



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 5, 2022

Roxanne Goldammer
Loving Hands Adult Foster Home LLC
Suite 110
890 North 10th Street
Kalamazoo, MI 49009

RE: License #: AM210315739
Investigation #: 2022A0221008
Beacon Home at Sand Point

Dear Ms. Goldammer:

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 (906) 226-4171.

Sincerely,

A handwritten signature in black ink that reads "Theresa Norton". The signature is written in a cursive style with a large, looping initial "T".

Theresa Norton, Licensing Consultant
Bureau of Community and Health Systems
234 West Baraga
Marquette, MI 49855
(906) 280-2519

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM210315739
Investigation #:	2022A0221008
Complaint Receipt Date:	11/09/2021
Investigation Initiation Date:	11/09/2021
Report Due Date:	12/09/2021
Licensee Name:	Loving Hands Adult Foster Home LLC
Licensee Address:	555 Railroad Street Bangor, MI 49013
Licensee Telephone #:	(269) 427-8400
Administrator:	Roxanne Goldammer
Licensee Designee:	Roxanne Goldammer
Name of Facility:	Beacon Home at Sand Point
Facility Address:	9284 Hwy M-35 Gladstone, MI 49837
Facility Telephone #:	(906) 420-8446
Original Issuance Date:	04/02/2013
License Status:	REGULAR
Effective Date:	01/13/2020
Expiration Date:	01/12/2022
Capacity:	11
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

	AGED TRAUMATICALLY BRAIN INJURED
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II. ALLEGATION(S)

	Violation Established?
Resident A's behavior plan not being followed per mail being sent without staff reviewing.	Yes
The 15-second release locked gate has not worked since April 2021.	Yes
Additional Findings	No

III. METHODOLOGY

11/09/2021	Special Investigation Intake 2022A0221008
11/09/2021	Special Investigation Initiated - Telephone Phone call to Home Manager Lee-Ellen Bailey.
11/12/2021	Contact - Document Received Resident A's Behavior Plan and Assessment received.
11/17/2021	Contact - Telephone call made Phone call to Home Manager Lee-Ellen Bailey.
12/15/2021	Inspection Completed On-site Interview with Home Manager Lee-Ellen Bailey and Assistant Home Manager Rebecca K.
12/27/2021	Contact - Telephone call made Phone call to Complainant.
01/05/2022	Exit Conference Exit interview with Licensee Designee Roxanne Goldammer.

ALLEGATION: Resident A's behavior plan not being followed per mail being sent without staff reviewing.

INVESTIGATION: The complainant stated that the staff of the facility did not follow Resident A's Behavior Treatment Plan by allowing Resident A to send threatening letters to Escanaba Public Safety.

The complainant stated that Resident A has a history of sending threatening letters to people including the First Lady, Governor Whitmer, store owners, police, staff of facilities, attorneys, etc.

On 11/01/21, Escanaba Public Safety called the facility and spoke with Assistant Home Manager Rebecca Kell. The police stated they had received letters from Resident A that included threatening language.

On 11/12/2021, documents were requested and received concerning Resident A. Resident A's Behavior Treatment Plan, Release Packet and Face sheet were received and reviewed.

Resident A's Behavior Treatment Plan indicates that due to his past behavior of sending threatening mail, that all of his mail is intercepted by staff and reviewed before mailed. The Behavior Plan indicates Resident A is "eyes on" while in the community.

On 12/15/2021, interviews were conducted with Home Manager Lee-Ellen Bailey and Assistant Home Manager Rebecca Kell. When questioned concerning how the letters from Resident A were mailed to Escanaba Public Safety, Ms. Bailey stated she and none of the staff know or can understand how Resident A mailed the letters out of the facility.

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	Resident A sent threatening letters to Escanaba Public Safety. Resident A's Behavior Treatment Plan has not been followed concerning monitoring Resident A's outgoing mail.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: The 15-second release locked gate has not worked since April 2021.

INVESTIGATION: The complainant stated that Resident A was sent to Beacon Home at Sand Point because it was “a locked facility”, but the gate does not have a lock and Resident A is free to go outside of the gate. The complainant further stated that Resident A was placed at Beacon Home at Sand Point because ‘it was a locked, secure facility’.

This consultant did explain to the complainant that there is no ‘locked AFC facility’ in the state of Michigan. The complainant stated she became aware of this only recently.

On 11/09/2021, this consultant spoke with Home Manager Lee-Ellen Bailey. Ms. Bailey stated that the gate has not been fixed and there is no delay on the gate. This consultant explained to Ms. Bailey that the fence and the gate delay were part of a corrective action plan for the facility many years ago and is still in effect. Ms. Bailey stated she did not realize this.

During the 12/15/2021 on-site inspection, the gate delay was not working properly. Ms. Bailey stated that the gate had been worked on, but it no longer had a 15-second delay. When this consultant went to leave, a code had to be used to get out of the gate.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	The 15-second delay on the gate of the fence surrounding the facility is not working properly. Currently, a code must be used to exit the gate, which is an egress safety issue.
CONCLUSION:	VIOLATION ESTABLISHED

An exit interview was conducted with Licensee Designee Roxanne Goldammer on 01/05/2022 informing her of the findings of this report and the expectation of a corrective action plan.

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no change to the status of this license.

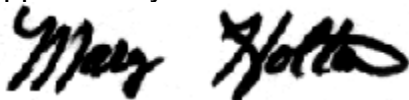


01/05/2022

Theresa Norton
Licensing Consultant

Date

Approved By:



01/05/2022

Mary E Holton
Area Manager

Date