



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 21, 2021

Andrew Akunne
Carnegie AFC Inc
Suite 1
3879 Packard Street
Ann Arbor, MI 48108

RE: License #: AL630279364
Investigation #: 2022A0605006
Freedom Haven

Dear Mr. Akunne:

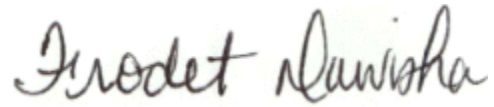
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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 (248) 975-5053.

Sincerely,

A handwritten signature in black ink that reads "Frodet Dawisha". The signature is written in a cursive, flowing style.

Frodet Dawisha, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(248) 303-6348

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL630279364
Investigation #:	2022A0605006
Complaint Receipt Date:	11/03/2021
Investigation Initiation Date:	11/03/2021
Report Due Date:	01/02/2022
Licensee Name:	Carnegie AFC Inc
Licensee Address:	Suite 1 - 3879 Packard Street Ann Arbor, MI 48108
Licensee Telephone #:	(734) 973-7764
Administrator/Licensee Designee:	Andrew Akunne
Name of Facility:	Freedom Haven
Facility Address:	700-738 Wanda Ferndale, MI 48220
Facility Telephone #:	(248) 548-3607
Original Issuance Date:	03/28/2007
License Status:	REGULAR
Effective Date:	02/17/2021
Expiration Date:	02/16/2023
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL/AGED

II. ALLEGATION(S)

	Violation Established?
Resident A contacted his bank to file debit card claims due to \$240 dollars of unauthorized transactions. His card is getting used when presumed to be locked up in the office.	Yes
Additional Findings	Yes

III. METHODOLOGY

11/03/2021	Special Investigation Intake 2022A0605006
11/03/2021	APS Referral Adult Protective Services (APS) made referral.
11/03/2021	Special Investigation Initiated - Telephone Telephone made with APS worker Ra'Shawnda Robertson regarding the allegations. She agreed to conduct a collaborative an on-site investigation tomorrow. APS stated Ferndale Police Department is also investigating these allegations.
11/03/2021	Referral - Recipient Rights I emailed the complaint to Oakland County Office of Recipient Rights (ORR) worker Kathleen Garcia.
11/03/2021	Contact - Document Received I received an email from ORR stating the following: "We did receive the information from APS. The individual is not open to Oakland County Housing Network (OCHN) services and therefore OCHN ORR does not have jurisdiction."
11/04/2021	Inspection Completed On-site I conducted an unannounced on-site investigation. I interviewed attempted to interview transitional Resident A, adult foster care (AFC) Resident B, the home manager (HM) Bobie Daniels, the assistant HM Chinetha Wheeler and direct care staff (DCS) Sharee Brown.
11/09/2021	Contact - Telephone call made I interviewed Resident B's mother regarding the allegations.

12/14/2021	Contact - Telephone call made I followed up with APS Ra'Shawnda Robertson regarding her investigation.
12/20/2021	Exit Conference I left a voice mail message for licensee designee Andrew Akunne with my findings.

ALLEGATION:

Resident A contacted his bank to file debit card claims due to \$240 dollars of unauthorized transactions. His card is getting used when presumed to be locked up in the office.

INVESTIGATION:

On 11/03/2021, intake #183088 was referred by Adult Protective Services (APS) regarding Resident A's debit card being misused by staff at Freedom Haven.

On 11/04/2021, I conducted an unannounced on-site investigation. I interviewed the home manager (HM) Bobie Daniels regarding the allegations. The HM stated Resident A is a transitional resident; therefore, she does not handle his funds or monies. The HM stated that all transitional residents handle their own funds and are placed at Freedom Haven temporary until placement is found for them. The HM stated she has not seen Resident A's debit card, nor has she misused his debit card. The HM stated there is a locked box inside of a locked cabinet here, but that there is no debit cards or monies in there.

