



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 21, 2025

Tracey Hamlet
MOKA Non-Profit Services Corp
Suite 201
715 Terrace St.
Muskegon, MI 49440

RE: License #: AS030312249
Investigation #: 2025A0464023
Simmons Home

Dear Ms. Hamlet:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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 (616) 356-0183.

Sincerely,

A handwritten signature in dark ink that reads "Megan Aukerman, LMSW". The signature is written in a cursive, flowing style.

Megan Aukerman, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 438-3036

enclosure

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

I. IDENTIFYING INFORMATION

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|---------------------------------------|--|
| License #: | AS030312249 |
| Investigation #: | 2025A0464023 |
| Complaint Receipt Date: | 01/21/2025 |
| Investigation Initiation Date: | 01/21/2025 |
| Report Due Date: | 03/22/2025 |
| Licensee Name: | MOKA Non-Profit Services Corp |
| Licensee Address: | Suite 201 715 Terrace St. Muskegon, MI 49440 |
| Licensee Telephone #: | (616) 719-4263 |
| Administrator: | Tracey Hamlet |
| Licensee Designee: | Tracey Hamlet |
| Name of Facility: | Simmons Home |
| Facility Address: | 444 32nd Street Holland, MI 49423 |
| Facility Telephone #: | (616) 396-9084 |
| Original Issuance Date: | 04/08/2011 |
| License Status: | REGULAR |
| Effective Date: | 10/08/2023 |
| Expiration Date: | 10/07/2025 |
| Capacity: | 5 |
| Program Type: | DEVELOPMENTALLY DISABLED MENTALLY ILL |

II. ALLEGATION(S)

| | Violation Established? |
|---|------------------------|
| On 01/21/2025, the facility caught fire, forcing the residents to evacuate. | Yes |

III. METHODOLOGY

| | |
|------------|---|
| 01/21/2025 | Special Investigation Intake 2025A0464023 |
| 01/21/2025 | Special Investigation Initiated - Telephone Sheryl Williams, Residential Coordinator |
| 01/22/2025 | Contact-Document received Sheryl Williams, Residential Coordinator |
| 01/24/2025 | Contact-Telephone call received Tom Zvirgzds, MOKA Regional Director |
| 02/07/2025 | Contact-Document received Variance Request |
| 03/07/2025 | Inspection Completed On-site Rachel Baker (Manager), |
| 03/31/2025 | Exit Conference Tracey Hamlet, Licensee Designee |

ALLEGATION: On 01/21/2025, the facility caught fire, forcing the residents to evacuate.

INVESTIGATION: On 01/21/2025, I received a phone call from MOKA Residential Coordinator, Sheryl Williams stating the facility had caught fire, forcing the residents to evacuate. The fire started in the southeast bedroom, in the closet. There was significant water damage from the fire hose. All the residents were safe, and staff were working on contacting all the resident's guardians. The residents were currently at Wesleyan Church with staff. Staff will be staying with the residents at a hotel, until more permanent arrangements are made.

On 01/22/2025, I received an email from Ms. Williams stating staff and the fire marshal were still unclear on how the fire started. Ms. Williams stated that Resident B was transferred to a different MOKA home. Residents A, C and D remained at the hotel, with staff until a more stable arrangement could be made. Ms. Williams stated

it was unclear how long the residents will remain out of the facility. Ms. Williams inquired about using a rental home, while renovations are being completed on the facility.

On 01/24/2025, I spoke with MOKA regional director, Tom Zvirgzds. Mr. Zvirgzds inquired and was informed the residents could be placed in a rental (VRBO) home, until facility renovations were complete. Mr. Zvirgzds was informed an inspection would need to be completed and a variance approval would need to be obtained.

On 02/07/2025, I received an email from MOKA executive assistant, Lisa Perdaris containing documents for the variance request. The address for the temporary facility was included as well as letters from each resident guardian, granting their approval of the temporary placement.

On 03/07/2025, an onsite inspection was completed at the facility. I met with facility assistant manager, Rachel Baker. Ms. Baker stated staff and the fire department were able to determine the cause of the fire. It was discovered that Resident A had removed the light switch plate in his bedroom closet. He then took the wires out of the wall and started the fire. Ms. Baker stated since being in the temporary home, Resident A is on fifteen-minute room checks to ensure similar incidents are avoided. Ms. Baker stated they expect to move back into the facility by the end of May or early June 2025.

I then toured the temporary facility. The facility had sufficient space to meet residents' needs. The furnace and hot water heater are located in the basement with a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with an interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. Fire extinguishers were installed on each level of the home. A variance request was submitted by MOKA.

On 03/21/2025, an exit conference was conducted with licensee designee, Tracey Hamlet. She was informed of the investigation findings and recommendations. Ms. Hamlet understood the reasoning for the recommendation of a provisional license. A corrective action plan will be submitted to licensing.

| 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: | On 01/21/2025, the facility caught fire, forcing the residents to be evacuated. During the investigation, it was discovered Resident A had caused the fire in his closet by removing wires |

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| | <p>from the wall. Due to the extent of the damage caused by the fire and water, the residents will be displaced until Summer of 2025. The residents are temporarily residing at a rental location until renovations are complete.</p> <p>Based on the investigative findings, there is sufficient evidence to support a rule violation that the facility is not currently adequately maintained for resident safety.</p> |
| CONCLUSION: | VIOLATION ESTABLISHED |

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend issuance of a provisional license.

Megan Aukerman, LMSW

03/21/2025

Megan Aukerman
Licensing Consultant

Date

Approved By:

Jerry Hendrick

03/21/2025

Jerry Hendrick
Area Manager

Date