

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 27, 2021

Ime & Raphael Etuk 908 College Ave. NE Grand Rapids. MI 49503

> RE: License #: AS410398069 Investigation #: 2021A0467022 Victory Palace V

Dear Ime & Raphael Etuk:

Attached is the Special Investigation Report for the above referenced facility. Due to the violation 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 the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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 (616) 356-0183.

Sincerely,

arthony Mullin

Anthony Mullins, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

| License #: | AS410398069 |
|--------------------------------|---|
| Investigation #: | 2021A0467022 |
| Complaint Receipt Date: | 09/22/2021 |
| Investigation Initiation Date: | 09/22/2021 |
| Report Due Date: | 11/21/2021 |
| Licensee Name: | Ime & Raphael Etuk |
| Licensee Address: | 908 College Ave. NE, Grand Rapids, MI 49503 |
| Licensee Telephone #: | (616) 432-9493 |
| Administrator: | N/A |
| Licensee Designee: | Ime Etuk |
| Name of Facility: | Victory Palace V |
| Facility Address: | 904 College Ave. NE, Grand Rapids, MI 49503 |
| Facility Telephone #: | (616) 881-3843 |
| Original Issuance Date: | 03/19/2019 |
| License Status: | REGULAR |
| Effective Date: | 09/19/2021 |
| Expiration Date: | 09/18/2023 |
| Capacity: | 6 |
| Program Type: | TRAUMATICALLY BRAIN INJURED, AGED, DEVELOPMENTALLY DISABLED, MENTALLY ILL |

II. ALLEGATION(S)

Violation Established?

| On 9/22/21, residents were in the home without staff present. |
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III. METHODOLOGY

| 09/22/2021 | Special Investigation Intake 2021A0467022 |
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| 09/22/2021 | Special Investigation Initiated - On Site |
| 09/22/2021 | Inspection Completed-BCAL Sub. Non-Compliance |
| 09/23/2021 | Exit Conference Completed with owner and licensee designee, Ime Etuk. |

ALLEGATION: On 9/22/21, residents were in the home without staff present.

INVESTIGATION: On 9/22/21, I received additional information from the BCAL Online complaint system regarding a previous investigation at this home. It alleged that the licensee is sharing staff between her homes, leaving vulnerable residents by themselves.

On 9/22/21, I made an unannounced inspection to the home. Upon arrival, I knocked on the door and two residents allowed entry into the home. I asked Resident A if staff were present and he stated no. Resident A and B stated that staff member Mercy Chenge was present in the home but she left "not too long ago" to go to one of the other homes owned by Mrs. Etuk. I observed that five residents were present in the home with no staff members.

As I was preparing to leave the facility, the owner and licensee, Mrs. Etuk appeared unexpectedly. Mrs. Etuk walked towards me stating that she was not in the home because she had to go get her sweatshirt due to being cold. I asked Mrs. Etuk where she went to get her sweatshirt. Mrs. Etuk pointed to the side of her home and stated that she dropped her sweatshirt on the ground earlier and had to go pick it up. It should be noted that between this home and the home across the street owned by Mrs. Etuk (911 College Ave NE / Victory Palace III), I was in the area for approximately 20-30 minutes and at no point in time did I witness Mrs. Etuk outside looking for a sweatshirt. I explained to Mrs. Etuk that the residents have already told me they were home alone and that Ms. Chenge was the last staff member in the home prior to going across the street. Mrs. Etuk attempted to get me to reenter the home so she could have the residents tell me that she was in the home today, but I politely declined. Mrs. Etuk stated, "if I wasn't in the home then how did they get their meds?" I explained to Mrs. Etuk that regardless of whether she was in the home at

some point today, a staff member is required to be present in the home with residents at all times per licensing rules. It should be noted that Mrs. Etuk was cited for the same issue earlier this month and continues to leave vulnerable residents alone in the home. I explained to Mrs. Etuk that she would be cited again and I would follow-up with her later this week or early next week with a plan to move forward.

On 9/23/21, I spoke to the complainant and she confirmed the allegations, as well as previous concerns with staffing at the home. I informed the complainant that I was able to verify her concerns and am currently addressing it with the licensee.

On 9/23/21, I conducted an exit conference with the owner and licensee designee, Ime Etuk. I explained to her that I will be recommending the home be placed on a provisional license for the quality-of-care violation cited in this report. I explained to Mrs. Etuk that if she is accepting of the provisional license, she is to notify me in writing. If she does not accept, she can notify me in writing as well and an administrative hearing will be scheduled. Mrs. Etuk is aware that a corrective action plan is required, which will need to include a staff schedule in an attempt to prevent a similar incident from occurring in the future. Mrs. Etuk stated that her daughter will complete the corrective action plan as she is the business manager. She also stated that she will speak to her family prior to making a decision regarding whether or not to accept the provisional license.

| APPLICABLE RULE | | |
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| R 400.14206 | Staffing requirements. | |
| | (1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 12 residents and children who are under the age of 12 years. | |
| ANALYSIS: | On 9/22/21, I observed five residents in the home with no staff present. Resident A and B told me Mrs. Chenge was in the home earlier but left to go to another home owned by Mrs. Etuk. Mrs. Etuk insisted that she was in the home and only went outside to get her sweatshirt that she dropped. I was investigating similar concerns at a home directly across the street that is also owned by Mrs. Etuk on the same day. I was in the area for approximately 20-30 minutes and never witnessed Mrs. Etuk outside of the home looking for anything. Statements made by residents did not support Mrs. Etuk's explanation. Therefore, a preponderance of evidence does exist to support the allegation. | |

| CONCLUSION: | VIOLATION ESTABLISHED |
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IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended as a result of the above-cited quality of care violation.

| arthony Mullin | 09/27/2021 |
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| Anthony Mullins Licensing Consultant | Date |
| Approved By: | |
| | 09/27/2021 |
| Jerry Hendrick Area Manager | Date |