

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 17, 2022

RSR Serenity LLC 25591 Abbey Dr Novi, MI 48374

> RE: License #: AM500408373 Investigation #: 2022A0990020

> > Sandalwood Village I

Attached is the Special Investigation Report for the above referenced facility. Due to the severity of the violations, disciplinary action against your license is recommended. A recommendation of revocation is also being made in special investigation #2022A0617009. You will be notified in writing of the department's action and your options for resolution of this matter.

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 (248) 975-5053.

Sincerely,

J. Reed

LaShonda Reed, Licensing Consultant Bureau of Community and Health Systems Cadillac Place, Ste 9-100 Detroit, MI 48202 (586) 676-2877

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AM500408373
I and a discount	00004000000
Investigation #:	2022A0990020
Complaint Receipt Date:	01/04/2022
Complaint Recorpt Bate.	0 170 172022
Investigation Initiation Date:	01/05/2022
Report Due Date:	03/05/2022
Licensee Name:	RSR Serenity LLC
Licensee Name.	NON OCICINITY LEO
Licensee Address:	47640 Gratiot Avenue
	Chesterfield, MI 48051
	(700) 0 (0 0000
Licensee Telephone #:	(586) 949-6220
Administrator:	Unknown
Administrator.	Officiowii
Licensee Designee:	Unknown
Name of Facility:	Sandalwood Village I
Facility Address:	47640 Gratiot Avenue
Facility Address.	Chesterfield, MI 48051
Facility Telephone #:	(586) 949-6220
	14/02/0204
Original Issuance Date:	11/30/2021
License Status:	TEMPORARY
	TENN OTO WET
Effective Date:	11/30/2021
Expiration Date:	05/30/2022
Capacity:	12
Capacity.	12
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	AGED
	TRAUMATICALLY BRAIN INJURED ALZHEIMERS
	ALLI ILIIVILI\U

II. ALLEGATION(S)

Violation Established?

The doors that have the 15 seconds delayed egress have not been disabled and the doors are unable to open.	Yes
The exit door between this facility and Sandalwood Village II has no signage on it stating that it is not an exit. The exit sign is covered.	Yes

III. METHODOLOGY

01/04/2022	Special Investigation Intake 2022A0990020
01/05/2022	Special Investigation Initiated - On Site I conducted an unannounced onsite at Sandalwood Village. I interviewed Shaundria Washington-Med Tech and David Reynaert-cook/maintenance worker.
01/05/2022	Contact – Document Received I received the Disapproved Rating from the Bureau of Fire Safety (BFS) report from Brian Batten, BFS inspector.
01/06/2022	APS Referral Adult Protective Services (APS) referral made. I was contacted by Jamie Wyatt, APS investigator for further information.
01/07/2022	Contact - Document Sent I requested several documents from Jennifer Morgan-proposed new licensee designee/administrator.
01/10/2022	Contact - Telephone call received I conducted a phone interview with Jennifer Morgan-proposed licensee designee/administrator, Monika Sarin - owner and Donitia Strickland, owner.
01/10/2022	Contact - Document Sent I emailed Brian Batten, BFS inspector. Mr. Batten responded via email.

01/11/2022	Contact – Document received I received documents requested from Ms. Morgan.
02/17/2022	Exit conference I conducted an exit conference with Jennifer Morgan, acting licensee designee/administrator, Monika Sarin- Owner and Donitia Strickland, manager of Sandalwood Valley I & II and newly proposed licensee designee/administrator. The meeting included licensing consultants Kristine Cilluffo and Eric Johnson.

ALLEGATION:

- The doors that have the 15 seconds delayed egress have not been disabled and the doors are unable to open.
- The exit door between this facility and Sandalwood Village II has no signage on it stating that it is not an exit. The exit sign is covered.

INVESTIGATION:

On 01/04/2022, Brian Battan, BFS Inspector contacted Denise Nunn, Area Manager indicating that there were major concerns regarding the BFS inspections conducted onsite. I was advised to begin an investigation as the assigned licensing consultants were on vacation.

On 01/05/2022, I conducted an unannounced onsite investigation. I interviewed Shaundria Washington-Med Tech and David Reygaert-cook/maintenance. Donitia Strickland, assistant manager arrived shortly thereafter and was briefly interviewed.

I was informed by Ms. Washington that there are a total of 17 residents (combined buildings) and three direct caregivers present. The staff were not able to distinguish which part of the building belonged to each license number and addressed the building as one unit. Ms. Washington is aware that these are fire and safety violations.

During the onsite investigation, Ms. Washington informed me that she was working as a caregiver today as well as direct care staff Ashley Massa. A third caregiver was observed but a name was not provided.

During the onsite, I observed the exits were locking against egress. A code is required to exit the building. I observed that the push exit button was non-operable. I observed several residents sitting at tables and living room areas throughout the home.

