



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 2, 2023

Patti Holland
801 W Geneva Dr.
Dewitt, MI 48820

RE: License #: AM330008452
Investigation #: 2023A1029029
Pleasant View AFC

Dear Patti Holland:

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 (231) 922-5309.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Browning". The script is cursive and fluid, with the first letter of each word being capitalized and larger than the others.

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
Browningj1@michigan.gov - (989) 444-9614

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM330008452
Investigation #:	2023A1029029
Complaint Receipt Date:	03/10/2023
Investigation Initiation Date:	03/14/2023
Report Due Date:	05/09/2023
Licensee Name:	Patti Holland
Licensee Address:	801 W Geneva Dr., Dewitt, MI 48820
Licensee Telephone #:	(517) 669-8457
Administrator:	Patti Holland
Licensee Designee:	Patti Holland
Name of Facility:	Pleasant View AFC
Facility Address:	3016 Risdale Lansing, MI 48911
Facility Telephone #:	(517) 394-6748
Original Issuance Date:	12/12/1992
License Status:	REGULAR
Effective Date:	01/22/2022
Expiration Date:	01/21/2024
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED

	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED ALZHEIMERS
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II. ALLEGATION(S)

	Violation Established?
Pleasant View AFC is not staffed appropriately to meet the resident's needs.	No
A direct care staff member was fired for physically abusing a resident and was rehired to work at the facility.	No
Direct care staff member Ms. Johnston has crushed up pills on the kitchen counter and consumed them herself. A resident found Ms. Johnston passed out in the basement due to an overdose.	No
The trash service has stopped at Pleasant View AFC due to nonpayment and there is trash piled up against the facility and out by the road.	No
There is black mold on the basement walls which was painted. There are concerns there is still black mold in the facility.	Yes
The fire alarms would not turn off due to faulty electrical equipment.	Yes

II. METHODOLOGY

03/10/2023	Special Investigation Intake 2023A1029029
03/13/2023	APS Referral - Referral was sent from denied APS.
03/14/2023	Special Investigation Initiated – Telephone to complainant, LM, Roquel Burtley, mailbox full, and Chastidy Johnson (left message), spoke to direct care staff member Alicia Alden.
03/14/2023	Referral - Recipient Rights referral made to CEI CMH
03/16/2023	Contact - Telephone call made Chastidy Johnston
03/31/2023	Inspection Completed On-site – face to face with Christina Alicia, Resident A, Resident B at Pleasant View AFC

04/18/2023	Contact - Telephone call made to Licensee designee Patti Holland
04/20/2023	Contact - Document Received - Emails from Patti Holland with requested documents.
04/24/2023	Contact - Document Received - Emails from Patti Holland with requested documents.
04/25/2023	Contact - Telephone call made to Taleah Etchison, Guardian A1 (left message), Greg Fox (left message)
04/26/2023	Inspection Completed On-site – face to face with Christina Alicia, Ms. Wallace, Ms. Johnston, Resident A, Resident B, Resident E at Pleasant View AFC, voice mail from Greg Fox, ORR.
04/28/2023	Contact – Telephone call to DeLau Fire Services, Stephanie White, Greg Fox, ORR (left message)
04/28/2023	Exit conference with licensee designee Patti Holland

ALLEGATION:

Pleasant View AFC is not staffed appropriately to meet the resident’s needs.

INVESTIGATION:

On March 10, 2023, a complaint was received via a denied adult protective services referral from Centralized Intake with concerns Pleasant View AFC was not staffed appropriately to meet the residents needs. According to the complaint allegations, there was one direct care staff member working on February 22, 2023 causing a resident to miss a medical appointment.

On March 14, 2023, I interviewed direct care staff member Alicia Alden. Ms. Alden stated there are twelve residents now and there are two direct care staff members on first and second shift plus usually a manager and activities / driver who is working in addition to two direct care staff members. Ms. Alden stated she typically works third shift which includes one direct care staff member and a manager who is on call in case assistance is needed.

On March 16, 2023 I contacted direct care staff member, whose current role is home manager, Chastidy Johnston. Ms. Johnston stated there is one person from 7:00 a.m.– 10:00 a.m. for the first three hours, two direct care staff members for the daytime with the second direct care staff member scheduled to leave at 7:00 p.m. Ms. Johnston stated there are two direct care staff members from 10:00 a.m-7:00 p.m. Ms. Johnston

stated there are no residents who require the assistance of two direct care staff members for transferring or mobility. Ms. Johnson stated the two residents who utilize wheelchairs are both able to transfer on their own.

