



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 10, 2022

Connie Clauson
Pleasant Homes I L.L.C.
Suite 203
3196 Kraft Ave SE
Grand Rapids, MI 49512

RE: License #: AL390007089
Investigation #: 2022A1024018
Park Place Living Centre #A

Dear Mrs. Clauson:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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,

A handwritten signature in cursive script that reads "Ondrea Johnson".

Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems
427 East Alcott
Kalamazoo, MI 49001

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL390007089
Investigation #:	2022A1024018
Complaint Receipt Date:	01/13/2022
Investigation Initiation Date:	01/14/2022
Report Due Date:	03/14/2022
Licensee Name:	Pleasant Homes I L.L.C.
Licensee Address:	Suite 203 3196 Kraft Ave SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 285-0573
Administrator:	Janet White
Licensee Designee:	Connie Clauson
Name of Facility:	Park Place Living Centre #A
Facility Address:	4214 S Westnedge Kalamazoo, MI 49008
Facility Telephone #:	(269) 388-7303
Original Issuance Date:	01/01/1989
License Status:	REGULAR
Effective Date:	07/19/2021
Expiration Date:	07/18/2023
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Staff assisted Resident A aggressively.	No

III. METHODOLOGY

01/13/2022	Special Investigation Intake 2022A1024018
01/14/2022	Special Investigation Initiated – Telephone call with direct care staff member Katoya Hall
01/14/2022	Contact - Telephone call made with Adult Protective Service (APS) Specialist Jessica Muellen
02/22/2022	Contact - Telephone call made with direct care staff members Mary Ann Dyre and Javaonna Olarge
02/28/2022	Contact - Telephone call made with administrator Janet White
02/28/2022	Inspection Completed On-site with Resident A
03/02/2022	Contact - Document Received Resident A's <i>Health Care Appraisal, and Resident Evaluation</i>
03/02/2022	Contact-Telephone call made with hospice supervisor Josh Nordahl from Kendrick Hospice.
03/03/2022	Contact - Telephone call made with direct care staff member Ahlona Sanders-Fields
03/03/2022	Contact-Telephone call made with direct care staff member Sheena Givhans
03/04/2022	Exit Conference with licensee designee Connie Coulson

ALLEGATION:

Staff assisted Resident A aggressively.

INVESTIGATION:

On 1/13/2022, I received this complaint through the Bureau of Community and Health Systems online complaint system. This complaint alleged staff assisted Resident A aggressively. This complaint further stated on 12/31/2021, Resident A took her pants off and direct care staff member Sheena Givhans aggressively lifted Resident A out of the chair and direct care staff member Katoya Hall jerked her pants on. This complaint also stated Ms. Givhans stuffed food in Resident A's mouth while feeding her and Resident A was observed with fingerprint marks on both upper arms on 1/4/2022.

On 1/14/2022, I conducted an interview with direct care staff member Katoya Hall regarding this allegation. Ms. Hall stated she works regularly with Resident A and on 12/31/2022 Resident A had a visit from her daughter who visits Resident A once a year. Ms. Hall stated while Resident A's daughter was visiting, Resident A took her pants off while she was sitting in her chair. Ms. Hall stated Resident A has a habit of removing her clothes and sliding off her chair on to the floor when she gets agitated. Ms. Hall stated all the direct care staff members are familiar with this behavior therefore they are prepared to assist Resident A with putting her clothes back on whenever Resident A takes them off. Ms. Hall stated Resident A also has a history of climbing out of bed and falling on to the floor. Ms. Hall stated Resident A occasionally will require one person assist to help her stand or transfer however there are times Resident A chooses to independently stand and balance by grabbing her walker or touching the wall. Ms. Hall stated on 12/31/2022, she assisted Resident A by putting her arm around Resident A's waist to assist with standing Resident A up in order for Ms. Givhans to put her pants back on. Ms. Hall stated she was not aggressive towards Resident A in any way and has never been forceful with Resident A. Ms. Hall further stated that she did not observe Ms. Givhans to be aggressive with Resident A when assisting her with putting her pants back on and denied that Ms. Givhans stuffed food in Resident A's mouth. Ms. Hall stated Resident A eats independently however will occasionally need prompting from staff to encourage her to eat. Ms. Hall stated on 12/31/2022 she observed Ms. Givhans assist Resident A by guiding Resident A's spoon in her mouth two times before Resident A began to eat on her own without any assistance. Ms. Hall stated while assisting during this time, Resident A's daughter provided her and Ms. Givhans with compliments on the care that was being provided to Resident A and had no complaints however a few days later, Ms. Hall received notification from her supervisor that Resident A's daughter reported concerns of Ms. Hall and Ms. Givhans being forceful with Resident A. Ms. Hall stated she believes Resident A's daughter was shocked to see some of the behaviors demonstrated by Resident A such as Resident A taking off her pants. Ms. Hall stated Resident A is frail and seems to always have some type of bruising on her arms or legs however Ms. Hall

believes this is a medical condition and does not believe this is caused by abuse from direct care staff members.