The assistant home manager (AHM) Chinetha Wheeler was also present and was interviewed regarding the allegations. The AHM stated that Resident A's grandmother gives Resident A money whenever she visits. She stated that Resident A does have a Comerica Bank debit card that Resident A asked the AHM to "hold on to," about a month ago. The AHM stated the Comerica Bank debit card is "in my purse." The AHM went into her purse and pulled out the debit card. The AHM also pulled out cash from her purse whom she stated belonged to an AFC resident, Resident B. The AHM stated she has always kept all the residents; both transitional and AFC in her purse which she takes home daily. The AHM stated that Resident B receives \$44 and gift cards sent by Resident B's mother. The AHM stated it does not state in Resident B's assessment plan that the AHM shall safekeep Resident B's money nor gift cards in AHM personal purse. The AHM stated Freedom Haven have never utilized the lockbox located in the office for residents' monies or gift cards. The AHM stated whenever Resident B wants her gift cards, Resident B "signs a sheet," and then the gift card is handed to Resident B. I requested to review the "sheet," but the AHM did not have the "sheet," available for my review. The AHM stated that Resident B's money is then "spent by staff." The AHM stated that Resident B will request to order carryout food, so the AHM will have staff go

to the restaurant and purchase the food with Resident B's money and then bring the food to Resident B. The AHM stated she does not keep the receipts for the monies spent nor does she complete the fund's part II form; therefore, the form was not available for my review. The AHM denied misusing Resident A's debit card and denied misusing Resident B's monies. The AHM went into her personal purse and pulled out Resident B's monies of \$200 and a Meijer gift card. The AHM stated she usually writes on a piece of paper what Resident B spends, but she cannot locate that paper.

I re-interviewed the HM regarding Resident B's monies and gift cards. The HM stated she too keeps the residents' monies in her personal purse and takes the residents' funds home with her. The HM stated she does not complete the fund's part II forms for any of the residents because "I do not have the receipts." The HM stated she and the AHM are the only persons responsible for residents' funds. The HM stated there is a lock box located in the office cabinet drawers that were also locked, which the HM unlocked, and I observed a couple of purses that were empty inside belonging to the transitional female residents. The HM and the AHM understood that all AFC residents' monies and valuables cannot be placed in their personal purses to prevent comingling of funds and should be locked in the lockbox inside the locked cabinet. The HM denied misusing any residents' monies and/or gift cards.

I reviewed Resident B's resident care agreement dated 01/30/2021 that was signed by Resident B and the HM; I reviewed Resident B's assessment plan dated 01/30/2021 signed by Resident B and the HM which states that Resident B is responsible for managing her money; and I reviewed the fund's part I which was incomplete as the form had the box next to "Resident," checked but the name of Resident B's mother was not on the form as payee and the licensee designee Andrew Akunne nor the HM signatures were on the form. I also reviewed the fund's part II form from January 2021-November 2021. According to the fund's part II form, Resident B was only given her allowance of \$44 in October 2021 and November 2021. The \$44 was not recorded from January 2021-September 2021. In addition, the cost of care was not recorded from January 2021-May 2021.

I interviewed DCS Sharee Brown regarding the allegations. Ms. Brown stated she does not handle any residents' funds and does not know if the HM or the AHM have misused any residents' monies. Ms. Brown stated the HM and the AHM are the only persons responsible for both the transitional and AFC residents' monies.

I attempted to interview Resident A, but he did not want to be interviewed.

I interviewed Resident B regarding the allegations. Resident B has resided at Freedom Have for the past two years. She is her own guardian; however, her mother is her payee. Resident B stated whenever her mother sends her money and/or gift cards, Resident B hands the monies and the gift cards to the AHM for safekeeping. Resident B stated she gives AHM \$200 a month which the AHM keeps track of the monies spent on a piece of paper for Resident B. Resident B stated she asks the AHM for a certain amount, the AHM hands Resident B the money and then the AHM writes the amount on

the piece of paper. Resident B stated, "I spend my own money. The HM and the AHM never spend my money." Resident B stated she does not have any concerns about the HM or the AHM misusing her funds because, "my money is there and my gift cards whenever I ask for them." Resident B gave me permission to speak with her mother.