On March 31, 2023, I interviewed direct care staff member Christina Alicia at Pleasant View AFC. Ms. Alicia stated she typically works with one other direct care staff member. Ms. Alicia stated they are able to meet all resident needs. Ms. Alicia stated the only resident who requires the assistance of two direct care staff members is Resident C because when she is not feeling well she will fall and there is a hooyer lift to use. Ms. Alicia stated she does not need to use the hooyer lift for daily care for Resident C but if she falls it is easier to use this.

On March 31, 2023, I interviewed Residents A and B. Resident A and Resident B both stated there were typically two direct care staff members working at a time except in the mornings. Resident A stated all her needs are met and she has never required assistance and not received it while living at Pleasant View AFC.

On April 18, 2023, I interviewed licensee designee Patti Holland. Ms. Holland stated there is one direct care staff member working until 7:00 a.m.-10:00 a.m. Ms. Holland stated there is also one direct care staff member from 7:00 p.m.-9:00 p.m. at night and the rest of the time there are two direct care staff members working. Ms. Holland stated a resident missed a medical appointment on February 22, 2022 because there was an appointment which was not written down, not because there were not enough direct care staff members working. Ms. Holland stated this appointment was rescheduled. Ms. Holland stated Resident C was not feeling well for about two weeks so she scheduled extra direct care staff members to work and Ms. Johnston who was on call. Ms. Holland stated Resident C does not need to use the Hoyer lift typically but when she was feeling bad due to dehydration for the two weeks, the direct care staff members were doing so. Ms. Holland stated Ms. Johnston showed the direct care staff members how to get Resident C up when she is feeling bad and falls without using the Hoyer lift. Ms. Holland stated when Resident C is feeling well, she can get up on her own and does not require the assistance of two direct care staff members.

On April 25, 2023, I interviewed direct care staff member, Taleah Etchison. Ms. Etchison stated they used to have two direct care staff members from 7:00 a.m.-3:00 p.m. but now there are less residents who require two direct care staff members for personal care assistance. Ms. Etchison stated she now works 10:00 a.m.-7:00 p.m. instead of 7:00 a.m.-3:00 p.m. and the first three hours from 7:00 a.m.-10:00 a.m. there is one direct care staff member working. Ms. Etchison stated Resident C's health has declined due to seizures causing falls and it is easier with two direct care staff members to lift her. Ms. Etchison stated there are three residents with wheelchairs: Resident A, Resident B, and Resident G but they can all transfer themselves.

On April 26, 2023, I interviewed direct care staff member, Megan Wallace at Pleasant View AFC. Ms. Wallace stated on April 25, 2023 Resident J missed a medical appointment but it was because the direct care staff member who was going to take him

did not show up for work and the appointment was rescheduled for the following day. Ms. Wallace did not know of any other times this occurred or if anyone missed an appointment on February 22, 2023. Ms. Wallace stated she typically works with one other direct care staff member except in the early morning. Ms. Wallace stated the only resident who requires the assistance of two direct care staff members is Resident C because her health has declined recently and she is unsteady which has caused her to fall. Ms. Wallace stated Resident C has a Hoyer lift available for use if needed. Ms. Wallace stated when Resident C is feeling well, she does not require the assistance of two direct care staff members.

During the onsite investigation, I reviewed Resident C's *Assessment Plan for AFC Residents* which did not document the need for two direct care staff members to assist with any personal care needs. I also reviewed the staffing schedule for March and April 2023 which was consistent with the description provided by Ms. Johnston with a three hour window of one direct care staff member scheduled to work each day from 7:00 a.m.-10:00 a.m. and two direct care staff members for the remaining hours of the day until 7:00 p.m. According to the staffing schedule, there is one direct care staff member scheduled to work during third shift. According to the *Resident Register*, there are ten residents residing at Pleasant View AFC and two of them were currently in the hospital.

On April 26, 2023, I interviewed Resident E. Resident E stated he feels there is enough direct care staff members working at Pleasant View AFC and that he is always able to get his needs met. Resident E stated sometimes it is hard to get transportation when he wants to go somewhere but he is able to get someone to drive him. Resident E stated he has never observed another resident to need assistance and not receive it.

