

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 8, 2022

Lijo Antony Meadows Assisted Living, Inc. 71 North Avenue Mt. Clemens, MI 48043

> RE: License #: AL500388667 Investigation #: 2022A0604019 Meadows Assisted Living I ADDENDUM REPORT Original Report Date: 06/16/2022

Dear Mr. Antony:

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.

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.

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,

Kristine Cillufo

Kristine Cilluffo, Licensing Consultant Bureau of Community and Health Systems Cadillac Place 3026 West Grand Blvd Ste 9-100 Detroit, MI 48202 (248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

| . IDENTIFYING INFORMATION | |
|--------------------------------|--|
| License #: | AL500388667 |
| | |
| Investigation #: | 2022A0604019 |
| | |
| Complaint Receipt Date: | 04/22/2022 |
| Complaint Receipt Date. | 04/22/2022 |
| | |
| Investigation Initiation Date: | 04/22/2022 |
| | |
| Report Due Date: | 06/21/2022 |
| | |
| Licensee Name: | Meadows Assisted Living, Inc. |
| Licensee name. | Meadows Assisted Living, Inc. |
| | |
| Licensee Address: | 71 North Avenue Mt. Clemens, MI 48043 |
| | |
| Licensee Telephone #: | (586) 461-2882 |
| | |
| Administrator: | Lije Antony |
| Aummistrator. | Lijo Antony |
| | |
| Licensee Designee: | Lijo Antony |
| | |
| Name of Facility: | Meadows Assisted Living I |
| | |
| Facility Address | 71 North Avenue Mt. Clemene, MI, 19012 |
| Facility Address: | 71 North Avenue Mt. Clemens, MI 48043 |
| | |
| Facility Telephone #: | (586) 461-2882 |
| | |
| Original Issuance Date: | 12/06/2018 |
| | |
| License Status: | REGULAR |
| LICENSE SLALUS: | |
| | |
| Effective Date: | 02/23/2022 |
| | |
| Expiration Date: | 02/22/2024 |
| | |
| Capacity: | 18 |
| Capacity: | 10 |
| | |
| Program Type: | PHYSICALLY HANDICAPPED |
| | MENTALLY ILL |
| | AGED |
| | TRAUMATICALLY BRAIN INJURED |
| | ALZHEIMERS |
| | |

II. ALLEGATION(S)

Violation Established?

| Facility received fire safety disapproval on 04/19/2022. | Yes |
|--|-----|
| | |

III. METHODOLOGY

| 04/22/2022 | Special Investigation Intake 2022A0604019 |
|------------|---|
| 04/22/2022 | Special Investigation Initiated - Letter Email to Bureau of Fire Services (BFS) Inspector, Brian Batten |
| 04/25/2022 | Contact - Document Received Email from Brian Batten. He has no updated information since inspection. |
| 04/26/2022 | Contact - Document Sent Email to and from Lijo Antony |
| 04/27/2022 | Contact - Document Sent Email to and from Lijo Antony |
| 04/27/2022 | Contact - Telephone call made TC to Lijo Antony |
| 04/28/2022 | Inspection Completed On-site Completed unannounced onsite investigation. Completed walkthrough of facility with Staff, Paulina Land. |
| 05/04/2022 | Contact - Document Sent Email to Lijo Antony requesting update. Received return email. |
| 05/05/2022 | Contact - Document Received Email from Lijo Antony. |
| 05/05/2022 | Contact - Document Sent Email to Lijo Antony. |
| 05/27/2022 | Contact - Document Received Email from Lijo Antony. He has submitted new applications for Meadows Assisted Living - change of provider. Sent return email requesting fire safety update. |

| 06/02/2022 | Contact - Telephone call made TC to Lijo Antony |
|------------|--|
| 06/02/2022 | Contact - Document Received Email from Lijo Antony. Mr. Antony forwarded email he sent to Brian Batten on 05/27/2022 requesting he come to facility. |
| 06/08/2022 | Contact - Document Sent Email to Brian Batten. Received return email from Brian Batten. |
| 06/09/2022 | Exit Conference Completed exit conference by email with Lijo Antony |
| 06/16/2022 | Exit Conference Completed exit conference with Lijo Antony. Change of recommendation. |

ALLEGATION:

Facility received fire safety disapproval on 04/19/2022.

