



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 18, 2020

Lori Labrie  
KJB TENANT BAY CITY LLC  
Suite K  
1584 Charlotte Circle  
Naperville, IL 60564

RE: License #:	AL090393451
Investigation #:	2020A0123030
	Charter Senior Living at Bay City 1

Dear Ms. Labrie:

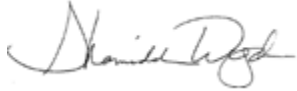
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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 (989) 787-7031.

Sincerely,



Shamidah Wyden, Licensing Consultant  
Bureau of Community and Health Systems  
411 Genesee  
P.O. Box 5070  
Saginaw, MI 48605  
989-395-6853

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL090393451
<b>Investigation #:</b>	2020A0123030
<b>Complaint Receipt Date:</b>	05/11/2020
<b>Investigation Initiation Date:</b>	05/11/2020
<b>Report Due Date:</b>	07/10/2020
<b>Licensee Name:</b>	KJB TENANT BAY CITY LLC
<b>Licensee Address:</b>	Suite K 1584 Charlotte Circle Naperville, IL 60564
<b>Licensee Telephone #:</b>	(312) 401-2188
<b>Administrator:</b>	Lori Labrie
<b>Licensee Designee:</b>	Lori Labrie
<b>Name of Facility:</b>	Charter Senior Living at Bay City 1
<b>Facility Address:</b>	568 North Pine Road Bay City, MI 48708
<b>Facility Telephone #:</b>	(989) 778-1713
<b>Original Issuance Date:</b>	08/02/2018
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	02/02/2019
<b>Expiration Date:</b>	02/01/2021
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
The head cook, staff Cleotha Jennings, uses crack cocaine before work and during his lunch hour.	No
Staff Teofila Harrell is unable to pass a background check.	Yes

## III. METHODOLOGY

05/11/2020	Special Investigation Intake 2020A0123030
05/11/2020	Special Investigation Initiated - Telephone I spoke with Complainant 1 via phone.
05/11/2020	APS Referral Information received regarding APS referral.
05/13/2020	Contact - Telephone call made I made a call to the facility and spoke with Alicia Neitzel via phone.
05/13/2020	Contact - Telephone call received I received a call from Ms. Neitzel.
05/18/2020	Contact - Telephone call made I spoke with staff Cleotha Jennings via phone.
05/20/2020	Contact - Telephone call made I spoke with staff Teofila Harrell via phone.
05/27/2020	Contact - Telephone call made I left a voicemail requesting a return call from staff Lisa VanDusen.
05/27/2020	Contact - Telephone call made I spoke with staff Richard Sirianni via phone.
05/30/2020	Contact - Telephone call received I received a voicemail from Ms. VanDusen, requesting a return call.
06/01/2020	Contact - Telephone call made I spoke with Staff VanDusen via phone.
06/15/2020	Contact- Document Sent I sent an email to Ann Despotovic at the Workforce Background Check to inquire about Ms. Harrell.

06/15/2020	Exit Conference- I spoke with designated person Alicia Neitzel via phone.
06/16/2020	Contact- Document Received I received an email response from Ms. Despotovic.

**ALLEGATION: The head cook, staff Cleoetha Jennings, uses crack cocaine before work and during his lunch hour.**

**INVESTIGATION:** On 05/11/2020, I spoke with Complainant 1 via phone. Complainant 1 stated that staff Cleoetha Jennings does drugs in his vehicle or goes home to do it during lunch. Complainant 1 stated that they have not personally witnessed this behavior. Complainant 1 stated that their main concern is Mr. Jennings working while under the influence. Complainant 1 stated that they visited the facility the other day and saw that Mr. Jennings appeared to be under the influence. Complainant 1 stated that Mr. Jennings has “lost a ton of weight, is red under his eyes, and looks as though he has not slept”. Complainant 1 stated that Mr. Jennings has “fake urine” in his car.

On 05/13/2020, I spoke with executive director Alicia Neitzel via phone. Ms. Neitzel stated that Mr. Jennings is on a performance plan, due to not meeting expectations. She stated that Mr. Jennings was not trained when he started about a year ago, and when the previous food director quit, Mr. Jennings was bumped up to the position. Ms. Neitzel stated that she has heard suspicions that Mr. Jennings had drug deals going on in the facility’s parking lot, but she denied personally witnessing this. She stated that Mr. Jennings takes more breaks than usual and will disappear for 45 minutes at a time. She stated that on Friday, he was hyper, jittery, and could not stop moving and that his pupils appeared enlarged.

On 05/13/2020, I received a follow-up call from Ms. Neitzel. Ms. Neitzel stated that she brought Mr. Jennings in for a performance review today, and that he was okay with a drug screen, then his demeanor changed when he found out that he had to go immediately. She stated that Mr. Jennings quit on the spot.

On 05/18/2020, I spoke with Mr. Jennings via phone. He denied the allegations. He stated that he no longer works at the facility, and that he resigned last Wednesday. When asked if he knew why someone would allege that he used drugs at the facility, he stated “not really” but that he has had a few girlfriends out of his life, and that one used to work at the facility as well.

