

GRETCHEN WHITMER **GOVERNOR**

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

February 24, 2022

Jennifer Bhaskaran Alternative Services Inc. Suite 10 32625 W Seven Mile Rd Livonia, MI 48152

> RE: License #: AS630305248 Investigation #: 2022A0993006

Kingsley Trail

Dear Ms. Bhaskaran:

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,

DaShawnda Lindsey, Licensing Consultant Bureau of Community and Health Systems 4th Floor, Suite 4B 51111 Woodward Avenue Pontiac, MI 48342 (248) 505-8036

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630305248
Investigation #:	2022A0993006
mvesugation #.	2022A0993000
Complaint Receipt Date:	12/09/2021
	40/00/0004
Investigation Initiation Date:	12/09/2021
Report Due Date:	02/07/2022
-	
Licensee Name:	Alternative Services Inc.
Licensee Address:	Suite 10 - 32625 W Seven Mile Rd
Licensee Address.	Livonia, MI 48152
Licensee Telephone #:	(248) 471-4880
Administrator:	Dwayne Price Jr.
Administratori	Bwayne i flee or.
Licensee Designee:	Jennifer Bhaskaran
Name of Equility	Kingalay Trail
Name of Facility:	Kingsley Trail
Facility Address:	637 Kingsley Trail
	Bloomfield Hills, MI 48304
Facility Telephone #:	(248) 593-9297
1 demity Telephone #.	(240) 330-3231
Original Issuance Date:	02/12/2010
License Cteture	DECLUAD
License Status:	REGULAR
Effective Date:	08/14/2021
Expiration Date:	08/13/2023
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL TRAUMATICALLY BRAIN INJURED
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II. ALLEGATION(S)

Violation Established?

Resident S went to the hospital today or yesterday. He has a cyst on his leg. His back is black. There is a concern that he is not being properly cared for.	No
There is a concern for possible financial exploitation. Resident S receives over \$2,000 per month. He receives \$60 per month. It is unknown where the rest of his money is going.	Yes
About six years ago, the facility was filthy and had an odor. There were cigarette butts all over the carpet and by the door. In addition, about six years ago, Resident S was in the bathtub and he fell. There are no security rails.	No

III. METHODOLOGY

12/09/2021	Special Investigation Intake 2022A0993006
12/09/2021	APS Referral Allegations received from adult protective services (APS)
12/09/2021	Referral - Recipient Rights Allegations forwarded to recipient rights advocate Rishon Kimble
12/09/2021	Special Investigation Initiated - Telephone Telephone call made to APS specialist Jonathan Johnson. Left a message.
12/15/2021	Contact - Telephone call received Telephone call received from APS specialist Jonathon Johnson
12/15/2021	Inspection Completed On-site Conducted an unannounced onsite investigation
01/05/2022	Contact - Telephone call made Telephone call made to home manager Randall Underwood
01/05/2022	Contact - Document Received Requested documentation
01/13/2022	Contact - Face to Face Picked up documentation from the facility

01/19/2022	Contact - Telephone call made Telephone call made to Resident S. Left a message.
01/19/2022	Contact - Telephone call made Telephone call made to Beaumont Home care nurse Fly (last name unknown)
01/19/2022	Contact - Telephone call made Telephone call made to Beaumont Home Health & Hospice
01/19/2022	Contact - Document Sent Requested documentation
01/19/2022	Contact - Telephone call made Telephone call made to Beaumont Home Care occupational therapist Adam Chalas
01/19/2022	Contact - Telephone call made Telephone call made to Resident S' brother. Left a message.
01/19/2022	Contact - Telephone call made Telephone call made to APS specialist Jonathan Johnson. Left a message.
01/19/2022	Contact - Telephone call made Telephone call made to Resident S' aunt. Left a messsage.
01/19/2022	Contact - Telephone call received Telephone call received from Resident S' aunt
01/19/2022	Contact - Telephone call made Telephone call made to Resident S' cousin. Left a message.
01/19/2022	Contact - Telephone call received Telephone call received from Resident S guardian's case manager
01/19/2022	Contact - Telephone call received Received a voicemail from Beaumont Home Care nurse Sara
01/24/2022	Contact - Telephone call received Telephone call received from APS specialist Jonathan Johnson
01/25/2022	Contact - Telephone call made Telephone call made to Resident S' brother. Left a message.

01/25/2022	Contact - Telephone call made Telephone call made to Resident S' cousin
	relephone can made to resident o cousin
01/25/2022	Inspection Completed On-site
	Picked up documents and inspected facility.
02/07/2022	Exit Conference
	Held with licensee designee Jennifer Bhaskaran

ALLEGATION:

Resident S went to the hospital today or yesterday. He has a cyst on his leg. His back is black. There is a concern that he is not being properly cared for.

INVESTIGATION:

On 12/09/2022, I received the allegations from adult protective services (APS). APS specialist Jonathan Johnson was assigned to this investigation.

On 12/09/2022, I forwarded the allegations to recipient rights advocate Rishon Kimble.