APPLICABLE RULE	
R 400.14206	Staffing requirements.
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.

ANALYSIS:	<p>Based on my review of all resident <i>Assessment Plan for AFC Residents</i> there are no residents who require the assistance of two direct care staff members for assistance. Ms. Holland, Ms. Wallace, and Ms. Johnston all stated Resident C was not feeling well due to seizures and dehydration which caused her to fall requiring them to have two direct care staff members on during this time, however she can typically ambulate with the assistance of one direct care staff member. Resident C's <i>Assessment Plan for AFC Residents and Health Care Appraisal</i> did not state she requires the assistance of two direct care staff members.</p> <p>According to the staffing schedule, there is always at least one direct care staff member per shift. According to the <i>Resident Register</i>, there are ten residents residing at Pleasant View AFC and two of them were currently in the hospital. Consequently, there is adequate direct care staff to meet the needs of residents.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

A direct care staff member was fired for physically abusing a resident and was rehired to work at the facility.

INVESTIGATION:

On March 10, 2023, a complaint was received via a denied adult protective services referral from Centralized Intake with concerns direct care staff member Ms. White was fired from her employment for physically abusing a resident and licensee designee Patti Holland rehired her to work at the facility in March 2023.

On March 16, 2023 I contacted direct care staff member whose current role is home manager, Chastidy Johnston. Ms. Johnston stated there is an employee, direct care staff member Stephanie White who quit and then came back however she was not under any disciplinary actions when she quit. Ms. Johnston stated Ms. White stopped working in 2022 and she recently came back to work for Pleasant View AFC. Ms. Johnston stated she has never had concerns Ms. White has physically abused any of the residents.

On March 31, 2023, I interviewed direct care staff member Christina Alicia at Pleasant View AFC. Ms. Alicia stated she was not familiar with a direct care staff member who was fired but then came back to work recently. Ms. Alicia was familiar with Ms. White and stated she has never physically abused any of the residents and she still works at Pleasant View AFC.

On March 31, 2023, I interviewed Resident A. Resident A stated Ms. White has never physically abused any resident. Resident A stated she did leave and then came back about six months ago and was supposed to just provide transportation to residents but she also provides direct care.

On April 18, 2023, I interviewed licensee designee Patti Holland. Ms. Holland stated there was an employee named Stephanie White did leave her employment and now she started again, however, she was not fired for physically abusing a resident. Ms. Holland stated the only discipline in Ms. White's file is one for tardiness.

On April 25, 2023, I interviewed direct care staff member, Taleah Etchison. Ms. Etchison stated she does not know if Ms. White was terminated or quit but she is a current employee at Pleasant View AFC. Ms. Etchison stated Ms. White's tone of voice is loud and her attitude seems like she would be "easy to blame."

On April 26, 2023, I reviewed Ms. White's employment record with Ms. Johnston at Pleasant View AFC. There was no documentation she was fired for physically abusing a resident. Ms. Johnston stated she did have a verbal discussion with her regarding tardiness. I verified Ms. White completed all required licensing trainings and reviewed her eligibility letter from Michigan Workforce Background Check from July 2020 showing she was eligible for employment in an AFC setting.

On April 26, 2023, I interviewed direct care staff member Ms. Wallace at Pleasant View AFC. Ms. Wallace stated Ms. White did work at Pleasant View AFC before quitting and then started working again around December 2022. Ms. Wallace stated she has never observed her to physically abuse the residents.

On April 28, 2023, I interviewed direct care staff member, Stephanie White. Ms. White stated she quit employment because it was "too much" and then started there again around July 2022. Ms. White stated she was never disciplined for physically abusing a resident because she would never harm a vulnerable resident. Ms. White stated if she did something like that, then she would not have been able to come back to work at Pleasant View AFC.

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.

ANALYSIS:	There is no indication the resident's safety was not attended to when Ms. White returned to work at Pleasant View AFC. There is no indication she was fired when she left her employment and none of the direct care staff members or residents interviewed have witnessed her being physically abusive to any of the residents.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Direct care staff member Ms. Johnston has crushed up pills on the kitchen counter and consumed them herself. A resident found Ms. Johnston passed out in the basement due to an overdose.