On 05/20/2020, I interviewed staff Teofila Harrell via phone. Ms. Harrell stated that she had concerns a couple of times regarding Mr. Jennings. She stated that he would go to the bathroom, with the lights off, and would be acting weird and sniffing. Ms. Harrell stated that the concerns were reported to the previous executive director, but the complaint did not get anywhere. Ms. Harrell stated that she has never

observed Mr. Jennings doing drugs, but stated that he would go missing periodically, then would reappear.

On 05/27/2020, I interviewed former staff Richard Sirianni, a former cook for the facility. Mr. Sirianni stated that Mr. Jennings had displayed concerning behaviors. He stated that Mr. Jennings had him (Mr. Sirianni) terminated. He stated that Mr. Jennings was frequently not present during his scheduled work shifts, and that “word on the street” is that Mr. Jennings was on drugs. He stated that Mr. Jennings was not always up to speed and would disappear during his shift. He stated that he tried speaking with management about Mr. Jennings. He stated that Mr. Jennings would pop his head in the kitchen once or twice and was never around for meal periods.

On 06/01/2020, I spoke with Staff Lisa VanDusen via phone. Ms. VanDusen stated that there were rumors about Mr. Jennings using drugs, but “you don’t know what to believe”. She stated that she never knew whether or not Mr. Jennings was under the influence. Ms. VanDusen denied observing Mr. Jennings using drugs at the facility.

<b>APPLICABLE RULE</b>	
<b>R 400.15204</b>	<b>Direct care staff; qualifications and training.</b>
	<b>(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.</b>
<b>ANALYSIS:</b>	There is not a preponderance of evidence to substantiate a rule violation in regard to suitability for staff Jennings. Staff were interviewed and denied ever observing Mr. Jennings using drugs at the facility. Staff reported only hearing rumors and having concerns about Mr. Jennings’ behavior. During the course of this investigation Mr. Jennings was asked to complete a drug screen, but instead chose to quit, and no longer works at the facility. There is not sufficient evidence in regard to Mr. Jennings’ alleged drug use while at the facility.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION: Staff Teofila Harrell is unable to pass a background check.**

**INVESTIGATION:** On 05/11/2020, I spoke with Complainant 1 via phone. Complainant 1 stated that Staff Teofila Harrell cannot pass a background check.

On 05/13/2020, I spoke with executive director Alicia Neitzel via phone. Ms. Neitzel stated that Ms. Harrell was a receptionist that got promoted to office manager. She

reviewed Ms. Harrell's information during this call and stated that she could not locate her background check. She stated that a check was ran in the Workforce Background Check system, but it was "withdrawn."

On 05/13/2020, I received a follow-up call from Ms. Neitzel. She reported that she spoke with a Workforce Background Check representative and was informed that Ms. Harrell is not eligible to work until September 10, 2020. She stated that Ms. Harrell's employment will be terminated tomorrow morning, and that she will be going through each employee's file to review background check information.

On 05/20/2020, I interviewed staff Teofila Harrell via phone. Ms. Harrell stated that her employment has been terminated. She stated that whatever came up in the system was incorrect, and that she has hired a lawyer. She stated that her record should reflect a misdemeanor from 2004, not a felony. She stated that the information from the background check does not match the information obtained from the State Police records. She stated that she is awaiting a call back from LARA regarding the matter.

On 06/01/2020, I spoke with direct care staff person Lisa VanDusen via phone. When asked if she had any knowledge of individuals working without a background check on file, she stated that she heard that Ms. Harrell did not have a background check. She stated that the previous business manager considered many people to be her friend, and hired these people in. She stated that she heard that the business manager did not do background checks but told the previous executive director, Lorie Labrie, that she did. She stated that the previous business manager hired a lot of her family members and friends.

On 06/16/2020, I received an email response from Ann Despotovic, from Licensing and Regulatory Affairs, regarding Staff Harrell's Workforce Background Check. The email states that an application was started on 09/21/2018 for staff Harrell to work at Charter Senior Living at Bay City 1, but the process was never completed. The application was withdrawn, and Ms. Harrell was never fingerprinted to work at the facility.

<b>APPLICABLE RULE</b>	
<b>MCL 400.734b</b>	<b>Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; determination of existence of national criminal history; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.</b>
	<b>(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ</b>

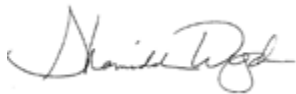
	<p>or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.</p>
<p><b>ANALYSIS:</b></p>	<p>There is a preponderance of evidence to substantiate a rule violation. During the course of this investigation, it was concluded that staff Teofila Harrell did not have a completed criminal history check on file with the facility, through the Workforce Background Check. It was confirmed that the application was not processed completely, and Staff Harrell was never fingerprinted.</p>
<p><b>CONCLUSION:</b></p>	<p><b>VIOLATION ESTABLISHED</b></p>

On 06/15/2020, I conducted an exit conference with designated person/executive director Alicia Neitzel via phone. I informed her of the findings and conclusions.



**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license to this AFC large group home (Capacity 1-20).



06/17/2020

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Shamidah Wyden  
Licensing Consultant

Date

Approved By:



06/18/2020

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Jerry Hendrick  
Area Manager

Date