



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 18, 2024

Edward Powell
Amazing Grace AFC, LLC
11400 Coral Road
Coral, MI 49322

RE: License #: AM590355381
Investigation #: 2024A0622013
Amazing Grace AFC

Dear Mr. Powell:

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.

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) 284-9727.

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.

Sincerely,

A handwritten signature in black ink, appearing to read 'Amanda Blasius', written in a cursive style.

Amanda Blasius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM590355381
Investigation #:	2024A0622013
Complaint Receipt Date:	02/28/2024
Investigation Initiation Date:	03/01/2024
Report Due Date:	04/28/2024
Licensee Name:	Amazing Grace AFC, LLC
Licensee Address:	11400 Coral Road Coral, MI 49322
Licensee Telephone #:	(231) 354-6564
Administrator:	Edward Powell
Licensee Designee:	Edward Powell
Name of Facility:	Amazing Grace AFC
Facility Address:	11400 Coral Road Coral, MI 49322
Facility Telephone #:	(231) 354-6564
Original Issuance Date:	06/03/2014
License Status:	REGULAR
Effective Date:	12/02/2022
Expiration Date:	12/01/2024
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
The facility was determined to be in substantial non-compliance during a Bureau of Fire Services onsite inspection on 02/14/2024.	Yes
Additional Findings	Yes

III. METHODOLOGY

03/01/2024	Special Investigation Intake 2024A0622013
03/01/2024	Special Investigation Initiated – Phone call to Phillip Scheer, fire inspector.
03/06/2024	Onsite Inspection.
03/13/2024	Contact - Telephone call received from licensee.
03/13/2024	Inspection Completed-BCAL Sub. Non-Compliance
03/13/2024	Exit Conference

ALLEGATION: The facility was determined to be in substantial non-compliance during a Bureau of Fire Services onsite inspection on 02/14/2024.

INVESTIGATION:

On 02/14/2024, I received documentation from the Bureau of Fire Services (BFS), that Amazing Grace AFC was determined to be in substantial non-compliance during an onsite BFS inspection. I received and reviewed a *Bureau of Fire Services Inspection Report*, authored by BFS Inspector Phillip Scheer. The Bureau of Fire Services Inspector found the facility to be in substantial non-compliance with fire safety rules and documented, in part, the following rule violations:

1. A registered architect or engineer shall submit plans and specifications to the Bureau of Fire Services for all projects that involve construction, additions, remodeling, or conversions.

Inspector comments stated the following “A registered architect or engineer shall submit plans and specifications to the Bureau of Fire Services for the replacement of the fire alarm system that was replaced due to electrical damage.”

On 03/01/2024, I spoke with Fire Services Inspector Phillip Scheer via phone. He reported that it has been over two years since he has requested the required engineer plans for the new smoke alarm system. Mr. Scheer stated that Mr. Powell owns another AFC facility and recently submitted correct plans, so he is aware of the process and can submit the required engineer plans. Mr. Scheer stated that she has spoke with Mr. Powell via phone several times over the last two years and this process has been explained. Mr. Scheer reported that due to the length of time since issuing the temporary order, he was required to issue a “D” rating on 02/14/2024.

On 03/01/2024, I reviewed the licensing file for Amazing Grace AFC. It was found that temporary approval was given on 04/05/2022 due to needing to submit plans and specifications to the Bureau of Fire Services for the replacement of the fire alarm system that was replaced due to electrical damage. Another, temporary rating was issued on 09/20/2022, with a temporary approval until 11/15/2022. As of 03/01/2024, the requested plans had not been received, therefore the Bureau of Fire Services determined the facility to be in substantial non-compliance with fire safety rules.