INVESTIGATION:

On March 10, 2023, a complaint was received via a denied adult protective services referral from Centralized Intake. The complaint included concerns direct care staff member Ms. Johnston crushed up pills on the kitchen counter, consumed them and a resident found Ms. Johnston passed out in the basement due to an overdose.

On March 14, 2023, I interviewed direct care staff member Alicia Alden. Ms. Alden stated she has no concerns regarding substance abuse for Ms. Johnston. Ms. Alden stated she has never had concerns direct care staff members have taken any of the resident's medications because she does the narcotics count each shift she is there and there have been no discrepancies.

On March 16, 2023 I interviewed direct care staff member, whose current role is home manager, Chastidy Johnston. Ms. Johnston stated there are no employees with substance issues. Ms. Johnston stated there are no drug tests required to work at Pleasant View AFC. Ms. Johnston stated she has never been passed out in a basement due to an overdose. Ms. Johnston denied she has taken any of the resident medication, used any illegal substances at work, or that she currently has a substance abuse concern.

On March 31, 2023, I interviewed direct care staff member Christina Alicia at Pleasant View AFC. Ms. Alicia stated she has never observed any resident medications missing at Pleasant View AFC or had concerns about Ms. Johnston taking resident medication. Ms. Alicia stated she has never suspected drug use and denied any direct care staff members overdosed in the basement.

On March 31, 2023, I interviewed Residents A and B. Resident A and Resident B both stated they have never had concerns about Ms. Johnston using illegal substances or taking resident medication. Resident A and Resident B both denied they have observed any of the staff members sleeping or passed out from an overdose in the facility.

On April 18, 2023, I interviewed licensee designee Patti Holland. Ms. Holland stated she has never heard any concerns regarding Ms. Johnston taking pills from the residents. Ms. Holland stated Ms. Johnston has fallen asleep at work because she is always filling in at the last minute however she has not done so when she was providing resident care. Ms. Holland stated similar concerns were investigated and there were no violations found (SI 2020A0565014).

On April 24, 2023 I received an email from Ms. Holland which included documentation Ms. Johnston completed a drug test and was negative for all substances on April 24, 2023.

On April 25, 2023, I interviewed direct care staff member Taleah Etchison. Ms. Etchison has never observed Ms. Johnston using drugs.

On April 27, 2023 I interviewed Guardian A1 from Tri-County Guardianship Services. Guardian A1 stated he has been inside Pleasant View AFC because there were two residents who recently moved out and he is the current guardian for Resident A. Guardian A1 stated he has never met the home manager Ms. Johnston but has spoken to her on the phone. Guardian A1 stated during his visits to the home, he has not had concerns any of the staff members were under the influence of drugs or alcohol.

On April 26, 2023, I interviewed direct care staff member Megan Wallace at Pleasant View AFC. Ms. Wallace stated she has never observed any drug use with Ms. Johnston or noticed any medications missing. Ms. Wallace stated she never heard anything about someone being passed out in the basement from an overdose but she does fall asleep often. Ms. Wallace stated she has not observed her to be sleeping when she is supposed to be providing care to residents.

On April 26, 2023, I interviewed Resident E. Resident E stated he is not concerned with direct care staff members using substances while they are working. Resident E states he has only observed direct care staff smoke cigarettes. Resident E stated he has not heard of a staff member overdosing at Pleasant View AFC.

On April 28, 2023, I interviewed direct care staff member, Stephanie White. Ms. White stated she has never had concerns regarding Ms. Johnston using any type of substance abuse. Ms. White stated she believes Ms. Johnston is tired because she is an "older lady and she works a lot of hours." Ms. White stated she has never observed her to use any type of medication or pills in the facility. Ms. White stated no one has ever overdosed in the basement at Pleasant View AFC. Ms. White stated if someone did they would have known because the EMS would have come to the facility.

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training
	(2) Direct care staff shall possess all of the following qualifications: (a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.
ANALYSIS:	There is no indication Ms. Johnston is not suitable to meet the needs of each resident. Ms. Holland denied there have been any concerns regarding substance abuse for Ms. Johnston. Resident A, Resident B, and Resident E all denied the allegations of Ms. Johnston or any other direct care staff members being under the influence of alcohol or drugs while at work and denied knowing of any direct care staff member overdosing in the basement at Pleasant View AFC. Ms. Johnston also tested negative for all substances on April 24, 2023.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

The trash service has stopped at Pleasant View AFC due to nonpayment and there is trash piled up against the facility and out by the road.

