



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 16, 2021

Robin Gefrey  
SPRHAL, Inc.  
1245 E. Grand Blanc Road  
Grand Blanc, MI 48439

RE: License #: AH630385331  
Investigation #: 2021A1019041  
Stratford Place

Dear Ms. Gefrey:

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. Failure to submit an acceptable corrective action plan will result in disciplinary action. 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 authorized representative and a date.

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,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(810) 347-5503

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH630385331
<b>Investigation #:</b>	2021A1019041
<b>Complaint Receipt Date:</b>	07/14/2021
<b>Investigation Initiation Date:</b>	07/14/2021
<b>Report Due Date:</b>	09/13/2021
<b>Licensee Name:</b>	SPRHAL, Inc.
<b>Licensee Address:</b>	930 S. Boulevard Rochester Hills, MI 48307
<b>Licensee Telephone #:</b>	(810) 459-2966
<b>Administrator and Authorized Representative:</b>	Robin Gepfrey
<b>Name of Facility:</b>	Stratford Place
<b>Facility Address:</b>	910 S. Boulevard Rochester Hills, MI 48307
<b>Facility Telephone #:</b>	(248) 270-4040
<b>Original Issuance Date:</b>	06/26/2018
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	12/26/2020
<b>Expiration Date:</b>	12/25/2021
<b>Capacity:</b>	38
<b>Program Type:</b>	AGED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
The facility received a fire disapproval rating.	Yes
Additional Findings	No

## III. METHODOLOGY

07/14/2021	Special Investigation Intake 2021A1019041
07/14/2021	Special Investigation Initiated - Telephone Call received from Bureau of Fire Services supervisor Larry DeWachter informing of fire safety disapproval rating.
07/14/2021	Contact - Document Received Fire safety disapproval report received via email from L. DeWachter.
07/14/2021	Contact - Document Sent Emailed AR requesting disaster planning procedures
07/15/2021	Inspection Completed BCAL Sub. Compliance
07/15/2021	Exit Conference

### **ALLEGATION:**

**The facility received a fire disapproval rating.**

### **INVESTIGATION:**

On 7/14/21, licensing staff received a call from Bureau of Fire Service supervisor Larry DeWachter notifying that a disapproval rating was being issued to the facility following an unfavorable inspection. Mr. DeWachter stated that the facility failed to conduct fire drills, had no fire watch programming in place and that the administrator/authorized representative did not produce proof of staff training on emergency procedures during the onsite inspection.

Mr. DeWachter followed up the phone call with a copy of the written disapproval report. The inspection was completed on 7/13/21 by Bureau of Fire Services inspector Don Collick. Mr. Collick's report read, in part:

- a) Facility was unable to provide documentation that indicates the emergency plan has been reviewed for accuracy in the past twelve months.
- b) Facility was unable to provide documentation that indicates the staff has received training at the time of hire, then a refresher at least annually on the emergency plan.
- c) Upon review of the facilities emergency plan it was found that there was not a fire watch policy that describes requirements in the event of a fire alarm or sprinkler system impairment.

**INSPECTOR COMMENTS:**

- a) Upon review of records it was observed that the facility has failed to perform the required fire exit drills. Records indicate the last drill performed was in December 2019.

**5- DUE TO THE FACILITIES FAILURE TO PERFORM REQUIRED STAFF TRAINING & FIRE DRILLS DESIGNED TO PROTECT THE RESIDENTS, A FIRE SAFETY DISAPPROVAL HAS BEEN ISSUED.**

<b>APPLICABLE RULE</b>	
<b>R 325.1917</b>	<b>Compliance with other laws, codes, and ordinances.</b>
	<b>(2) A home shall comply with the department's health care facility fire safety rules being R 29.1801 to R 29.1861 of the Michigan Administrative Code.</b>
<b>ANALYSIS:</b>	A "disapproved" fire rating is not consistent with this rule.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 7/15/21, I shared the findings of this report with authorized representative Robin Gepfrey. Ms. Gepfrey did not contest the above violation.

**IV. RECOMMENDATION**

Contingent upon completion of an acceptable corrective action plan to licensing staff and the Bureau of Fire Services, I recommend the status of the license remain unchanged.



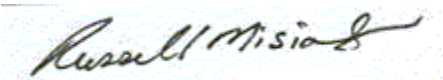
7/15/21

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Elizabeth Gregory-Weil  
Licensing Staff

Date

Approved By:



7/15/21

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Russell B. Misiak  
Area Manager

Date