INVESTIGATION:

On 04/21/2022, I received an inspection report from BFS dated 04/19/2022. The facility was inspected by Brian Batten and was given disapproval by BFS. The report indicates, "A 3RD fire safety RE-inspection was completed on this date. The following deficiencies must be corrected within the time period(s) specified. Owners have failed to correct the sequence of operation for the delayed egress on exit doors. Therefore, the status of the 2021 annual fire and life safety inspection has changed from temporary to disapproved. Licensing will be notified of the failure to comply. At this time the owners shall have one week to make corrections or they shall disable magnetic locks on all the exit doors until repairs can be made and the doors operate in accordance with the code. Owner states company in Texas was going to call him to schedule alterations to the doors. However, the company has not provided a date when they will do the installation. In addition, the company has not submitted any plans to the Bureau for review. The exit doors remain the same and do not operate as the code requires."

The BFS report dated 04/19/2022 indicated that delayed egress locks shall be permitted for exit doors only. The BFS rule for egress doors lists the following requirements:

An irreversible process shall release the lock in the direction of egress within 15 seconds upon application of a force to the release device required in 7.2.1.5.10 under all of the following conditions:

(a) The force shall not be required to exceed 15lb

(b) The force shall not be required to be continuously applied for more than 3 seconds

(c) The initiation of the release process shall activate an audible signal in the vicinity of the door opening

(d) once the lock has been released by the application of force to the releasing device, relocking shall be by manual means only.

Mr. Batten's report indicates that all exit doors were tested, and the force had to be continually applied to the release device for the entire 15 seconds for the door to open. The open exception was the southwest door which opened properly.

On 04/22/2022, I emailed BFS Inspector, Brian Batten. Mr. Batten indicated that he had no new information since last inspection. Mr. Batten recommended disapproval during last BFS inspection and there have been no changes to the recommendation.

On 04/27/2022, I interviewed Licensee Designee, Lijo Antony, by phone. He stated that he did not agree with findings as the doors were previously approved. Mr. Antony believes they are being harassed by BFS because each inspection they are told to correct something different. He stated that his attorney will be contacting the Attorney General's office. Mr. Antony stated that they have residents who wander, and he wants a letter that says BFS is liable if he disables the exit doors. Mr. Antony stated that parts have been ordered for the doors, however, it is going to take 60 days plus for them to arrive. The parts are delayed due to supply chain and parts shortages.

On 04/28/2022, I completed an unannounced onsite investigation at Meadows Assisted Living I and II. I interviewed Staff, Paulina Land. Ms. Land indicated that the exit doors had not been disabled. I completed a walk-though of facility with Ms. Land to view exit doors. I observed the doors to have delayed egress and an alarm will sound when they are opened. Each door had a notice posted that indicated, "Keep pushing, this door will open in 15 seconds. Alarm will sound." The bar on door must be pressed for 15 seconds for it to open. Each door also had a box next to the door where staff could use a key fob to open the door.

On 06/07/2022, I interviewed Licensee Designee, Lijo Antony, by phone. He stated that he has emailed Mr. Batten to meet with him at facility, however, Mr. Batten is now on vacation. He stated that the parts for doors have been ordered, however, they will take 60-90 days to arrive.

On 06/06/2022, I received an email from BFS Inspector, Brian Batten. He indicated that he has been told a couple of times that the parts were ordered and would be in within 30 to 60 days. He extended their temporary status, however, as of his last re-inspection disapproved their status. The current owner/administrator has indicated he would like to meet with him, however, has been told he needed to call his supervisor. Mr. Antony has not yet called Mr. Batten's supervisor.