I interviewed Mr. Reygaert who was in the kitchen preparing lunch. Mr. Reygaert said that he has worked at the company as a maintenance worker for seven years and has acted as the cook for two weeks. Mr. Reygaert also said that he worked as a cook for six months as well as maintenance but more as a cook recently. Mr. Reygaert said that

on last Friday 12/31/2021, when he arrived at the facility, Jennifer Morgan the proposed licensee designee/administrator informed him that she was leaving for Las Vegs for vacation. Mr. Reygaert said that his last day working for the company is tomorrow 01/06/2022. The company has changed, and he is the last staff working that worked under the previous owners. Mr. Reygaert said that there is a high staff turnover, lack of staff training and the new administration does not listen to concerns. Mr. Reygaert has requested tools and a ladder, but they have not been provided. Mr. Reygaert was present during the Bureau of Fire Safety (BFS inspection) and there were several violations.

I interviewed Donitia Strickland, who arrived and is the assistant manager at other facilities (Sandalwood Valley) operated by this corporation. Ms. Strickland said that she was present yesterday at this facility for the BFS inspection as well as the other Sandalwood's inspections and is aware of the violations.

On 01/10/2022, I conducted a phone interview with Jennifer Morgan-proposed licensee designee/administrator, Monika Sarin-owner and Donitia Strickland, assistant manager. Ms. Morgan indicated that before this past Christmas, she received an email from Larry DeWatcher-BFS Supervisor following-up on the work permits needed to fix all the exit doors. Monika Sarin indicated that during the last inspection around September 2021 during the closing of the selling of the properties to her company, she was made aware that 14 doors needed to be fixed. Ms. Sarin said this process had been started however, the vendor that is addressing the matter which is Compass Communications Group (contact person Robin Rosier) was in the process of completing the work orders and permits to repair the doors. Ms. Sarin said that they cannot repair the doors unless the permits and paperwork are done by the vendor. I advised that they needed to follow-up with their vendor or locate a new vendor. According to Ms. Sarin, in the event that smoke is detected in the building, the doors automatically unlock, and no keypad pin is required.

On 01/10/2022, I emailed Brian Batten, BFS inspector. Mr. Batten responded via email. Mr. Batten said that the push button on the wall next to the door is not code compliant. A resident or visitor must be able to open the door when twisting a door handle/knob or pushing on a panic bar. Mr. Batten said that by twisting a handle/knob or pushing a panic bar on the door for 3-seconds, an irreversible process begins, and the door unlocks in 15-seconds, allowing the door to open. Mr. Batten said that signage on the door tells the resident or visitor the process that the door may be alarmed. Mr. Batten said that the company installing new devices must submit paperwork to the Bureau of Fire Services and Bureau of Construction Codes (or local building authority having jurisdiction) detailing the type of equipment that is being installed. Mr. Batten said that the company must coordinate installation with the Fire Alarm Vendor to ensure that the hardware/devices are connected to the fire alarm system. The fire alarm company must be Act 144 certified. Mr. Batten said that the door locks must release as described above if there is a water-flow from the sprinkler system and/or an activation of the fire alarm system by a smoke detector. The previous owner appealed the violation to the State Fire Marshal and was disapproved and ordered to correct the violation. Mr.

Batten said that when he spoke to the janitor (David Reynaert) during the last inspection, he stated that the new owner wanted him to install the panic bars and 15 second delay. He told them he was not qualified.

On 01/07/2022, I reviewed the disapproved Rating from the Bureau of Fire Safety (BFS) report from Brian Batten, BFS inspector. In review of the BFS report the inspector documented that the person and or company, firm installing and/or altering the door locking systems in the facility must be registered with the state to perform such work. The inspector documented that the paperwork for the fire drills were not available onsite. The exterior doors are locked with access codes required to exit and the door release buttons on the wall next to each exit door have been disabled. The exit sign between Sandalwood I and Sandalwood II has signage on it indicating that it is not an exit, and the exit sign is covered. The inspector noted that in 2020, the facility was notified of these violations and ordered to correct the door locking to provide egress after no more than a 15 second delay.

On 01/11/2022, I received documents from Ms. Morgan. I observed that on 01/07/2021 the facility fire extinguishers, sprinkler, and alarms examined by Brave Fire Protection LLC and were approved. I reviewed the resident registers and there are eight residents in care.

On 02/17/2022, I conducted an exit conference with Jennifer Morgan, acting licensee designee/administrator, Monika Sarin- Owner and Donitia Strickland, manager of Sandalwood Valley I & II and newly proposed licensee designee/administrator. The meeting included licensing consultants Kristine Cilluffo and Eric Johnson. We discussed the findings of each investigation and the disciplinary action process.

APPLICABLE RULE		
R 400.14403	Maintenance of premises.	
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.	
ANALYSIS:	Based on the investigation conducted, there is violation of maintenance of premises due to the facility not being in compliance with the BFS inspection on 01/04/2022. On 01/05/2022, I observed the egress doors are obstructed and require a pin number to be input on the keypad to exit the premises. A staff person must enter a pin number on the keypad to unlock the door. I observed that the push exit button did not open the exit doors.	

According to the BFS report, the inspector documented exit sign between Sandalwood I and Sandalwood II was covered.	
	The BFS inspection report dated 1/4/2022, received a disapproved due to the violations cited and Mr. Batten noted the required repairs needed.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

A recommendation of revocation is also being made in special investigation #2022A0617009, which remains in effect.

L. Reed	02/17/2022
LaShonda Reed Licensing Consultant	Date
Approved By:	
Denice G. Hunn	02/18/2022
Denise Y. Nunn Area Manager	Date