



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 5, 2025

Subbu Subbiah  
Woodland Park Assisted Living LLC  
2585 Stanton St.  
Canton, MI 48188

RE: License #: AM250309137  
Investigation #: 2025A0580016  
Woodland Park Assisted Living

Dear Subbu Subbiah:

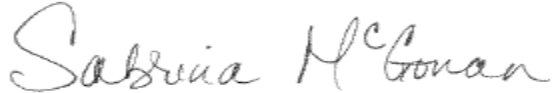
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 ink is dark and the signature is fluid.

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>	AM250309137
<b>Investigation #:</b>	2025A0580016
<b>Complaint Receipt Date:</b>	01/17/2025
<b>Investigation Initiation Date:</b>	01/22/2025
<b>Report Due Date:</b>	03/18/2025
<b>Licensee Name:</b>	Woodland Park Assisted Living LLC
<b>Licensee Address:</b>	2363 E. Coldwater Rd. Flint, MI 48505
<b>Licensee Telephone #:</b>	(812) 202-9149
<b>Administrator:</b>	Ponnammal Subbiah
<b>Licensee Designee:</b>	Subbu Subbiah
<b>Name of Facility:</b>	Woodland Park Assisted Living
<b>Facility Address:</b>	2363 E. Coldwater Road Flint, MI 48505
<b>Facility Telephone #:</b>	(812) 202-9149
<b>Original Issuance Date:</b>	09/22/2011
<b>License Status:</b>	1ST PROVISIONAL
<b>Effective Date:</b>	02/27/2025
<b>Expiration Date:</b>	08/26/2025
<b>Capacity:</b>	12
<b>Program Type:</b>	ALZHEIMERS AGED

## II. ALLEGATION(S)

	Violation Established?
The home received a disapproval from Bureau of Fire Services.	Yes

## III. METHODOLOGY

01/17/2025	Special Investigation Intake 2025A0580016
01/22/2025	Special Investigation Initiated - On Site Onsite inspection.
02/18/2025	Contact - Document Received Document received.
02/21/2025	Inspection Completed On-site Follow-up onsite inspection.
03/04/2025	Contact - Document Received Copy of BFS Approved Report.
03/05/2025	Exit Conference Exit with Licensee Designee, Subbu Subbiah.

### ALLEGATION:

**The home received a disapproval from Bureau of Fire Services.**

### INVESTIGATION:

On 01/17/2025 I received a complaint via LARA-BCHS-Complaints due to a disapproved Bureau of Fire Services (BFS) report. The report indicates that on 01/14/2025 at the time of the BFS inspection, the smoke detector in the basement was chirping, indicating a low battery, the exit lights and emergency lights did not have a

monthly or yearly inspection report for review, nor was there an annual fire alarm and fire extinguisher inspection report available for review.

On 01/22/2025, I conducted an onsite inspection at Woodland Park Assisted Living. Contact was made with Vincent Bird, New Owner of the facility, operating under the current license. Owner Bird stated that with this being their first fire inspection he was not able to locate the documents being requested during the inspection, however, they were present. Owner Bird will provide the required documentation to the BFS as part of his corrective action plan. The exit sign batteries do need replacing, which he will take care of by purchasing as soon as possible. Batteries in the smoke detector were replaced. No smoke detector was not chirping at the time of the onsite visit.

On 02/18/2025, I received a copy of the corrective action plan submitted to the BFS. The plan reads as follows:

*At the time of inspection, it was noted that the smoke detector in the basement was chirping. The 9V batteries in our smoke detectors have been replaced with new ones. We will replace any and all bad batteries in a timely manner going forward.*

*At the time of inspection, I was unable to produce the most recent alarm inspection report due to not knowing where it was kept. After a conversation with the alarm company, they told me that documents are kept in the box where the alarm is. I will continue to keep documents there and will be able to produce them upon request from now on.*

*At time of inspection, the kitchen and living room exit signs had backup batteries that were no good. I have since replaced them with new ones and will continue to monitor them on a weekly basis. We also did not have a monthly or yearly inspection report for review. We have since created an inspection report that we will maintain for future compliance.*

On 02/21/2025, I conducted a follow-up onsite inspection at Woodland Park Assisted Living. Owner Vincent Bird stated that BFS visited the facility on 02/19/2025. The deficiencies noted during the BFS Inspection have been completed.

On 03/04/2025, I received a copy of the approved BFS Inspection report completed on 02/19/2025, which indicates that deficiencies noted in the last inspection have been satisfactorily corrected.

<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>	<p>It was alleged that the facility received a disapproval rating from BFS. The Bureau of Fire Services report dated 1/14/2024 cited disapproval of this home due to the smoke detector in the basement was chirping, indicating a low battery, the exit lights and emergency lights did not have a monthly or yearly inspection report for review, nor was there an annual fire alarm inspection report available for review.</p> <p>Owner, Vincent Bird stated that with this being their first fire inspection he was not able to locate the documents being requested during the inspection.</p> <p>I reviewed a copy of the corrective action plan submitted to the BFS.</p> <p>On 02/21/2025, while onsite, I noted that the deficiencies found during the 01/14/2025 BFS Inspection have been completed.</p> <p>On 03/04/2025, I received a copy of the approved BFS follow-up inspection report completed on 02/19/2025, which indicates that deficiencies noted in the last inspection have been satisfactorily corrected.</p> <p>Based upon my investigation, as well as a review of relevant facility documents pertinent to the allegation, there is enough evidence to support the rule violation.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 03/05/2025, I conducted an exit conference with the licensee, Subbu Subbiah. Licensee Subbiah was informed of the findings of this investigation.

#### IV. RECOMMENDATION

Contingent upon receipt of an appropriate corrective action plan, no change to the status of the license is recommended.



March 5, 2025

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Sabrina McGowan  
Licensing Consultant

Date

Approved By:



March 5, 2025

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Mary E. Holton  
Area Manager

Date