

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

ORLENE HAWKS DIRECTOR

December 7, 2022

Gail Strayer Tanglewood Assisted Living Inc 19086 Tipsico Lake Fenton, MI 48430

> RE: License #: AM470094319 Investigation #: 2023A0790008 Tanglewood Assisted Living Inc

Dear Ms. Strayer:

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. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (517) 284-9730.

Sincerely,

Rodney Sill

Rodney Gill, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909

enclosure

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

### I. IDENTIFYING INFORMATION

License #:	AM470094319
	AIVI470094319
Investigation #:	2023 0 2000 8
Investigation #:	2023A0790008
Complaint Dessint Date:	11/10/2022
Complaint Receipt Date:	11/18/2022
Investigation Initiation Dates	44/40/2022
Investigation Initiation Date:	11/18/2022
Demont Due Date:	01/17/2023
Report Due Date:	01/17/2023
Licensee Name:	Tanglowand Assisted Living Inc.
	Tanglewood Assisted Living Inc
Licensee Address:	10086 Tinging Lake
Licensee Address:	19086 Tipsico Lake
	Fenton, MI 48430
Liconsoo Tolonhono #:	(810) 629-6098
Licensee Telephone #:	(010) 029-0090
Administratory	John Strayor
Administrator:	John Strayer
Liconoco Decimposi	
Licensee Designee:	Gail Strayer
	Tanalawa ad Assistand Living Inc.
Name of Facility:	Tanglewood Assisted Living Inc
Essility Address	10096 Tinging Lake
Facility Address:	19086 Tipsico Lake Fenton, MI 48430
Eacility Tolophono #:	(810) 750-2833
Facility Telephone #:	(810) 730-2833
Original Issuance Date:	01/22/2001
Original issuance Date.	
License Status:	REGULAR
Effective Date:	11/19/2021
Expiration Date:	11/18/2023
Capacity:	12
σαρασιτή.	12
Program Type:	PHYSICALLY HANDICAPPED
	ALZHEIMERS
	AGED

## II. ALLEGATION(S)

	Violation Established?
The facility has not removed child proof devices as stated on the	Yes
09/16/2022 Bureau of Fire Services inspection report.	

## III. METHODOLOGY

11/18/2022	Special Investigation Intake 2023A0790008
11/18/2022	Special Investigation Initiated – Telephone call made to a family member of previous resident.
11/23/2022	Inspection Completed On-site Interviewed direct care staff members Nicole Opperthauser and Morgan Loomis.
11/23/2022	Inspection Completed-BCAL Sub. Compliance
12/05/2022	Exit Conference with licensee designee Gail Strayer and administrator John Strayer.
12/05/2022	Corrective Action Plan Requested and Due on 12/20/2022

#### ALLEGATION:

#### The facility has not removed child proof devices as stated on the 09/16/2022 Bureau of Fire Services inspection report.

#### **INVESTIGATION:**

On 11/18/2022 I reviewed an Inspection Report from the Department of Licensing and Regulatory Affairs Fire Marshal Division dated 11/14/2022. The Inspection Report indicated Tanglewood Assisted Living was found to be in substantial non-compliance during their Bureau of Fire Safety Inspection in part for failing to remove child proof devices from two exterior doors functioning as fire exits as stated on the 09/16/2022 Inspection Report.

I conducted an unannounced onsite investigation on 11/23/2022. I interviewed direct care staff member (DCSM) Nicole Opperthauser and she said the child safety proof

devices were affixed to the inside of two exterior doors functioning as fire exits at the facility but have subsequently been removed. Ms. Opperthauser explained the child safety proof devices were removed the same day the Fire Marshal was last at the facility. She said she could not recall the exact date the Fire Marshal was last at the facility but believes it was on or about 11/14/2022. Ms. Opperthauser knows the child safety proof devices were removed when the Fire Marshal was last at the facility because she removed them.

Ms. Opperthauser showed me where the child safety proof devices had been affixed to the inside of the two exterior doors and there were outlines of the devices etched in the paint, which verified the devices had indeed been installed and affixed to the inside of the two exterior doors functioning as fire exits shown to me by Ms. Opperthauser. I observed the childproof safety devices had been removed from both exit doors used by the facility to exit in the event of an emergency or fire. Ms. Opperthauser also went down to the basement, retrieved one of the two child safety proof devices, and showed it to me.

I conducted an exit conference with licensee designee Gail Strayer and administrator John Strayer informing them of the established violation and need for a Corrective Action Plan.

APPLICABLE RULE	
R 400.14403	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 the information gathered during this investigation through review of the Inspection Report from the Department of Licensing and Regulatory Affairs Fire Marshal Division dated 11/14/2022, an unannounced onsite investigation, and interview with DCSM Nicole Opperthauser a violation has been established. Tanglewood Assisted Living was determined to be in substantial noncompliance with applicable fire safety rules on 11/14/2022 by the Bureau of Fire Services (BFS). BFS found the facility had failed to remove child proof devices from the inside of two exterior doors functioning as fire exits as stated on the 09/16/2022 Inspection Report.
CONCLUSION:	VIOLATION ESTABLISHED

# **IV. RECOMMENDATION**

Upon the receipt of an acceptable corrective action plan, it is recommended that the status of the license remains unchanged.

Rodney Sill

12/06/2022

Rodney Gill Licensing Consultant

Date

Approved By:

12/07/2022

Dawn N. Timm Area Manager Date