



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 10, 2024

Keristin Baker
KC Assisted Living Corporation
7884 Emery Rd
Portland, MI 48875

RE: License #: AM340410910
Investigation #: 2024A0622014
Country Living Senior Care

Dear Ms. Baker:

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.

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) 284-9727.

Sincerely,

A handwritten signature in black ink, appearing to read "Amanda Blasius".

Amanda Blasius, 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 #:	AM340410910
Investigation #:	2024A0622014
Complaint Receipt Date:	02/28/2024
Investigation Initiation Date:	03/01/2024
Report Due Date:	04/28/2024
Licensee Name:	KC Assisted Living Corporation
Licensee Address:	7884 Emery Rd Portland, MI 48875
Licensee Telephone #:	(517) 647-4920
Administrator:	Keristin Baker
Licensee Designee:	Keristin Baker
Name of Facility:	Country Living Senior Care
Facility Address:	7884 Emery Rd Portland, MI 48875
Facility Telephone #:	(517) 647-4920
Original Issuance Date:	04/18/2022
License Status:	REGULAR
Effective Date:	10/18/2022
Expiration Date:	10/17/2024
Capacity:	12
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
The facility was determined to be in substantial noncompliance during a Bureau of Fire Services inspection on 2/14/24.	Yes

III. METHODOLOGY

02/28/2024	Special Investigation Intake 2024A0622014
03/01/2024	Special Investigation Initiated – Telephone call with BFS inspector Philip Scheer.
03/13/2024	Inspection Completed-BCAL Sub. Compliance
03/13/2024	Contact - Telephone call made with licensee.
04/04/2024	Document received from licensee.
04/08/2024	Documentation received from licensee
04/09/2024	Exit conference

ALLEGATION: The facility was determined to be in substantial noncompliance during a Bureau of Fire Services inspection on 2/14/24.

INVESTIGATION:

On 02/14/2024, I received documentation from the Bureau of Fire Services (BFS), that Country Living AFC was determined to be in substantial non-compliance during an onsite BFS inspection conducted on 02/14/2024. I received and reviewed a *Bureau of Fire Services Inspection Report*, authored by BFS Inspector Phillip Scheer. The Bureau of Fire Services Inspector found the facility to be in substantial non-compliance with fire safety rules and documented, in part, the following rule violations:

1. A registered architect or engineer shall submit plans and specifications to the Bureau of Fire Services for all projects that involve construction, additions, remodeling, or conversions.

Inspector comments stated the following “submit plans and specifications to the Bureau of Fire Services for the construction that is being done on the facility.”

On 03/01/2024, I interviewed BFS inspector Phillip Scheer via phone. He reported that Country Living AFC added additional bedrooms to their facility but did not submit any plans regarding the construction completed. He stated that he has spoken with the licensee several times and is trying to help guide them and their architect through the process. As of 03/1/2024, he reported he has not received any submitted plans.

On 03/13/2024, I completed an unannounced onsite investigation. During the investigation I completed a walkthrough of the facility and viewed fire safety documents and did not observe any additional violations. During the investigation, I spoke with Courtney Shafer, administrator. Ms. Shafer stated that in the fall of 2022, their architect attempted to drop off the construction plans to the Bureau of Fire Services office in Lansing. When he arrived, the office was closed due to COVID. It was reported that he then put the plans in the mail. Ms. Shafer reported that when she talked to BFS she was told that they were received but were never logged. Ms. Shafer explained that BFS no longer accepts mailed documents, and the plans need to be submitted electronically. Ms. Shafer stated she is working with her architect and BFS to re-submit the plans electronically.

On 04/04/2024, the licensee, Keristin Baker, provided a letter from her architect, Paul Barbour, dated 03/28/24. The letter stated the following:

“As we discussed in the Fall of 2022 when the drawings were ready for your Building Permit and the State’s Plan Review, getting the drawings delivered to the Department was a bit of a challenge. I was told by you relaying information from the State’s Inspector that I was to hand deliver the drawings, which I attempted to do. Their website listed their address as in a suite in a strip office building located just south of the new McClaren Hospital. When I got there, their suite was occupied by or being made ready for another tenant. I called the Department’s phone from my car to locate where I was to deliver to. The nice receptionist told me that they were now downtown in the State’s building complex but that because of Covid protocol I couldn’t hand deliver. She said someone would call me to tell me where to mail the drawings. After several days I received the address and delivered the drawings to the Post Office.

You have beautiful facility and I certainly hope this gets all straightened out shortly.”

On 04/04/2024, I reviewed documentation from the file. On 11/15/2022, a temporary rating was issued for not submitting documentation of their plans for their construction until 03/15/2023. On 01/30/2023, another temporary approval was given until 04/06/2023. On 02/14/2024, BFS Inspector Scheer determined the facility to be in substantial non-compliance due to the missing documentation of their plans for their construction and no progress being made towards correcting the non-compliance.

On 04/08/2024, licensee Ms. Baker provided their contacts with the Bureau of Fire Services.

- 3/2/2023 – Emailed BFS regarding our plans submitted the first time.
- 3/29/23 – Architect submitted the plans via the mail.
- 2/14/24 – Email to Shawn McGhee to see what happened to the plans that we submitted almost a year ago. He responded telling us how to look them.
- Attempted to call him and left multiple voicemails. No response was received.
- 3/11/24 – Email to Philip Scheer & Shawn McGhee. No response was received.
- 3/22/24- Spoke with Shawn McGhee’s supervisor. Was instructed to re-submit the plans.
- 3/28/24 – Submitted plans online. Emailed Philip Scheer to let him know they have been submitted through the portal.

APPLICABLE RULE	
MCL 400.720	Certificate of approval from bureau of fire services and department; compliance; denial or certification with limitations; hearing.
	(1) The department shall not issue a temporary, provisional, or regular license to an adult foster care facility with a capacity of more than 6 adults until the facility receives a certificate of approval from the bureau of fire services created in section 1b of the fire prevention code, 1941 PA 207, MCL 29.1b, after compliance with fire safety standards prescribed in rules promulgated by the bureau of fire services pursuant to section 10(2).
ANALYSIS:	Based on the documentation from the Bureau of Fire Services, it was determined that temporary approval was given on 11/15/2022 and again on 01/30/2023. On 02/14/2024, the facility was determined to be in substantial non-compliance due to a lack of progress towards correcting the violations cited in previous inspections, specifically submitting sealed architectural plans to the Bureau of Fire Services for review. The licensee is currently working with the inspector to correct this issue and the plans have been submitted for review and are pending approval. Due to the length of time between the first temporary approval rating and the substantial non-compliance was issued a violation was established.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend that the status of the license remains the same.



04/08/24

Amanda Blasius
Licensing Consultant

Date

Approved By:



04/10/2024

Dawn N. Timm
Area Manager

Date