



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 14, 2021

Christine Nash
2801 S 29 Road
Cadillac, MI 49601

RE: License #: AF830390262
Investigation #: 2021A0870023
Hidden Acres

Dear Ms. Nash:

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 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 dark ink, appearing to read "Bruce A. Messer". The signature is fluid and cursive.

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

enclosure

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

I. IDENTIFYING INFORMATION

| | |
|---------------------------------------|--------------------------------------|
| License #: | AF830390262 |
| Investigation #: | 2021A0870023 |
| Complaint Receipt Date: | 05/27/2021 |
| Investigation Initiation Date: | 05/27/2021 |
| Report Due Date: | 07/26/2021 |
| Licensee Name: | Christine Nash |
| Licensee Address: | 2801 S 29 Road CADILLAC, MI 49601 |
| Licensee Telephone #: | (231) 884-8444 |
| Name of Facility: | Hidden Acres |
| Facility Address: | 2801 S 29 Road Cadillac, MI 49601 |
| Facility Telephone #: | (231) 884-8466 |
| Original Issuance Date: | 01/09/2018 |
| License Status: | REGULAR |
| Effective Date: | 07/09/2020 |
| Expiration Date: | 07/08/2022 |
| Capacity: | 6 |
| Program Type: | PHYSICALLY HANDICAPPED AGED |

II. ALLEGATION(S)

| | Violation Established? |
|---|-----------------------------------|
| The Licensee's son Kevin uses excessive alcohol and Meth. | No |
| The Licensee is rude to the residents. | No |
| The Licensee does not take Resident A to her medical appointments. | No |
| The Licensee does not provide Resident A with her medication as ordered and takes Resident A's medications herself. | No |
| The residents' laundry is not done. | No |
| The dogs poop on the floor. | No |
| Resident A's bed is soaked in urine. | No |
| Additional Findings | Yes |

III. METHODOLOGY

| | |
|------------|---|
| 05/27/2021 | Special Investigation Intake 2021A0870023 |
| 05/27/2021 | Special Investigation Initiated - Telephone Telephone call with Wexford County DHHS APS worker Heather Dorman. |
| 05/27/2021 | APS Referral This came from MDHHS APS. |
| 05/28/2021 | Inspection Completed On-site |
| 06/02/2021 | Contact - Telephone call made Email exchange with APS worker Heather Dorman. |
| 06/03/2021 | Contact - Telephone call made Telephone call with APS worker Heather Dorman. |
| 06/11/2021 | Contact - Telephone call made Email exchange with Dee Wilkinson, AAANM. |
| 06/14/2021 | Exit Conference |

| | |
|------------|--|
| | Completed with Licensee Christine Nash. |
| 06/14/2021 | Inspection Completed-BCAL Sub. Compliance |
| 06/14/2021 | Corrective Action Plan Requested and Due on 06/30/202. |

ALLEGATION: The Licensee’s son Kevin uses excessive alcohol and Meth.

INVESTIGATION: On May 27, 2021, I spoke by telephone with Wexford County/Michigan Department of Health and Human Services, Adult Protective Services worker, Heather Dorman. Ms. Dorman and I discussed the above stated allegations and coordinated a joint unannounced on-site investigation for the following day.

On May 28, 2021, I conducted an unannounced on-site special investigation at the Hidden Acres AFC home. I was accompanied by Ms. Dorman. We spoke with Licensee Christine Nash and informed her of the above allegations. Ms. Nash stated that her son Kevin Schonebeck does work for her at the AFC home but is not left “in charge” or alone to care for the residents. She described his duties as “cooking and “doing the running.” Ms. Nash denied that Ms. Schonebeck excessively uses alcohol while performing his work duties, that he has ever been under the influence of alcohol while performing his work duties and denied that he uses Methamphetamine. Ms. Nash stated Mr. Schonebeck recently moved into this AFC family home with her in early May following a split with his wife, who was a former employee of the facility. Ms. Nash stated that Mr. Schonebeck completed a background check through the State long term care background check system and was found to be eligible for employment. She provided the “eligibility letter” for my viewing.

On May 28, 2021, I conducted an interview with Kevin Schonebeck. Mr. Schonebeck denied using methamphetamine but acknowledged that he uses alcohol, stating “I’m an alcoholic.” He noted he is “trying to stop” and has reduced his consumption in recent weeks. Mr. Schonebeck denied using alcohol during his work hours. He described his duties as cooking and doing maintenance, running errands. He denied providing personal care or being “in charge or alone” while caring for the facility residents.

On May 28, 2021, I conducted separate interviews with Residents B, D and E. Each were interviewed separately at the facility. Each of these residents stated they knew Kevin Schonebeck and stated he was a “good guy”, “nice”, “helpful” and they “have no concerns” about him. Each denied ever seeing Mr. Schonebeck use alcohol or drugs or appear to be intoxicated.

