

GRETCHEN WHITMER
GOVERNOR

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

MARLON I. BROWN, DPA ACTING DIRECTOR

October 16, 2023

Mark Walker Premier Operating Lapeer AL, LLC 1442 Suncrest Drive Lapeer, MI 48446

RE: License #:	AL440383805
	The Pines Of Lapeer
	1442 Suncrest Drive
	Lapeer, MI 48446

#### Dear Mark Walker:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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) 643-7960.

Sincerely,

Susan Hutchinson, Licensing Consultant Bureau of Community and Health Systems

Dusan Hutchinson

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(989) 293-5222

# MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS RENEWAL INSPECTION REPORT

#### I. IDENTIFYING INFORMATION

License #:	AL440383805
Licensee Name:	Premier Operating Lapeer AL, LLC
Licensee Address:	6th Floor
	299 Park Ave
	New York, NY 10171
Licensee Telephone #:	(810) 423-8003
Licensee/Licensee Designee:	Mark Walker
A desirate as	Matt Duarray
Administrator:	Matt Brawner
Name of Eacility:	The Pines Of Lapeer
Name of Facility:	The Filles Of Lapeel
Facility Address:	1442 Suncrest Drive
Tuomity /tuurooo:	Lapeer, MI 48446
Facility Telephone #:	(810) 423-8003
Original Issuance Date:	05/19/2017
Capacity:	20
Program Type:	AGED

### **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):	1	0/12/2023	
Date of Bureau of Fire Services Ins	pection if applic	able: 01/04/2023	
Date of Health Authority Inspection	if applicable:	10/12/2023	
No. of staff interviewed and/or obse No. of residents interviewed and/or No. of others interviewed 0 R		3 3	
Medication pass / simulated pa	ss observed? `	Yes⊠ No ☐ If no,	explain.
Medication(s) and medication r	record(s) review	ved? Yes ⊠ No □	If no, explain.
<ul> <li>Resident funds and associated Yes ∑ No ☐ If no, explain.</li> <li>Meal preparation / service observing inspection did not take place.</li> <li>Fire drills reviewed? Yes ∑ No.</li> </ul>	erved? Yes 🗌 e during a mea	No ⊠ If no, explair ltime.	
Fire safety equipment and practice.	ctices observed	? Yes ⊠ No □ If ı	no, explain.
<ul> <li>E-scores reviewed? (Special C If no, explain.</li> <li>Water temperatures checked?</li> </ul>	•	, <u> </u>	'A 🖂
• Incident report follow-up? Yes	⊠ No ☐ If no	o, explain.	
<ul> <li>Corrective action plan compliant 09/15/21, R 400.15312(1), R 400.15205(6), R 400.15204(6).</li> <li>Number of excluded employees.</li> </ul>	00.15318(5), R 3) N/A		
Variances? Yes ☐ (please ex	plain) No 🗌 N	I/A 🖂	

### **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

This facility was f	found to be in non-compliance with the following rules:
R 400.15203	Licensee and administrator training requirements.
	(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:  (a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.
existing licensee	he process of transferring ownership to a new company. The designee, Mark Walker did not provide documentation that he has quired annual 16 hours of training for 2021 and 2022.
R 400.15205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.
	inspection, the licensee designee, Mark Walker, and the att Brawner, were unable to provide documentation of their current
R 400.15403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
,	inspection, I noted that the East back door and the pantry door ed with non-locking-against-egress hardware.

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Dusan Hutchinson	October 16, 2023
Susan Hutchinson Licensing Consultant	Date