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# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 24, 2022

Daryl Miron Lakeview Assisted Living, LLC 1100 N Lake Shore Dr Gladstone, MI 49837

> RE: License #: AL210302204 Investigation #: 2022A0221010

> > Lakeview Assisted Living II

Dear Mr. Miron:

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 the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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 (906) 226-4171.

Sincerely,

Theresa Norton, Licensing Consultant Bureau of Community and Health Systems 234 West Baraga

Marquette, MI 49855 (906) 280-2519

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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 #:	AL210302204
Investigation #:	2022A0221010
On an Initial Descript Date	00/40/0000
Complaint Receipt Date:	02/16/2022
Investigation Initiation Date:	02/17/2022
investigation initiation bate.	02/11/2022
Report Due Date:	04/17/2022
Licensee Name:	Lakeview Assisted Living, LLC
Licensee Address:	1100 N Lake Shore Dr
	Gladstone, MI 49837
Licensee Telephone #:	(906) 428-7000
Licensee Telephone #.	(300) 420-7 000
Administrator:	Daryl Miron, Administrator
	,
Licensee Designee:	Daryl Miron, Designee
Name of Facility:	Lakeview Assisted Living II
Equility Address	1100 N. Lakeshore Dr.
Facility Address:	Gladstone, MI 49837
	Cidastoric, ivii 40007
Facility Telephone #:	(906) 428-7000
Original Issuance Date:	01/17/2014
License Status:	REGULAR
Effective Date:	07/17/2020
LITECTIVE Date.	01/11/2020
Expiration Date:	07/16/2022
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Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED
	AGED, TRAUMATICALLY BRAIN INJURED,
	ALZHEIMERS

## II. ALLEGATION(S)

## Violation Established?

Fire drills not being conducted properly.	Yes
Additional Findings	No

### III. METHODOLOGY

02/16/2022	Special Investigation Intake 2022A0221010
02/17/2022	Special Investigation Initiated - Telephone Phone call to Complainant.
02/17/2022	Inspection Completed On-site
02/17/2022	Contact - Face to Face Interview with Administrator Courtney Wiltzius, and Nurse Amy Gagne.
02/17/2022	Contact - Face to Face Interview with Staff Kathy Olsen and Staff Helen Brandt.
02/17/2022	Contact - Document Received Staff schedule received.
03/03/2022	Contact - Face to Face Interviews with Staff Dawn Sandberg, Daisy Johnson, and Letisha Lavigne.
03/03/2022	Contact - Face to Face Interviews with Licensee Designee, Administrator Courtney Wiltzius, and Nurse Amy Gagne.
03/03/2022	Exit Conference Exit interview with Administrator Courtney Wiltzius.

**ALLEGATION:** Fire drills not being conducted properly.

**INVESTIGATION:** The complainant reports that fire drills are not being conducted properly in the facility. The complainant stated that residents are not evacuating the building. The complainant stated, "I know that's against the law."

On 02/27/2022, Consultant Maria DeBacker and I conducted an unannounced onsite inspection at the facility. We met with Administrator Courtney Wiltzius and Nurse Amy Gagne. Ms. Wiltzius produced the documented fire drills for the facility. The documented drills were written as conducted at the proper times of one per shift, per quarter, along with the times of evacuation. When asked where the meeting point was for the residents, Ms. Wiltzius stated that residents go and stand in front of the nearest exit doors. When asked to clarify, Ms. Wiltzius stated, "They don't go outside."

On 02/27/2022 and 03/03/2022, six staff (Kathy Olsen, Helen Brandt, Dawn Sandberg, Daisy Johnson, and Letisha Lavigne) were interviewed. All staff reported that residents do not evacuate the building during practice fire drills.

On 03/03/2022, an exit conference was conducted with Licensee Daryl Miron and Administrator Courtney Wiltzius informing them of the findings of this report and the expectation of an acceptable corrective action plan.

On 03/24/2022, a phone call was conducted with Office of Fire Safety Officer Jim Rasanen informing him of the finding of this report.

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:	The facility has been conducting proper fire drills as per the record of practice drills. As evidenced by staff interviews and admittance of Administrator Courtney Wiltzius, residents have not been exiting the building, but going to the nearest exit door. The residents have not been evacuating the building during practice fire drills.	
CONCLUSION:	VIOLATION ESTABLISHED	

#### IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no change to the status of this license.

Thung Worlan	03/24/2022
Theresa Norton	Date
Licensing Consultant	

Approved By:

03/24/2022

Mary E Holton Date
Area Manager