



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

December 2, 2024

Lisa Lowell  
Maple Place Assisted Living Inc  
10465 Denton Creek Dr  
Fenton, MI 48430

RE: License #: AL250387323  
Investigation #: 2025A0779006  
Maple Place

Dear Lisa Lowell:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On 10/29/2024, you submitted an acceptable written corrective action plan.

It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved 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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Christopher A. Holvey".

Christopher Holvey, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 899-5659

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL250387323
<b>Investigation #:</b>	2025A0779006
<b>Complaint Receipt Date:</b>	10/22/2024
<b>Investigation Initiation Date:</b>	10/22/2024
<b>Report Due Date:</b>	12/21/2024
<b>Licensee Name:</b>	Maple Place Assisted Living Inc
<b>Licensee Address:</b>	10465 Denton Creek Dr Fenton, MI 48430
<b>Licensee Telephone #:</b>	(810) 569-3673
<b>Administrator:</b>	Lisa Lowell
<b>Licensee Designee:</b>	Lisa Lowell
<b>Name of Facility:</b>	Maple Place
<b>Facility Address:</b>	1132 East Maple Avenue Flint, MI 48507
<b>Facility Telephone #:</b>	(810) 569-3673
<b>Original Issuance Date:</b>	02/06/2018
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	08/06/2024
<b>Expiration Date:</b>	08/05/2026
<b>Capacity:</b>	18
<b>Program Type:</b>	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

## II. ALLEGATION(S)

Violation Established?	
This facility received a disapproved fire safety certification from BFS.	Yes

## III. METHODOLOGY

10/22/2024	Special Investigation Intake 2025A0779006
10/22/2024	Special Investigation Initiated - Telephone Spoke to fire safety inspector. Corey Irvin.
10/25/2024	Contact - Telephone call made Spoke to licensee, Lisa Lowell.
10/29/2024	Inspection Completed On-site
11/14/2024	Contact - Document Received Received approved fire safety report from BFS.
12/02/2024	Exit Conference Held with licensee, Lisa Lowell.

### ALLEGATION:

This facility received a disapproved fire safety certification from BFS.

### INVESTIGATION:

On 10/22/2024, a phone conversation took place with fire safety inspector, Corey Irvin, who confirmed that he inspected this facility on 10/10/2024 and has issued a disapproved fire safety certification report. Inspector Irvin stated that this facility had inappropriate locks on all exit doors and had initially removed them upon his request, but that when he went to the facility on 10/10/2024, they had placed the locks back on two of the exits. The inappropriate locks made it so a resident would have to make more than one motion/event in order to open the door.

On 10/25/2024, a phone conversation took place with licensee, Lisa Lowell, who admitted that she had placed the inappropriate locks back on two exits, due to her struggles with Resident A, who has dementia and frequently likes to go outside without letting staff know. Licensee Lowell stated that she has given Resident A and his family

a 30-day discharge notice and has removed the locks. Licensee Lowell stated that Hospice has prescribed Resident A a medication for anxiety that seems to be helping a little bit.

On 10/29/2024, an on-site inspection was conducted and the inappropriate door locks were observed to have been removed. Licensee Lowell showed a description of the locks and where a latch had to be flipped before you could turn the door handle to open the door. Licensee Lowell reported that Resident A's family has contributed to purchasing a new door alarm system with a bracelet that Resident A wears and that is set off anytime Resident A gets close to the exit doors. Licensee Lowell stated that the new alarm system and has been placed on the two most common exits that Resident A likes to use. Licensee Lowell reported that the exit leading to the fenced-in back yard also has a loud audible alarm on it that goes off when the door is opened. Licensee Lowell stated that all her staff have been trained on the proper use of the new alarm system and that one staff is assigned to keep a closer eye on Resident A, during his common wandering times at night. Licensee Lowell has provided an approved written corrective action plan addressing this issue.

On 11/14/24, an approved fire safety certification report was received from the bureau of fire safety. The report indicates that fire safety inspector, Corey Irvin, was at this facility on 11/08/24, that the deficiencies noted in his last report were satisfactorily corrected and that his fire safety certification for this facility has been approved.

On 12/2/24, an exit conference was held with licensee, Lisa Lowell. Licensee Lowell stated that the new alarm system seems to be helping and that things with Resident A are going very well.

<b>APPLICABLE RULE</b>	
<b>R 400.15403</b>	<b>Maintenance of premises.</b>
	<b>(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</b>
<b>ANALYSIS:</b>	Licensee, Lisa Lowell, admitted that she had placed inappropriate locks on two exit doors. The locks were used due to her struggles with Resident A, who has dementia and likes to go outside without letting staff know, but the locks have been removed.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### IV. RECOMMENDATION

An approved written corrective action plan has been received. It is recommended that the status of this facility's license remain unchanged.



12/02/2024

---

Christopher Holvey  
Licensing Consultant

Date

Approved By:



12/02/2024

---

Mary E. Holton  
Area Manager

Date