



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 15, 2024

Gagandeep Mann
JP Managed Services, Inc.
Suite A
2316 John R
Troy, MI 48083

RE: License #: AL630295441
Investigation #: 2024A0465013
Sun Valley Senior Living

Dear Mr. Mann:

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.

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,



Stephanie Gonzalez, LCSW
Adult Foster Care Licensing Consultant
Bureau of Community and Health Systems
Department of Licensing and Regulatory Affairs
Cadillac Place, Ste 9-100
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enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL630295441
Investigation #:	2024A0465013
Complaint Receipt Date:	02/22/2024
Investigation Initiation Date:	02/23/2024
Report Due Date:	04/22/2024
Licensee Name:	JP Managed Services, Inc.
Licensee Address:	Suite 3 2710 Rochester Road Rochester Hills, MI 48307
Licensee Telephone #:	(248) 497-4391
Administrator:	Gagandeep Mann
Licensee Designee:	Gagandeep Mann
Name of Facility:	Sun Valley Senior Living
Facility Address:	2316 John R Troy, MI 48084
Facility Telephone #:	(248) 689-7755
Original Issuance Date:	09/13/2010
License Status:	REGULAR
Effective Date:	10/11/2022
Expiration Date:	10/10/2024
Capacity:	20
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Fire Safety disapproval issued with a “D” rating.	Yes

III. METHODOLOGY

02/22/2024	Special Investigation Intake 2024A0465013
02/22/2024	Inspection Completed-Fire Safety: D Fire Safety D-Rating issued, and LARA notified; Special Investigation opened
02/23/2024	Special Investigation Initiated - Telephone I spoke to licensee designee, Gagandeep Mann, via telephone
03/06/2024	Inspection Completed On-site I conducted a walk-through of the facility, reviewed fire safety drills, and interviewed direct care staff, Monique Appleba
3/19/2024	Contact – Document received Facility documents received via email
04/01/2024	Exit Conference I conducted an exit conference with Gagandeep Mann via telephone

ALLEGATION:

Fire Safety disapproval issued with a “D” rating.

INVESTIGATION:

On 2/22/2024, a complaint was received, alleging that the facility was issued a certificate of disapproval “D-rating” from the Bureau of Fire Services.

On 2/22/2024, I received a copy of the *Bureau of Fire Services Inspection Report*, dated 2/15/2024, from Bureau of Fire Services Supervisor, Larry DeWatcher. I reviewed the inspection report, which stated the following deficiencies:

- No documented 3rd quarter 3rd shift fire drill
- No documented 4th quarter 2nd shift fire drill
- No documented 4th quarter 3rd shift fire drill

On 2/23/2024, I spoke to licensee designee, Gagandeep Mann, via telephone. Mr. Gagndeep stated that he has been in contact with the Bureau of Fire Services regarding the necessary steps to obtain compliance and an A-rating.

On 3/6/2024, I conducted an unannounced onsite investigation at the facility. I completed a walk-through of the home, reviewed fire safety drills, and interviewed direct care staff, Monique Appleba.

I reviewed the *Fire Drill Logs* for 2023 and 2024, at which time I noted the following deficiencies:

- A 2023 3rd quarter evening hours fire drill was not completed
- A 2023 4th quarter evening hours fire drill was not completed

I interviewed direct care staff, Monique Appleba, who stated that she has worked at the facility for two years. Ms. Appleba stated, "It is true that we have not been completing practice fire drills as required, but that's because the prior home manager was not completing them properly. Now, that home manager is no longer working here, and I am now in charge of fire drills. I am going to ensure that all practice drills are done timely and properly moving forward. I have been working with the Bureau of Fire Services along with Mr. Mann, to ensure that we are in compliance. We have corrected this problem and will continue to do what is required."

On 4/1/2024, I conducted an exit conference with licensee designee, Gagandeep Mann, via telephone. Mr. Mann acknowledged the concerns and deficiencies in properly completing practice fire drills. Mr. Mann stated, "I am working with BFS and my staff to ensure that this is corrected and completed properly moving forward. I thought the prior home manager was completing the practice fire drills and was unaware of the missing drills until BFS came to the facility recently."

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:	Based on the information obtained during the investigation there is sufficient information to determine that the facility did in fact receive a disapproval rating from the Bureau of Fire Services.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.15318	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:	<p>According to the <i>Fire Drill Logs</i>, the facility did not complete evening hours fire drills during the 3rd and 4th quarter of 2023.</p> <p>According to Ms. Appleba and Mr. Mann, evening hours fire drills were not completed during the third and fourth quarters of 2023.</p> <p>Based on the information above, there is sufficient information to determine that the facility has not completed emergency drills as required per licensing rules.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

A previous recommendation for a provisional license was made in special investigation #2024A065015, which remains in effect. Upon receipt of an acceptable corrective plan, I recommend no change to the status of the license.

Stephanie Gonzalez

4/11/2024

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:

Denise Y. Nunn

04/15/2024

Denise Y. Nunn
Area Manager

Date