On 1/14/2022, I conducted an interview with APS Specialist Jessica Muellen who stated that she has conducted an investigation regarding this allegation and has found no substantial findings to support abuse or neglect by direct care staff members. Ms. Muellen stated during her visit at the facility she observed Resident A to be nonverbal and to have "age spots" on her arms and legs however did not observe any bruises. Ms. Muellen stated she does not have any concerns for the facility.

On 2/22/2022, I conducted interviews with direct care staff members Mary Ann Dyre and Javaonna Olarge. Ms. Dyre stated she works regularly with Ms. Hall and Ms. Givhans and has not observed them to mistreat or be aggressive with any of the residents. Ms. Dyre stated she also works regularly with Resident A and has noticed that Resident A has "thin skin" and any form of touch to Resident A can cause some form of bruising. Ms. Dyre stated Resident A likes to sit in her chair and lean over while sitting however when she gets agitated, she will slide off furniture to the floor. Ms. Dyre believes Resident A is cared for adequately at the facility.

Ms. Olarge stated she has worked regularly with Ms. Hall and Ms. Givhans and has not seen either of these two staff members to be aggressive with any of the residents. Ms. Olarge stated she works regularly with Resident A and assist her with personal care needs such as dressing. Ms. Olarge stated hospice service workers also provide assistance with Resident A's personal care needs such as with bathing. Ms. Olarge stated she has observed bruises on Resident A however has not seen Resident A be mistreated. Ms. Olarge stated she believes Resident A has bruises due to self-harm as Resident A has been observed to bang her chair against the wall when gets agitated. Ms. Olarge believes Resident A has been treated appropriately.

On 2/28/2022, I conducted an onsite investigation at the facility with Resident A. I observed Resident A sitting in a Broda chair looking towards the television. I observed Resident A to be clean. I did not observe any bruises on Resident A's arms. I was not able to conduct an interview with Resident A due to her cognitive impairment.

On 2/28/2022, I conducted an interview with administrator Janet White. Ms. White stated she was notified by Resident A's daughter of this allegation however has not observed either Ms. Hall or Ms. Givhans to be aggressive with any of the residents. Ms. White stated Resident A's health continues to decline therefore her care needs have changed since January 2022. Ms. White stated Resident A was stronger and was able to ambulate on her own when she initially arrived at their facility however as of January 2022 Resident A began to use a Hoyer lift to assist with transferring and uses adaptive equipment to ambulate. Ms. White stated Resident A also has been participating with Kendrick Hospice services for a couple of years now who comes out 3 times a week to assist with some of Resident A's personal care needs.

Ms. White stated hospice also provides nursing care to Resident A weekly. Ms. White stated she has not had any complaints from hospice workers regarding the care that was provided to Resident A by direct care staff members. Ms. White stated Resident A could get extremely agitated and would fall to the floor therefore Ms. White believes this contributes to some of the bruises that Resident A is observed to have on her arms or legs occasionally. Ms. White stated she believes now that Resident A is required to use a Hoyer lift, this will allow for Resident A to transfer more safely. Ms. White believes Resident A is adequately cared for and has not been mistreated by any staff member.

On 3/2/2022, I reviewed Resident A's *Health Care Appraisal* dated 7/22/21. According to this appraisal, Resident A is diagnosed with Dementia, Depression, Hypertension, Hypothyroidism, Anemia, Hyperlipidemia, Urinary Retention, and Constipation. This appraisal stated Resident A is ambulatory and can use a walker.

I also reviewed Resident A's *Evaluation Plan* dated 8/6/2021. According to the *Evaluation Plan*, Resident A has behaviors from getting agitated and participates with hospice services. This *Evaluation Plan* stated Resident A requires physical assistance with bathing dressing, grooming and requires reminders to use her walker. The *Evaluation Plan* also stated Resident A can eat on her own however needs assistance with setting up the food. This plan also stated Resident A has lost 44 pounds in the last 6 months.

I also reviewed Resident A's *Evaluation Plan* dated 1/4/2022. According to this *Evaluation Plan*, Resident A requires one person to assist with transferring and uses a Broda chair for mobility. This *Evaluation Plan* stated, Resident A uses a hospital bed and also a Hoyer lift for transferring. This plan further stated Resident A requires physical assistance with eating and food texture to be modified such as pureed.

