



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 16, 2021

Mark Walker  
The Pines Of Burton Memory - South  
5340 Davison Road  
Burton, MI 48509

RE: License #: AH250382918  
The Pines Of Burton Memory - South  
5340 Davison Road  
Burton, MI 48509

Dear Mr. Walker:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged 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 feel free to contact the local office at (810) 787-7031.

Sincerely,

A handwritten signature in cursive script, reading "Aaron L. Clum".

Aaron Clum, Licensing Staff  
Bureau of Community and Health Systems  
4809 Clio Road  
Flint, MI 48504  
(517) 230-2778

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH250382918
<b>Licensee Name:</b>	Premier Operating Burton MC South, LLC
<b>Licensee Address:</b>	299 Park Ave - 6 Fl New York, NY 10171
<b>Licensee Telephone #:</b>	(212) 739-0794
<b>Authorized Representative:</b>	Mark Walker
<b>Administrator:</b>	Matt Brawner
<b>Name of Facility:</b>	The Pines Of Burton Memory - South
<b>Facility Address:</b>	5340 Davison Road Burton, MI 48509
<b>Facility Telephone #:</b>	(810) 743-8520
<b>Original Issuance Date:</b>	10/05/2017
<b>Capacity:</b>	23
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 7/16/21

Date of Bureau of Fire Services Inspection if applicable:

Inspection Type: ☐ Interview and Observation ☒ Worksheet  
☐ Combination

Date of Exit Conference:

No. of staff interviewed and/or observed 6  
No. of residents interviewed and/or observed 15  
No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- Medication(s) and medication records(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ☒ If no, explain. Facility does not maintain resident funds
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☒ No ☐ If no, explain.
- Water temperatures checked? Yes ☒ No ☐ If no, explain.
- Incident report follow-up? Yes ☐ IR date/s: N/A ☒
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s: SI#2021A1026025/1922(5)
- Number of excluded employees followed up? N/A ☒

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 325.1921	Governing bodies, administrators, and supervisors.
	(1) The owner, operator, and governing body of a home shall do all of the following: (b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.
During the inspection, associate Ashley Roberson was observed working within the kitchen and serving food to residents while not to be wearing mask as mandated by MIOSHA Emergency Rule 6(4).	
<b>VIOLATION ESTABLISHED</b>	
R 325.1922	Admission and retention of residents.
	(7) An individual admitted to residence in the home shall have evidence of initial tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005" ( <a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a> ), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.

Upon request, facility administration was unable to provide an annual risk assessment as described in the 2005 MMWR "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005".	
<b>VIOLATION ESTABLISHED</b>	
<b>R 325.1923</b>	<b>Employee's health.</b>
	(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005 ( <a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a> ), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.
Upon request, facility administration was unable to provide an annual risk assessment as described in the 2005 MMWR "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005".	
<b>VIOLATION ESTABLISHED</b>	
<b>R 325.1932</b>	<b>Resident medications.</b>
	(5) A home shall take reasonable precautions to ensure or assure that prescription medication is not used by a person other than the resident for whom the medication is prescribed.

Upon inspection of a medication cart, used to secure resident medications, I observed three separate cups of medications which had been pre-set within the cart. During inspection, associates Alexis Wells-Henry and Ellyanna Santiago were working together to administer medications and that the cups of medication were set aside for administration to separate residents. When interviewed, Ms. Wells-Henry and Ms. Santiago indicated medications should be administered one at a time and not pre-set for several residents at a time.	
<b>VIOLATION ESTABLISHED</b>	
<b>R 325.1944</b>	<b>Employee records and work schedules.</b>
	<b>(1) A home shall maintain a record for each employee which shall include all of the following:</b> <b>(d) Summary of experience, education, and training.</b> <b>(g) Results of annual tuberculosis screening as required by R 325.1923(2).</b>
Upon request, facility administration was unable to provide training and tuberculosis screening documentation for Ms. Wells-Henry and Ms. Santiago.	
<b>VIOLATION ESTABLISHED</b>	

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, an approved Bureau of Fire Services Inspection and an annual licensing fee, renewal of the license is recommended.

*Aaron L. Chum*

7/16/21

Date

Licensing Consultant