INVESTIGATION:

On March 10, 2023, a complaint was received via a denied adult protective services referral from Centralized Intake with concerns trash service had stopped at Pleasant View AFC due to nonpayment and there is a trash piled up against the facility and out by the road.

On March 16, 2023, I contacted direct care staff member whose current role is home manager, Chastidy Johnston. Ms. Johnston stated there are four trash containers and they go out every week and the bill is paid and current. Ms. Johnston stated there is no trash currently piled up against the facility or by the road. Ms. Johnston stated there was a week the trash was not picked up but they took it over to the other licensed AFC. Ms. Johnston stated the credit card which was enrolled to automatically pay for the trash services was lost however when they cancelled the card and received a new one they did not update the new card number with Granger Waste Services. Ms. Johnston stated the only time they had items outside is when they cleaned out the garage and there were old walkers and trash outside for less than 48 hours before the trash was picked up.

On March 31, 2023, I completed an unannounced on-site investigation at Pleasant View AFC which happened to be on trash day. I observed four large trash containers placed

so they could be picked up and by the side of the road. There was no trash on the side of the facility or in the yard.

On April 18, 2023, I interviewed licensee designee Patti Holland. Ms. Holland stated there was an issue where she had an issue with Granger Waste Services because they did not pick up her trash but she took the trash to another facility she owns. Ms. Holland sent a statement showing the trash service was active at Pleasant View AFC and there is a \$777.28 credit on the account because of overpayment.

On April 26, 2023, I completed another on-site investigation at Pleasant View AFC and there was no trash outside of the facility that was not in trash or recycling bins. None of the bins appeared to be overflowing and Ms. Johnston stated the trash service was scheduled for pick up the following day.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.
ANALYSIS:	Based on the interviews with direct care staff members, Ms. Alden, Ms. Johnston, Ms. Wallace and Licensee designee Patti Holland, the trash service was inactive for less than two days because a credit card was lost and was not replaced with Granger Waste Services. Ms. Holland sent verification there is active trash service at Pleasant View AFC by sending her statement from Granger Waste Services. I completed two on-site investigations on March 31, 2023 and April 26, 2023 and there was no trash visible in the yard or near the road which was not contained in garbage bins.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

There is black mold on the basement walls which was painted. There are concerns there is still black mold in the facility.

INVESTIGATION:

On March 10, 2023, a complaint was received via a denied adult protective services referral from Centralized Intake. The complaint included concerns there was black mold on the basement walls which was painted and there may be black mold still in the facility.

On March 16, 2023 I contacted direct care staff member whose current role is home manager, Chastidy Johnston. Ms. Johnston stated there is no black mold in the basement. Ms. Johnston stated to her knowledge there has been no black mold in the basement however there was mold in the bathroom in the basement and it was sprayed and KILZ was put over it.

On March 31, 2023, I interviewed direct care staff member Christina Alicia at Pleasant View AFC. Ms. Alicia stated there was mold in the basement but it has since been painted over. Ms. Alicia was able to show me the basement area and there was dark dirt and mold near a ceiling vent and around the egress window in the basement.

On March 31, 2023, I interviewed Residents A and B. Resident A stated she observed mold in the bathroom floor but it was fixed. Resident B had never observed mold in the facility.

On April 18, 2023, I interviewed licensee designee Patti Holland. Ms. Holland stated there were bits of mold, dark in color, however they cleaned it and then painted over it to kill it. Ms. Holland stated the bottom of the stairs has a leak and this has also been fixed.

On April 25, 2023, I interviewed direct care staff member Taleah Etchison. Ms. Etchison stated she does not believe it is black mold in the basement but there was mold. Ms. Etchison stated someone wiped the ceiling off recently because there was a mixture of mold and dirt. Ms. Etchison stated the basement floods often so it could be mold.

On April 26, 2023, I completed an on-site investigation at Pleasant View AFC and observed the area near the vent and by the window to be clean and repainted. During this visit, there were no signs of mold anywhere in the basement. Ms. Johnston was able to point out other areas in the basement where there was an issue where they cleaned and painted to remedy the issue. Ms. Johnston stated the residents do not have access to the basement area.

