



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 24, 2022

Daryl Miron
Lakeview Assisted Living, LLC
1100 N Lake Shore Dr
Gladstone, MI 49837

RE: License #: AM210386346
Investigation #: 2022A0221012
Lakeview Assisted Living III, LLC

Dear Mr. Miron:

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 the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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 (906) 226-4171.

Sincerely,

A handwritten signature in black ink, appearing to read "Theresa Norton". The signature is fluid and cursive, with a large loop at the end.

Theresa Norton, Licensing Consultant
Bureau of Community and Health Systems
234 West Baraga
Escanaba, MI 49855
(906) 280-2519

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM210386346
Investigation #:	2022A0221012
Complaint Receipt Date:	02/16/2022
Investigation Initiation Date:	02/17/2022
Report Due Date:	04/17/2022
Licensee Name:	Lakeview Assisted Living, LLC
Licensee Address:	1100 N Lake Shore Dr Gladstone, MI 49837
Licensee Telephone #:	(906) 428-7000
Administrator:	Daryl Miron, Administrator
Licensee Designee:	Daryl Miron, Designee
Name of Facility:	Lakeview Assisted Living III, LLC
Facility Address:	1100 N. Lake Shore Drive Gladstone, MI 49837
Facility Telephone #:	(906) 428-7000
Original Issuance Date:	12/21/2017
License Status:	REGULAR
Effective Date:	06/21/2020
Expiration Date:	06/20/2022
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Fire drills not being conducted properly.	Yes
Additional Findings	No

III. METHODOLOGY

02/16/2022	Special Investigation Intake 2022A0221012
02/17/2022	Special Investigation Initiated - Telephone Phone call to Complainant.
02/17/2022	Inspection Completed On-site
02/17/2022	Contact - Face to Face Interview with Administrator Courtney Wiltzius, Nurse Amy Gagne, Staff Kathy Olsen, and Staff Helen Brandt.
02/17/2022	Contact - Document Received Staff schedule received.
03/03/2022	Contact - Face to Face Interviews with Staff Dawn Sandberg, Daisy Johnson, and Letisha Lavigne.
03/03/2022	Contact - Face to Face Interview with Licensee Designee Daryl Miron, Administrator Courtney Wiltzius, and Nurse Amy Gagne.
03/03/2022	Exit Conference Exit interview with Administrator Courtney Wiltzius.

ALLEGATION: Fire drills not being conducted properly.

INVESTIGATION: The complainant reports that fire drills are not being conducted properly in the facility. The complainant stated that residents are not evacuating the building. The complainant stated, "I know that's against the law."

On 02/27/2022, Consultant Maria DeBacker and I conducted an unannounced on-site inspection at the facility. We met with Administrator Courtney Wiltzius and Nurse Amy Gagne. Ms. Wiltzius produced the documented fire drills for the facility. The documented drills were written as conducted at the proper times of one per shift, per quarter, along with the times of evacuation. When asked where the meeting point was for the residents, Ms. Wiltzius stated that residents go and stand in front of the nearest exit doors. When asked to clarify, Ms. Wiltzius stated, "They don't go outside."

On 02/27/2022 and 03/03/2022, six staff (Kathy Olsen, Helen Brandt, Dawn Sandberg, Daisy Johnson, and Letisha Lavigne) were interviewed. All staff reported that residents do not evacuate the building during practice fire drills.

On 03/03/2022, an exit conference was conducted with Licensee Daryl Miron and Administrator Courtney Wiltzius informing them of the findings of this report and the expectation of an acceptable corrective action plan.

On 03/24/2022, a phone call was conducted with Office of Fire Safety Officer Jim Rasanen informing him of the finding of this report.

APPLICABLE RULE	
R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.
ANALYSIS:	The facility has been conducting proper fire drills as per the record of practice drills. As evidenced by staff interviews and admittance of Administrator Courtney Wiltzius, residents have not been exiting the building, but going to the nearest exit door. The residents have not been evacuating the building during practice fire drills.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no change to the status of this license.



03/24/2022

Theresa Norton
Licensing Consultant

Date

Approved By:



03/24/2022

Mary E Holton
Area Manager

Date