I attempted to conduct interviews with Residents A and C. They were unable to provide information or conduct an interview due to their health.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.1404 | Licensee, responsible person, and member of the household; qualifications. |
| | (5) All responsible persons and members of the household shall be of good moral character and suitable temperament to assure the welfare of residents. |
| ANALYSIS: | <p>Licensee Christine Nash and staff member Kevin Schonebeck both deny that Mr. Schonebeck uses alcohol while on duty, is under the influence while on duty or that he uses Methamphetamine.</p> <p>Residents B, D and E all denied ever seeing Mr. Schonebeck use alcohol or drugs or appear to be intoxicated.</p> <p>Staff member/responsible person Kevin Schonebeck is of good moral character and is of a suitable temperament to assure the welfare of the residents.</p> |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: The Licensee is rude to the residents.

INVESTIGATION: Ms. Nash denied she is ever rude to any of her residents.

Mr. Schonebeck denied that Ms. Nash is rude to any of her residents.

Residents B, D and E were interviewed separately and in private at the facility. Each stated Ms. Nash is “never rude”, “very nice”, that they have “no concerns with Christine”, and that she “does a great job.”

I attempted to conduct interviews with Residents A and C. They were unable to provide information or conduct an interview due to their health.

Ms. Dorman provided me with a copy of the Annual Report of Guardian completed by Family Member -1, signed April 17, 2021. In this report to the court, Family Member -1 notes, “Christine, the owner of Hidden Acres, is experienced, caring and looks after Resident A.” He also noted, “She (Resident A) has found good people at Hidden Acres”, “Resident A is lucky to have Christine, as are we”, “She (Resident A) is happy”, “Likes the people she lives with.”

| APPLICABLE RULE | |
|------------------------|---|
| R 400.1412 | Resident behavior management; prohibitions. |
| | <p>(2) A licensee, responsible person, or any person living in the home shall not use any of the following methods of handling a resident for discipline purposes:</p> <p>(e) Mental or emotional cruelty, including subjecting a resident to verbal abuse, making derogatory remarks about the resident or members of his or her family or making malicious threats.</p> |
| ANALYSIS: | <p>Ms. Nash denied she is rude to any resident.</p> <p>Mr. Schonebeck, Residents B, D and E all deny that Ms. Nash is rude</p> <p>Family Member -1 reported to the court that Resident A is happy, likes the people she lives with, and he feels Ms. Nash is caring and looks after Resident A.</p> <p>The License is not subjecting Resident A to verbal abuse.</p> |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: The Licensee does not take Resident A to her medical appointments.

INVESTIGATION: Ms. Nash stated she has been taking Resident A to her medical appointments and any needed follow-up visits. She noted that some appointments have been cancelled or rescheduled due to restrictions on office visits during Covid 19. She noted that any mental health related appointments need her guardian's involvement, and this has been difficult for him to participate, again because of Covid 19 precautions.

Family Member -1 noted in his report to the court that "During Covid we have been unable to schedule mental health treatment." He also documented for the court that Resident A in the past year has had a physical, electrocardiogram and is scheduled to have a mammogram.

On June 1, 2021, Ms. Dorman conducted a telephone interview with Resident A's physician's office, Cadillac Primary Care. She shared the following information. Resident A's physician's office stated that "everything they have referred (Resident A) out for is complete."

Resident A was unable to provide an interview due to her health.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.1416 | Resident health care. |
| | (1) A licensee, in conjunction with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician with regard to such items as medications, special diets, and other resident health care needs that can be provided in the home. |
| ANALYSIS: | Resident A's physician's office, Cadillac Primary Care, reports that all medical referrals they have ordered for Resident A have been completed. The Licensee is following the instructions and recommendations of Resident A's physician. |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: The Licensee does not provide Resident A with her medication as ordered and takes Resident A's medications herself.

INVESTIGATION: Ms. Nash stated she is providing Resident A with all her medications as prescribed by her physician. She denied taking any of Resident A's medications for herself. Ms. Nash provided me with Resident A's medications and medication logs for my observation. She did note that Resident A "sometimes" spits out her Gabapentin medication as they are very large tablets, and she has trouble swallowing them.

Resident A's medication log noted medications consistent with the medications on hand and being provided to Resident A. The logs were also consistent with documentation provided by her physician as to the current list of medications prescribed for Resident A.

Ms. Nash stated she is also prescribed Gabapentin for her personal use. She showed me the medication prescribed for her with a pharmacy supplied label with her name.

Resident A was unable to be interviewed due to her poor health.