On 06/09/2022, I reviewed prior BFS Inspection reports. The facility was originally given fire safety approval on 11/13/2018. BFS Inspection reports dated 09/13/2021,

12/13/2021 and 12/14/2021 were given temporary approval and indicate that egress doors need to be repaired as force must be applied for 15 seconds for door to open.

I completed an exit conference on 06/09/2022 with Licensee Designee, Lijo Antony. I informed him of the violation found and that a copy of the special investigation report would be mailed once approved. I also informed him that a corrective action plan would be requested. Mr. Antony indicated that the findings did not make sense. I informed Mr. Antony that Mr. Batten requested that he speak with his supervisor and that BFS approval is required for licensing.

On 06/16/2022, I completed a second exit conference with Lijo Antony by email. I informed him that recommendation would be changed to modification of the license to provisional. I also informed him that a corrective action plan would be requested and to include whether he accepts or contests provisional license.

| 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: | Meadows Assisted Living I has failed to make repairs to doors as required by BFS. BFS Inspection reports dated 09/13/2021, 12/13/2021 and 12/14/2021 give Meadows Assisted Living I temporary approval because the exit doors were tested, and force had to be continually applied for 15 seconds for the doors to open. BFS rule indicates that force shall not be required to be continually applied for more than three seconds. On 04/19/2022, BFS gave the facility disapproval because the doors were still not repaired at the time of the inspection. BFS inspection report indicates that the owners shall have one week to make corrections or they shall disable magnetic locks on all the exit doors until repairs can be made and the doors operate in accordance with the code. Licensee Designee, Lijo Antony, did not disable the doors as he did not want to be held liable if a resident wandered from building. Mr. Antony stated that parts were ordered and take 60-90 days to arrive. He indicated that parts were delayed to shortages and supply chain issues. |
| CONCLUSION: | VIOLATION ESTABLISHED |

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend modification of the license to provisional.

pistine Cillufo

06/16/2022

Kristine Cilluffo Licensing Consultant

Date

Approved By:

Denie Y. Munn

06/16/2022

Denise Y. Nunn Area Manager Date

ADDENDUM REPORT SIR #2022A0604019

PURPOSE:

The purpose of this addendum report is to change the recommendation.

METHODOLOGY:

| 06/16/2022 | Contact- Document Received Email from Lijo Antony. He is in communication with BFS Supervisor, Larry DeWachter |
|------------|--|
| 06/16/2022 | Contact- Telephone call received Received message from Larry DeWachter. He believes issues will be corrected next week. Facility is close to getting repairs done. |
| 06/17/2022 | Contact- Document Sent Email to Lijo Antony and Larry DeWachter |

| 06/23/2022 | Contact- Document Sent Email to and from Lijo Antony |
|------------|--|
| 07/13/2022 | Contact- Document Sent Email to Lijo Antony re: corrective action plan |
| 07/18/2022 | Contact- Document Received Received BFS Inspection report for Meadows Assisted Living. Facility was inspected on 07/12/2022 and received approval. |
| 07/25/2022 | Contact- Document Received Received corrective action plan from Lijo Antony by email. Doors have been repaired. |

DESCRIPTION OF FINDINGS AND CONCLUCIONS:

On 04/19/2022, BFS gave Meadows Assisted Living a disapproval rating because they failed to make repairs to doors. A recommendation for a provisional license was made on 06/16/2022 due to BFS disapproval. On 06/16/2022, I received a message from BFS Supervisor, Larry DeWachter. He anticipated that repairs to doors would be made soon. On 07/18/2022, I received BFS Inspection report giving facility fire safety approval as of 07/12/2022.

RECOMMENDATION:

An acceptable corrective action plan has been received. Meadows Assisted Living received BFS approval on 07/12/2022. I recommend that the investigation be closed and with no change to the status of the license.

Ristine Cillufo

08/04/2022

Kristine Cilluffo Licensing Consultant Date

Approved By:

Denie J. Munn

08/08/2022

Denise Y. Nunn Area Manager Date