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:	During the on-site inspection on March 31, 2023, there was mold observed in the basement area near the egress window and on the ceiling near the vent. When I returned to Pleasant View AFC on April 26, 2023, the area near the vent and by the window to be clean and repainted. During this visit, there were no signs of black mold anywhere in the basement.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

The fire alarms would not turn off due to faulty electrical equipment.

INVESTIGATION:

On March 10, 2023, a complaint was received via a denied adult protective services referral from Centralized Intake with concerns the fire alarms were going off due to faulty electrical equipment.

On March 14, 2023, I interviewed direct care staff member Ms. Alden. Ms. Alden recently stated the fire alarms were going off in the last month and during breakfast the fire alarms went off and she tried everything she could think of by resetting it before calling the Fire Department to assist. Ms. Alden stated the Fire Department told her they said they came out recently to fix the same concern and instructed her to call DeLau Fire Services and they would evaluate and fix the issue. Ms. Alden stated it has not occurred since that time.

On March 16, 2023 I contacted direct care staff member, whose current role is home manager, Chastidy Johnston. Ms. Johnston stated there were issues with the fire alarms. She stated it was the battery-operated alarms that were going off periodically and it would beep for no reason in Resident H's room. Ms. Johnston stated eventually this would set all the alarms off and she could not turn it off using the panel. Ms. Johnston stated DeLau Fire inspected and reported the battery smoke detectors needed to be replaced which was completed. Ms. Johnston stated DeLau Fire inspection did not give them an invoice for this visit.

On April 18, 2023, I interviewed licensee designee Patti Holland. Ms. Holland stated the Lansing Fire Department came out and they realized it was an old battery in one of the smoke detectors setting off the other ones. Ms. Holland stated this is resolved now and there have been no further issues.

On April 25, 2023, I interviewed direct care staff member Taleah Etchison. Ms. Etchison stated she does not know why the fire alarms were going off because they said it was one battery that was making them all go off. The maintenance personnel came and swapped out all the batteries.

On April 26, 2023, I completed an on-site investigation at Pleasant View AFC and observed one of the smoke detectors to be chirping periodically signaling a low battery. Ms. Alicia and Ms. Johnston stated it was the smoke detector in the back hallway near Resident I's bedroom. Ms. Alicia stated they had a battery to change the smoke detector however this was not completed and the smoke detector continued to chirp throughout the inspection. Ms. Johnston was able to set off the fire alarms and I confirmed they were in working order. During the onsite investigation, I reviewed the January 9, 2023 invoice from DeLau for the yearly fire alarm inspection, sprinkler inspection, and backflow certification which indicated the system was working normally.

On April 28, 2023, I contacted DeLau Fire Services and spoke to Amanda Wehring. Ms. Wehring they responded to Pleasant View AFC February 3, 2023 to address intermittent alarms from the 120V and battery backup smoke alarms. Ms. Wehring stated they recommended to the staff at Pleasant View AFC to find the faulty smoke alarms and replace the entire device. Ms. Wehring stated on February 3, 2023 the fire panel was working normal upon arrival and departure so it is possible the low battery sound heard on April 27, 2023 could be from the faulty battery back up smoke alarms needed to be replaced.

APPLICABLE RULE	
R 400.14405	Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions, and changes of category
	(3) The batteries of battery-operated smoke detectors shall be replaced in accordance with the recommendations of the smoke or heat detection equipment manufacturer
ANALYSIS:	On April 26, 2023, I completed an on-site investigation at Pleasant View AFC and observed one of the smoke detectors to be chirping periodically signaling a low battery. Ms. Alicia stated they had a battery to change the smoke detector however this was not completed and the smoke detector continued to chirp. Ms. Wehring from DeLau Fire Services stated it was recommended during the February 2023 inspection to replace all faulty battery back up smoke detectors.
CONCLUSION:	VIOLATION ESTABLISHED

III. RECOMMENDATION

Upon receipt of an approved corrective action plan, I recommend no change in the license status.

Jennifer Browning

Jennifer Browning
Licensing Consultant

04/28/2023

Date

Approved By:

Dawn Timm

05/02/2023

Dawn N. Timm
Area Manager

Date