On 03/06/2024, I completed an unannounced onsite investigation and interviewed licensee, Edward Powell in person. Mr. Powell reported that he was not aware of the substantial non-compliance finding, and he assumed all paperwork had been submitted. Mr. Powell reported that it had been over two years since discussing this concern and he was under the impression that Summit Fire Protection had provided the Bureau of Fire Services with the plans needed. Mr. Powell reported that Summit Fire Protection, had been out to his house to measure and document the new smoke detectors installed, therefore he assumed everything was completed. During the onsite investigation, Mr. Powell made a phone call to Summit Protection and spoke with Wesley Ruppet. Mr. Ruppet reported that he was going to investigate why the plans were not submitted to the Bureau of Fires Services and get back to Mr. Powell.

APPLICABLE RULE	
MCL 400.720	Certificate of approval from bureau of fire services and department; compliance; denial or certification with limitations; hearing.
	(1) The department shall not issue a temporary, provisional, or regular license to an adult foster care facility with a capacity of more than 6 adults until the facility receives a certificate of approval from the bureau of fire services created in section 1b of the fire prevention code, 1941 PA 207, MCL 29.1b, after compliance with fire safety standards prescribed in rules promulgated by the bureau of fire services pursuant to section 10(2).
ANALYSIS:	On 04/05/2022, Amazing Grace AFC received a temporary rating and temporary approval due to needing to submit plans and specifications to the Bureau of Fire Services for the replacement of the fire alarm system that was replaced due to

	electrical damage. Another, temporary rating was issued on 09/20/2022, with a temporary approval until 11/15/2022. The Bureau of Fire Services has not received their requested documents as of 03/01/2024, therefore the facility was found to be in substantial noncompliance with applicable fire safety rules after not submitting the required documents.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 03/06/2024, I completed an unannounced onsite investigation to Amazing Grace AFC. At the time of inspection, I reviewed emergency procedures, evacuation plans and fire and tornado drills. At the time of inspection, no tornado drills had been practiced or documented. Licensee, Mr. Powell reported that he was not aware that tornado drills needed to be practiced or completed.

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:	At the time of investigation on 03/06/2024, tornado drills had not been practiced and no documents were available to review.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 03/06/2024, I completed an onsite unannounced investigation to Amazing Grace AFC. During the walkthrough of the home, I observed a Miter Saw unattended in the basement of the home. The Miter Saw appeared to be recently used. The AFC has a special certification for mentally ill and developmentally disabled adults; therefore, they have access to all rooms of the home.

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:	Due to the adults served in the AFC, keeping a Miter Saw unattended in the basement causes safety concerns for all residents.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 03/06/2024, during an onsite unannounced investigation, I observed the outside of the home to have many hazards, refuse and litter. Mr. Powell reports that he cuts his own wood and uses it to heat his home. While walking around the outside of the home, I observed, an ax, two chain saws, a miter saw and a can of gas laying in the yard unattended. All these items were located within the backyard, near the smoking area for the residents. Also, within the backyard were small piles of wood, with trash and other miscellaneous items piled on top. Within the property, there are at least three barns available for storage. I observed several unused buckets, outdoor tools and broken appliances sitting in the yard.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(13) A yard area shall be kept reasonably free from all hazards, nuisances, refuse, and litter.
ANALYSIS:	At the time of inspection, I found several safety hazards within the yard area. The yard was observed to have litter and refuse throughout the side and back of the home. Due to the AFC serving mentally ill and developmentally disabled adults, residents should not have reasonable access to an ax, chain saw or miter saws.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 03/06/2024, during an onsite unannounced investigation, fire extinguishers were observed. During the observation, it was noted that inspections were not completed for the month of February on any of the fire extinguishers.

APPLICABLE RULE	
R 400.14506	Fire extinguishers; location, examination, and maintenance.
	(2) Fire extinguishers shall be examined and maintained as recommended by the manufacturer.

ANALYSIS:	Documentation of fire extinguisher examination was not available for the month of February, 2024. Mr. Powell reported that he missed checking them during the month of February, 2024.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend modification of the license to provisional status due to the physical plant violations.



03/18/2024

Amanda Blasius
Licensing Consultant

Date

Approved By:



03/21/2024

Dawn N. Timm
Area Manager

Date