On 11/09/2021, I interviewed Resident B's mother regarding the allegations. The mother stated she sends Resident B money and gift cards which is given to either the HM or the AHM for safekeeping. The mother stated that Resident B asks for money and that amount is allotted to her. The mother stated that Resident B understands money and knows how much she spends and how much is left; therefore, the HM nor the AHM are misusing Resident B's funds. The mother stated that Resident B would report any concerns regarding the misuse of her funds if it was happening at Freedom Haven. The mother stated, "I'm in total trust with them (HM and AHM) because Resident B would tell me."

On 12/14/2021, I contacted APS worker Ra'Shawnda Robertson who stated she investigated these allegations and has closed her case.

APPLICABLE RULE	
R 400.15315	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.
ANALYSIS:	Based on my investigation and review of Resident B's funds forms, the fund's part I and fund's part II forms were incomplete. The fund's part I form did not have Resident B's mother's name documented as payee and the licensee designee did not sign the form. The fund's part II form was not complete as Resident B's allowance amount of \$44 was only recorded for the month of October 2021 and November 2021 and the cost of care was not recorded on the fund's part II form from January 2021-May 2021.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.15315	Handling of resident funds and valuables.
	(5) All resident funds, which includes bank accounts, shall be kept separate and apart from all funds and monies of the licensee. Interest and dividends earned on resident funds shall

	be credited to the resident. Payments for care for the current month may be used by the licensee for operating expenses.
ANALYSIS:	Based on my investigation and information gathered, residents' funds and monies are not kept separate from and apart from staff at Freedom Haven. Resident B's funds and monies were observed in the AHM Chinetha Wheeler personal purse. The AHM stated she keeps Resident B's monies and gift cards in her personal purse which she takes home with her daily. The AHM stated she is responsible for making purchases for Resident B when Resident B requests it; however, the AHM does not keep the receipts to ensure Resident B's monies are not being misused.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 11/04/2021, the HM Bobie Daniels stated for the past 15 years, since she has been at Freedom Haven, there has always been both transitional and adult foster care (AFC) residents residing together at this facility. The HM stated that Resident A was placed at Freedom Haven by Wayne County Authority who is responsible for Resident A's placement. However, Freedom Haven is not required to complete the resident care agreement, assessment plans, fund's part I or fund's part II for transitional residents. The HM stated there five transitional residents and eight AFC residents currently residing at Freedom Haven. The HM believes this was reported by the licensee designee Andrew Akunne to their assigned licensing consultant, but the HM is unsure.

On 11/04/2021, I contacted licensing consultant Da'Shawnda Lindsey regarding transitional residents residing with AFC residents at Freedom Haven. Ms. Lindsey denied being informed by licensee designee Andrew Akunne that transitional residents are living in the facility with AFC residents. Ms. Lindsey stated if she had been informed, she would have advised Mr. Akunne that this was not acceptable, and Mr. Akunne would be required to submit a variance for approval, which Mr. Akunne has not.

On 11/17/2021, I along with licensing consultant Ms. Lindsey contacted licensee designee Andrew Akunne via telephone. Ms. Lindsey attempted to explain to Mr. Akunne that he cannot have transitional residents living in the same facility with AFC residents without submitting a variance for approval. Mr. Akunne stated he cannot talk and would call Ms. Lindsey back. Mr. Akunne never called Ms. Lindsey back to discuss this issue nor has he submitted a variance.

On 12/20/2021, I left a voice mail message for licensee designee Andrew Akunne with my findings.

APPLICABLE RULE	
R 400.15103	Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.
	(5) An applicant or licensee shall give written notice to the department of any changes in information that was previously submitted in or with an application for a license, including any changes in the household and in personnel-related information, within 5 business days after the change occurs.
ANALYSIS:	During my on-site investigation, it was brought to my attention that Freedom Have had transitional residents living in the facility with AFC residents. Licensee designee Andrew Akunne did not give notice of this change to our department within five business days after the change occurred. In addition, Mr. Akunne was advised that having transitional residents living with AFC residents in the same facility was unacceptable and required an approved variance. Mr. Akunne has yet to submit a variance.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receiving an acceptable corrective action plan, I recommend no change to the status of the license.



12/21/2021

Frodet Dawisha
Licensing Consultant

Date

Approved By:



12/21/2021

Denise Y. Nunn
Area Manager

Date