On 3/2/2022, I conducted an interview with hospice supervisor Josh Nordahl. Mr. Nordahl stated hospice workers are out to the home to provide personal care and nursing services to Resident A at least three times a week. Mr. Nordahl stated there has been no reports made concerning how direct care staff members at the facility care for Resident A nor have there been any observations made of unusual bruising to Resident A. Mr. Nordahl stated Resident A takes an anti-platelet daily which can cause an increase in bruising or bleeding more easily therefore Resident A has been observed to have some scattered bruising however these bruises are not of concern. Mr. Nordahl further stated Resident A's personal care needs changed as of January 2022 therefore, there have been some personal care needs that requires more hands-on assistance such as feeding and mobility. Mr. Nordahl stated Resident A's mobility and transferring needs has also changed which requires Resident A to use a Hoyer lift and a Broda chair. Mr. Nordahl stated hospice does not have any concerns for the care that is being provided by the direct care staff members at the facility.

On 3/3/2022, I conducted an interview with direct care staff member Ahlona Sanders-Fields. Ms. Sanders-Fields stated she regularly works with Ms. Hall and Ms. Givhans and has never seen either staff member be aggressive with the residents or mistreat any of the residents. Ms. Sanders-Fields stated Resident A now requires total care assistance and has hospice service to assist with personal care and nursing care needs 3 times a week due to a decline in her health. Ms. Sanders-Fields stated she has observed marks on Resident A but stated those marks have been on Resident A's skin for months now. Ms. Sanders-Fields stated Resident A has very "thin skin" and believes any slight touch to Resident A would cause bruising therefore Ms. Sanders-Fields makes an effort to be extremely careful when assisting Resident A with personal care needs. Ms. Sanders-Fields believes all the direct care staff members also are extremely careful when assisting Resident A and Ms. Sanders-Fields believes Resident A is cared for appropriately.

On 3/3/2021, I conducted an interview with direct care staff member Sheena Givhans. Ms. Givhans stated on 12/31/21 she worked with Ms. Hall and assisted Resident A while Resident A was visiting with her daughter. Ms. Sheena stated during this visit, Ms. Hall observed Resident A remove her pants. Ms. Givhans stated Ms. Hall asked her to assist her with putting Resident A's pants back on. Ms. Givhans stated she observed Ms. Hall lift Resident A up from her chair by hugging Resident A with her arms and grabbing her by the waist with both arms. Ms. Givhans stated she then pulled Resident A's pants back up without incident. Ms. Givhans stated she then assisted Resident A with eating by making sure Resident A's food was of adequate temperature and guiding the utensil in Resident A's mouth until Resident A was comfortable feeding herself without assistance. Ms. Givhans stated Resident A's daughter neither showed or expressed any concern during the visit and continued to interact with Resident A and staff members normally. Ms. Givhans stated Resident A's personal care needs have changed over time due to Resident A's decline in health over the last three months. Ms. Givhans stated Resident A was able to eat more independently without any assistance along with ambulate on her own with the use of a walker. Ms. Givhans stated she believes she and the other direct care staff members have adjusted well to Resident A's change of care needs and accommodates Resident A appropriately. Ms. Givhans stated she has always observed some bruising to Resident A on certain areas of her body and assumed these bruises were caused by Resident A's health condition. Ms. Givhans stated she has never observed Resident A to be cared for in an aggressive or forceful manner by any direct care staff member. Ms. Givhans further stated she has never been aggressive or forceful with Resident A or any other resident.

APPLICABLE RULE	
R 400.15308	Resident behavior interventions prohibitions.
	(1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a

	resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.
ANALYSIS:	Based on my investigation which included interviews with APS Specialist Jessica Muellen, direct care staff members Katoya Hall, Mary Ann Dyre, Ahlona Sanders Fields, Sheena Givhans, administrator Janet White, hospice supervisor Josh Nordahl as well as a review of Resident A's <i>Health Care Appraisal</i> , and <i>Evaluation Plan</i> there is no evidence to support the allegation staff assisted Resident A aggressively. This complaint also noted that Resident A was observed with bruises. Ms. Hall and Ms. Givhans both denied using aggressive force when assisting Resident A and Ms. Sanders-Fields, Ms. Dyre, and Ms. White all stated they have not seen either Ms. Hall or Ms. Givhans assist any resident aggressively. Mr. Nordahl also stated that hospice staff are out to the home at least three times a week and there have been no reports made of concern for any direct care staff member mistreating a resident. Ms. Hall, Ms. Givhans, Ms. Sanders-Fields, Ms. Dyre and Ms. White all stated Resident A gets agitated which could possibly contribute to her having bruises due to her behaviors of falling on the floor and bumping the wall with her chair. Mr. Nordahl stated Resident A also takes a medication that could cause an increase in bruising or bleeding more easily. Ms. Muellen also investigated this allegation and found no evidence of abuse or neglect by any direct care staff member.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 3/4/2022, I conducted an exit conference with licensee designee Connie Clauson. I informed Ms. Clauson of my findings and allowed her an opportunity to ask questions or make comments.

IV. RECOMMENDATION

I recommend the current license status remain unchanged.



Ondrea Johnson
Licensing Consultant

03/04/2022
Date

Approved By:



03/10/2022

Dawn N. Timm
Area Manager

Date