Residents B, D and E all stated they are provided with their medications as prescribed.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.1418 | Resident medications. |
| | Resident medications. (1) Prescription medication, including tranquilizers, sedatives, dietary supplements, or individual special medical procedures, shall be given or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy container which shall be labeled for the specific resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being (33.1101 et. seq. of the Michigan Compiled Laws. |
| ANALYSIS: | <p>Ms. Nash states she provides Resident A with her medication as prescribed. She denied using any of Resident A's medications for her own use.</p> <p>Documentation indicates that Ms. Nash is providing Resident A with all medications as prescribed.</p> <p>The Licensee is providing Resident A with her medications as prescribed.</p> |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: The residents' laundry is not done.

INVESTIGATION: Ms. Nash and Mr. Schonebeck both stated that resident laundry is "constantly being washed." Both noted that all residents always have clean clothing and bedding.

Residents B, D and E all stated that their laundry is being done and that they always have clean clothing and bedding.

During my unannounced on-site special investigation, I noted that all five of the residents observed appeared clean, with clean clothing. Resident bedding appeared clean, and no odor was detectable. I observed a large pile of clothing in the laundry room. It appeared Ms. Nash was in the process of doing laundry upon my unannounced arrival to the facility.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.1420 | Resident hygiene. |
| | (5) A licensee shall afford a resident who is capable, opportunities, or instructions when necessary, to routinely launder clothing. Clean clothing shall be available at all times. |
| ANALYSIS: | The Licensee is ensuring all residents always have clean clothing available. |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: The dogs poop on the floor.

INVESTIGATION: Ms. Nash stated she has two dogs, and they “occasionally” “poop” on the floor. She stated she cleans it up as soon as she notices it.

Residents D and E both stated “sometimes the dogs poop” and they further noted “Christine picks it up right away.” Neither felt this was a problem. Both denied that the dog “poop” is left sitting on the floor for an excessive length of time.

During my unannounced on-site I did not observe any dog poop on the floor.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.1426 | Maintenance of premises. |
| | (1) The premises shall be maintained in a clean and safe condition. |
| ANALYSIS: | The premises are being maintained in a clean and safe condition. |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: Resident A’s bed is soaked in urine.

INVESTIGATION: Ms. Nash denied that Resident A’s bed is soaked in urine. She noted that Resident A does have incontinence issues and will “poop in her bedroom.” Ms. Nash stated she cleans this up as soon as she discovers it. She noted that Resident A wears “depends” and uses 5 to 6 per day. Ms. Nash also stated she has a plastic mattress cover on Resident A’s bed to protect the mattress from urine.

During my unannounced on-site investigation, I observed Resident A's bedroom and mattress. I noted the bedroom and bed, mattress, and bedding, were all clean. There was no sign of urine, feces, or foul odor. I observed a protective plastic cover on Resident A's mattress as described by Ms. Nash.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.1434 | Linens. |
| | (1) A licensee shall provide bedding which includes 2 sheets, a pillow case, a minimum of 1 blanket, and a bedspread. Bed linens shall be changed at least weekly or more often if soiled. |
| ANALYSIS: | The Licensee is providing Resident A with bedding as required by rule. The bedding and linens are clean. |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ADDITIONAL FINDINGS:

During my May 28, 2021, on-site special investigation, I noted that Ms. Nash had initialed Resident A's medication log on May 26, 2021, for the medication Gabapentin. Ms. Nash had stated Resident A had refused, by spitting out, this medication for the previous three days. Ms. Nash stated she had initialed the log in error.

I further noted that Ms. Nash had not initialed Resident A's medication log for any medications on the evening of May 27, 2021. Ms. Nash confirmed that she did provide Resident A with her prescribed medications that evening but failed to initial the medication log in error.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.1418 | Resident medications. |
| | (4) When a licensee or responsible person supervises the taking of medication by a resident, the licensee or responsible person shall comply with the following provisions: (a) Maintain a record as to the time and amount of any prescription medication given or applied. Records of prescription medication shall be maintained on file in the home for a period of not less than 2 years. |

| | |
|--------------------|---|
| ANALYSIS: | The Licensee failed to maintain Resident A's medication log when she initialed the log for a medication she stated Resident A refused on May 26, 2021, and when she did not initial the medication log after dispensing Resident A's medications the evening of May 27, 2021. |
| CONCLUSION: | VIOLATION ESTABLISHED |

On June 14, 2021, I conducted an exit conference with Licensee Christine Nash. I explained my findings as noted above. Ms. Nash stated she understood and would submit a corrective action plan to address the established rule violation. She had no further questions pertaining to this special investigation.

IV. RECOMMENDATION

I recommend, contingent upon the submission of an acceptable corrective action plan, that the status of the license remain unchanged.

 June 14, 2021

Bruce A. Messer
Licensing Consultant

Date

Approved By:



June 14, 2021

Jerry Hendrick
Area Manager

Date