at the facility on 12/17/21 and found that facility has not made the corrections that was previously cited on 9/17/21

On 12/22/21, I interviewed the administrator Dionissia Sinning by telephone. Ms. Sinning stated that all violations are in the process of being corrected. She stated they had a new maintenance man who is still learning, and they are making sure that everything is done correctly.

APPLICABLE RULE		
R 325.1917	Compliance with other laws, codes, and ordinances.	
	(2) A home shall comply with the department's health care facility fire safety rules being R 29.1801 to R 29.1861 of the Michigan Administrative Code.	

CONCLUSION:	VIOLATION ESTABLISHED
ANALYSIS:	The facility has not provided an acceptable plan of correction to the Bureau of Fire Services with a timeline identified for completion of the project. A "disapproved" rating is not consistent with this rule.

On 12/22/21, I conducted an exit conference with the authorized representative Dionissia Sinning. She stated that they are in the process of completing everything that needs to be done.

### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged. Failure to provide an acceptable plan may result in disciplinary action.

Grander J. Howard	12/29/2021
Brender Howard Licensing Staff	Date
Approved By:	
(more of maore	12/29/2021
Andrea L. Moore, Manager Long-Term-Care State Licensing	Date Section