



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

October 28, 2022

Tyler May  
ARHC ARCLRM101 TRS, LLC  
106 York Road  
Jenkintown, PA 19046

RE: License #: AL630365575  
Investigation #: 2022A0612014  
Addington Place of Clarkston 1

Dear Mr. May:

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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Johnna Cade".

Johnna Cade, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3026 W. Grand Blvd. Ste 9-100  
Detroit, MI 48202  
Phone: 248-302-2409

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL630365575
<b>Investigation #:</b>	2022A0612014
<b>Complaint Receipt Date:</b>	08/26/2022
<b>Investigation Initiation Date:</b>	08/29/2022
<b>Report Due Date:</b>	10/25/2022
<b>Licensee Name:</b>	ARHC ARCLRMI01 TRS, LLC
<b>Licensee Address:</b>	106 York Road Jenkintown, PA 19046
<b>Licensee Telephone #:</b>	(248) 625-0500
<b>Administrator:</b>	Tyler May
<b>Licensee Designee:</b>	Tyler May
<b>Name of Facility:</b>	Addington Place of Clarkston 1
<b>Facility Address:</b>	5900 Water Tower Pl Clarkston, MI 48346
<b>Facility Telephone #:</b>	(248) 625-0500
<b>Original Issuance Date:</b>	06/19/2015
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	12/19/2021
<b>Expiration Date:</b>	12/18/2023
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED MENTALLY ILL AGED ALZHEIMERS

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
A follow-up fire safety inspection was completed on 08/23/22. The facility was found vacant being remodeled. Many rooms including the kitchen were found gutted with exposed electrical wiring. The fire alarm system is repaired and functioning. Deficiencies must be corrected, and the facility inspected prior to occupancy approval.	Yes

**III. METHODOLOGY**

08/26/2022	Special Investigation Intake 2022A0612014
08/29/2022	Special Investigation Initiated - Telephone Call to executive director, Scott Nelson
09/01/2022	Contact - Telephone call made I completed a telephone interview with executive director, Scott Nelson, and Don Christensen with Bureau of Fire Services (BFS)
09/06/2022	Contact - Telephone call made I completed a telephone interview with licensing consultant Cindy Berry
09/08/2022	Inspection Completed On-site I completed an unscheduled onsite investigation. I inspected the physical plant
09/29/2022	Exit Conference I held an exit conference with licensee designee, Tyler May
10/03/2022	Contact - Document Received I received a copy of the facility's Resident Register
10/27/2022	Exit Conference I held a second exit conference with licensee designee, Tyler May
10/28/2022	Exit Conference I held a third exit conference with licensee designee, Tyler May

## **ALLEGATION:**

**A follow-up fire safety inspection was completed on 08/23/22. The facility was found vacant being remodeled. Many rooms including the kitchen were found gutted with exposed electrical wiring. The fire alarm system is repaired and functioning. Deficiencies must be corrected, and the facility inspected prior to occupancy approval.**

## **INVESTIGATION:**

On 08/26/22, I received a complaint from the Bureau of Fire Services (BFS) that indicates, a follow-up fire safety inspection was completed on 08/23/22. The facility was found vacant being remodeled. Many rooms including the kitchen were found gutted with exposed electrical wiring. The fire alarm system is repaired and functioning. I initiated my investigation with a call to executive director, Scott Nelson. There was no answer. I left a voicemail requesting a return call.

On 09/01/22, I completed a telephone interview with executive director, Scott Nelson. Mr. Nelson stated the facility is undergoing cosmetic updates only. They are changing the wallpaper, carpeting, light fixtures, kitchen cabinets, kitchen countertops, painting and adding a new burner in the kitchen. Mr. Nelson stated the facility has not had residents for at least one year. The project is expected to be completed in a couple of months and then they will welcome residents. Mr. Nelson and the project manager, Ralph spoke with Don Christensen from Bureau of Fire Services (BFS) to communicate that the updates to the facility are cosmetic only there are no structural changes to the physical plant.

On 09/01/22, I reviewed the Bureau of Fire Services Inspection report completed by Don Christensen dated 08/23/22. The fire safety certification is disapproved.

On 09/01/22, I completed a telephone interview with BFS Fire Marshal Inspector, Don Christensen. Mr. Christensen stated, on 08/23/22, he completed a follow-up fire safety inspection. He found the facility vacant and being remodeled. Many rooms including the kitchen were found gutted with exposed electrical wiring. If the repairs that are being completed at the facility are only cosmetic the facility must be put back together the way it was before the remodel. If the repairs are more than cosmetic, the facility needs permits with Independence Township. Mr. Christensen stated he has consulted with Independence Township and is waiting for them to complete an onsite inspection to determine if permits are needed. I followed up with Mr. Christensen on 09/09/22 and 09/19/22 via email. He stated that he has not received any updates from Independence Township regarding permits.

On 09/01/22, I completed a telephone interview with licensing consultant, Cindy Berry. Ms. Berry is the assigned licensing consultant for Addington Place of Clarkston # 1 (AL630365575). Ms. Berry stated she was notified via phone by Mr. Nelson regarding the plans to update the facility. Mr. Nelson explained they would be making cosmetic changes only, no structural changes to the physical plant. Ms. Berry stated the facility does not currently have residents.

On 09/08/22, I completed an unscheduled onsite investigation. I observed that the facility was vacant and being remodeled. There are 20 rooms in the facility. The kitchen, several bedrooms, and bathrooms were gutted. There was no furniture or appliances in the facility (including, but not limited to bedroom furniture, kitchen sink, refrigerator, kitchen counters, stove, washer, dryer, living room furniture, etc.) The walls are being painted, the molding in several bedrooms is being replaced, the floors have been redone, new sinks and toilets are being put in, and light fixtures are being replaced. There does not appear to have been any structural changes to the facility.

On 10/03/22, I reviewed the facilities Resident Register. On May 1, 2020, all the residents (five people) were moved from Addington Place of Clarkston # 1 (AL630365575) to Addington Place of Clarkston # 2 (AL630365576.) The facility has had no new admissions since May 1, 2020.

On 09/29/22, I held an exit conference with licensee designee, Tyler May to discuss my findings. Mr. May stated the facility has a long way to go before it is ready to accept residents. Mr. May acknowledged that he understands residents cannot move into the facility until they receive a passing fire inspection.

On 10/27/22, I completed a second exit conference with Mr. May regarding my findings. Mr. May acknowledged that he understands he will be required to submit a corrective plan and a statement of correction.

On 10/28/22, I completed a third exit conference with Mr. May regarding my findings. Mr. May acknowledged his understanding that the facility will be placed on a 6-month provisional license.

<b>APPLICABLE RULE</b>	
<b>R 400.15403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
<b>ANALYSIS:</b>	Based on the information gathered through my investigation, there is sufficient information to conclude that Addington Place

	of Clarkston # 1 is not currently being maintained to accept residents and provide adequately for the health, safety, and well-being of the occupants. The Bureau of Fire Services Inspection report completed by Don Christensen dated 08/23/22, is disapproved.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, I recommend modification of the license to a six-month provisional license.



10/28/2022

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Johnna Cade  
Licensing Consultant

Date

Approved By:



10/28/2022

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Denise Y. Nunn  
Area Manager

Date