



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 22, 2024

Zoe Thorn  
4349 Sunnymeade Ave.  
Burton, MI 48519

RE: License #: AM250389333  
Investigation #: 2024A0580021  
Thorn Adult Foster Care

Dear Zoe Thorn:

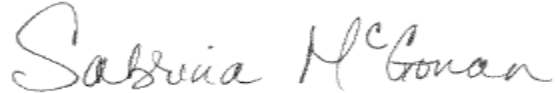
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.

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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan". The signature is written in black ink and is positioned below the word "Sincerely,".

Sabrina McGowan, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 835-1019

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM250389333
<b>Investigation #:</b>	2024A0580021
<b>Complaint Receipt Date:</b>	02/06/2024
<b>Investigation Initiation Date:</b>	02/09/2024
<b>Report Due Date:</b>	04/06/2024
<b>Licensee Name:</b>	Zoe Thorn
<b>Licensee Address:</b>	4349 Sunnymeade Ave. Burton, MI 48519
<b>Licensee Telephone #:</b>	810 337-2196
<b>Administrator:</b>	Zoe Thorn
<b>Licensee Designee:</b>	N/A
<b>Name of Facility:</b>	Thorn Adult Foster Care
<b>Facility Address:</b>	4901 N Saginaw St FLINT, MI 48505
<b>Facility Telephone #:</b>	(810) 785-4234
<b>Original Issuance Date:</b>	10/13/2017
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	04/13/2022
<b>Expiration Date:</b>	04/12/2024
<b>Capacity:</b>	12
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. ALLEGATION(S)

	<b>Violation Established?</b>
This home received a disapproval from Bureau of Fire Services on 1/24/24.	Yes

## III. METHODOLOGY

02/06/2024	Special Investigation Intake 2024A0580021
02/09/2024	Special Investigation Initiated - On Site Unannounced onsite inspection.
02/13/2024	Contact - Telephone call made Spoke with licensee, Zoey Thorn.
03/06/2024	Contact - Document Received Email received from licensee Thorn.
03/14/2024	Contact - Document Received Email received from licensee Thorn.
03/20/2024	Inspection Completed On-site Onsite inspection.
03/22/2024	Exit Conference Exit conference with licensee, Zoey Thorn.

## **ALLEGATION:**

This home received a disapproval from Bureau of Fire Services on 1/24/24.

## **INVESTIGATION:**

On 02/06/2024, I requested that a complaint be initiated, based on the disapproved Bureau of Fire Services (BFS) Report received for Thorn Adult Foster Care dated 01/24/2024. The report indicates that at the time of the inspection, there was no Written Emergency Plan available for review, the last documented annual inspection, testing and maintenance of the fire alarm system was late, last documented in December of 2022, and monthly inspections of the Fire Extinguishers has not been conducted since March 2023.

On 02/09/2024, I conducted an onsite inspection at Thorn Adult Foster Care. There was no answer at the door. A follow-up email was sent to licensee Zoe Thorn regarding no one being present at the home. Licensee Thorn responded that she is not working today and unsure if an outing was scheduled for the day.

On 02/13/2024, I spoke with Licensee, Zoe Thorn regarding the disapproved (BFS) rating. Licensee Thorn stated that the staff present on the day of the inspection could not locate the Written Emergency Plan. It has since been made visible to the other staff and residents in the home. The alarm system testing has been scheduled for 03/14/2024.

On 03/06/2024, I received a copy of the written emergency evacuation procedures for the home. Licensee Thorn stated that this copy was also submitted to the BFS.

On 03/14/2024, I received a copy of fire alarm system testing conducted at Thorn AFC, by Fire Systems of Michigan on 03/13/2024, which indicates that the system passed inspection.

On 03/20/2024, I conducted an onsite renewal inspection at Thorn AFC. At that time, I determined that the written evacuation plan was visibly posted in the home. Fire extinguishers on each level of the home had the current month's inspection. Residents were observed in the living/dining area where they were watching television and preparing to be seated for lunch. Residents were observed as being adequately dressed and groomed. They appeared to be receiving adequate care.

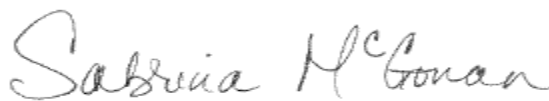
Licensee Thorn provided a copy of the BFS Report dated 03/14/2024, which indicates that their office received and approved the plan of correction cited on the annual inspection.

<b>APPLICABLE RULE</b>	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	<b>(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</b>
<b>ANALYSIS:</b>	On 01/24/2024, Thorn Adult Foster Care received a disapproved BFS rating due to the home's Written Emergency Plan not being available for review, late testing, and maintenance of the fire alarm system, last documented in December of 2022, and monthly inspections of the Fire Extinguishers, not having been conducted since March of 2023.  Based on this information there is sufficient evidence to support the rule violation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 03/22/2024, I conducted an exit conference with the licensee designee, Zoe. Thorn. Licensee Thorn was informed of the findings of this investigation.

#### IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no change to the status of the license is recommended.



March 22, 2024

Sabrina McGowan  
Licensing Consultant

Date

Approved By:



March 22, 2024

Mary E. Holton  
Area Manager

Date