

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 22, 2022

Mark Walker Premier Operating Burton MC North, LLC 5330 Davison Road Burton, MI 48509

> RE: License #: AL250382837 Investigation #: 2022A0582027

> > The Pines of Burton - Memory

Dear Mr. Walker:

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.
- 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. If I am not available, and you need to speak to someone immediately, please contact the local office at (517) 284-9727.

Sincerely,

Derrick Britton, Licensing Consultant Bureau of Community and Health Systems

Derice Z. Britter

611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (517) 284-9721

enclosure

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

# I. IDENTIFYING INFORMATION

| License #:                     | AL250382837                               |
|--------------------------------|---|
| Investigation #:               | 2022A0582027                              |
| Complaint Passint Data         | 03/10/2022                                |
| Complaint Receipt Date:        | 03/10/2022                                |
| Investigation Initiation Date: | 03/11/2022                                |
| Report Due Date:               | 05/09/2022                                |
| Licensee Name:                 | Premier Operating Burton MC North, LLC    |
| Licensee Address:              | 299 Park Ave - 6 Fl<br>New York, NY 10171 |
| Licensee Telephone #:          | (419) 429-9984                            |
| Administrator:                 | Matt Brawner                              |
| Licensee Designee:             | Mark Walker                               |
| Name of Facility:              | The Pines of Burton - Memory              |
| Facility Address:              | 5330 Davison Road<br>Burton, MI 48509     |
| Facility Telephone #:          | (810) 715-9093                            |
| Original Issuance Date:        | 02/09/2017                                |
| License Status:                | REGULAR                                   |
| Effective Date:                | 08/09/2021                                |
| Expiration Date:               | 08/08/2023                                |
| Capacity:                      | 20  |
| Program Type:                  | ALZHEIMERS                                |

# II. ALLEGATION

| Violatio  | n   |
|-----------|-----|
| Establish | ed? |

| The facility received a disapproval rating from their fire safety  | Yes |
|--|-----|
| inspection. The issue has been ongoing since 08/11/2021 with no remedy to fix the issue.   |     |
| Total and the same |     |

#### III. METHODOLOGY

| 03/10/2022 | Special Investigation Intake 2022A0582027              |
|------------|--|
| 03/11/2022 | Special Investigation Initiated - On Site              |
| 03/15/2022 | Inspection Completed-BCAL Sub. Compliance              |
| 04/15/2022 | Exit Conference<br>With Mark Walker, Licensee Designee |

#### **ALLEGATION:**

The facility received a disapproval rating from their fire safety inspection. The issue has been ongoing since 08/11/2021 with no remedy to fix the issue.

#### INVESTIGATION:

The intake for this investigation took place on 03/10/2022, as the result of prior email communication with Cory Irvin, State Fire Marshal Inspector.

On 03/08/2022, Mr. Irvin stated he has been working with this licensee since August 2021 for the licensee to come into full compliance with the fire detection system. He initially issued a C rating which expired in December 2021. The licensee had not submitted all documentation to satisfy the Corrective Action Plan but told Mr. Irvin the estimate to fix the fire system was like \$85,000 and they were looking to get another estimate. Mr. Irvin gave them another four weeks to provide the information to him, but the licensee did not submit it. Mr. Irvin informed that he would issue the D rating shortly if he does not receive documentation that the system is working as it should. Apparently, the system has been "in trouble" for the past three years so the licensee has been aware of this issue and the need for it to be addressed for a while.

On 3/8/2022 I contacted Administrator Matt Brawner to contact Mr. Irvin. Mr. Irvin replied that he spoke with Mr. Brawner, who informed him that he two quotes to repair the fire alarm system, but nothing had been authorized. Mr. Brawner stated that he had a corporate meeting that evening and he would send him the information the next day. Mr. Irvin stated that he would follow up after receiving the information.

On 03/10/2022, Mr. Irvin emailed that he issued a Disapproved rating of the facility. Mr. Irvin stated that he I had not heard anything as of 2:45 PM yesterday. Mr. Irvin stated that Mr. Brawner did email him at 3:02 PM saying that he had another company coming that morning to give another bid.

On 03/10/2022, I reviewed the Inspection Report from Mr. Irvin. The report, dated 03/09/2022, was a "re-check" inspection which documented the following:

- 1. The adult foster care licensee or designated representative shall ensure that the installation, modification, testing, servicing, inspection or maintenance of a fire alarm or fire suppression system required by these rules shall be in compliance with the provisions of 1941 PA 207, MCL 29.1. Rule 110
  - a. INSPECTOR COMMENTS: Plans shall be submitted to the Bureau of fire Services Plan Review division for the work to be done to repair the Fire Alarm system.
- 2. Whenever or wherever any device, equipment, system, condition, arrangement, level or protection, fire –resistive construction, or any other feature is required for compliance with the provisions of this code shall thereafter be continuously maintained. 4.6.12.1
  - a. INSPECTOR COMMENTS: Fire alarm panel is in Trouble with "Wiring Fault Loop 1, Module 2, Panel 1" on display. This trouble has been noted on the last 3 years annual fire alarm system inspection reports.
- 3. Several attempts were made to contact facility in regards to the repair to the Fire Alarm System. As of 3/9/2022, no information has been received by this office to address this deficiency. This was originally cited during the annual inspection on 8/11/2021.

On 03/11/2022, I conducted an unannounced, onsite inspection at the facility. I interviewed Matt Brawner, Administrator. Mr. Brawner stated that the fire alarm panel indicates that the system needs repair, but the system continues to work fine. Mr. Brawner stated that the company listed on the fire alarm panel is no longer in business. Mr. Brawner stated that the most recent quote he received to fix the panel came in at \$89,000. Mr. Brawner stated that he has another company coming on Monday, 03/14/2022, to give another quote.

I reviewed the fire alarm panel, which indicated that system status was "TROUBLE," with "Wiring Fault, Loop 1, Module 2, Panel 1" listed on the panel display.

| APPLICABLE RULE |  |
|-----------------|--|
| R 400.15403     | 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:       | Based on interviews and documentation from Cory Irvin, State Fire Marshal Inspector, the facility has had an ongoing deficiency indicated on their fire alarm panel. Mr. Irvin noted in his inspection that the deficiency has been noted on the last three years annual fire alarm system inspection reports, with no plans submitted to repair the system. It was noted during my onsite inspection on 03/11/2022 that the fire alarm panel continues to display that the has "trouble," although the Administrator Mr. Brawner stated that the system works fine. |
| CONCLUSION:     | VIOLATION ESTABLISHED  |

On 04/15/2022, I conducted an Exit Conference with Mark Walker, Licensee Designee, explaining the violation. Mr. Walker will be working to correct the issue.

# IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the license status.

| Derrick Z. Britter   | 04/22/2022 |
|----------------------|------------|
| Derrick Britton      | Date       |
| Licensing Consultant |            |

Approved By:

04/22/2022

Mary E Holton Date
Area Manager