On 12/15/2022, I conducted a telephone interview with APS specialist Johnathan Johnson. He interviewed Resident S. Resident S stated he was happy with living in the facility. Resident S verified he went to the hospital. Resident S stated he sleeps on his back.

On 12/15/2022, I conducted an unannounced onsite investigation. I interviewed staff Casio Flood and staff Marsha Hearst. I also interviewed Resident S.

Mr. Flood verified Resident S went to the hospital due to back pain and a wound. Initially, Resident S was taken to urgent care around the end of October 2021. He was prescribed an antibiotic. The wound got worst, and he also sustained a bed sore. He was taken to the hospital towards the end of November. Resident S stayed in the hospital for about three to four days. Mr. Flood stated staff properly care for Resident S.

Ms. Hearst verified Resident S was taken to the hospital due to an issue with his leg. Ms. Heist did not know if Resident S had a cyst on his leg or if his back is black. She stated staff properly care for Resident S.

I was only able to receive limited information from Resident S due to his limited cognitive abilities. Resident S did not know how long he lived in the facility. He stated, "my back hurts". He stated he did not have pain anywhere else, just in his back. Resident S stated he has a bandage on his back.

On 01/05/2022, I conducted a telephone interview with home manager Randall Underwood. Mr. Underwood verified Resident S went to the hospital on 12/03/2021 due

to a spot on his upper right thigh and a sore on his back. He now receives home health care. A nurse through Beaumont visits him and provides wound care to him. Mr. Underwood denied that Resident S has a black back. He stated staff properly care for Resident S.

On 01/13/2022, I reviewed an incident report (IR). On 12/03/2021, Resident S taken to the emergency room (ER) due to a sore on his lower back and spot on his thigh. Per the IR, Resident S was taken to the ER because the Resident S' leg and back was not looking better from going to urgent care two weeks prior. Resident S was admitted to St. Joseph Mercy for tests as well as treat a urinary tract infection (UTI).

I also reviewed Resident S' discharge paperwork from St. Joseph Mercy. He was admitted on 12/03/2021 and discharged on 12/08/2021. The admitting diagnoses were UTI, acute cystitis with hematuria, cellulitis of back except buttock and compression fracture of thoracic vertebra.

On 01/19/2022, I conducted a telephone interview with Beaumont Home Care nurse Fly (last name unknown). She stated she has seen Resident S in the facility two times to treat a wound. She stated Resident S is currently at St. Joe's Hospital. He is on a hospital hold. She was unable to access his chart in the system. She suggested that I contact Beaumont Home Health and Hospice for more information.

On 01/19/2022, I contacted Beaumont Home Health & Hospice. Resident S began receiving services through Beaumont Home Health & Hospice on 12/29/2021. He seen by physical therapy, occupational therapy, and social worker on 01/07/2022. No abuse or neglect concerns were documented. He was also seen by a nurse for wound care. Resident S services were paused as he hospitalized from 01/09/2022 to 01/14/2022 due to COVID. He resumed services on 01/16/2022. He will be seen by a nurse today (01/19/20222).

On 01/19/2022, I received a voicemail from Beaumont Home Care nurse Sara Scott. She stated she observed Resident S today and observed a bruise on Resident S' back, but it did not look like a new bruise. Resident S did not know how he sustained the bruise. He did not know that he had a bruise on his back. Per Ms. Scott, Resident S fell not too long ago, went to the hospital, and it is plausible that he sustained the bruise then. She stated Resident S also had a pressure sore on his back that he sustained while hospitalized. She did not observe any obvious signs of abuse or neglect. She stated Resident S was clean and happy.

On 01/19/2022, I conducted a telephone interview with Beaumont Home Care occupational therapist Adam Chalas. He stated he saw Resident S one time in the facility, but he was unsure of the date. He did not observe anything out of the ordinary. He stated Resident S appeared to be comfort and familiar with staff.

On 01/19/2022, I attempted to conduct a telephone interview with Resident S' aunt. She suggested that I call Resident S' cousin.

On 01/19/2022, I conducted a telephone interview with Resident S' guardian's case manager. She did not have knowledge of the allegations. She did not have any abuse or neglect concerns.

On 01/24/2022, I conducted a follow-up telephone call with APS specialist Jonathan Johnson. He stated he did not substantiate the allegations.

On 01/25/2022, I conducted a telephone interview with Resident S' cousin. She stated Resident S has complained of back pain and he stated he had a cyst and bed sore. She was aware that he was hospitalized about two weeks ago due to COIVD. As far of abuse or neglect concerns, Resident S' cousin stated it is concerning that Resident S asks to live with her. However, she does not know if there are any abuse/neglect concerns in the facility. She stated she did not know if Resident S was able to identify abuse/neglect concerns.

On 01/25/2022, I reviewed Resident S' assessment plan, signed and dated in 2021. Per the plan, Resident S needs prompting with bathing, dressing, and personal hygiene. He uses a walker and needs assistance with stair climbing.

APPLICABLE RU	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 S went to the hospital due to back pain and a wound in December 2021. Resident S began receiving wound care through Beaumont Home Health & Hospice in December 2021. Beaumont Home Care nurse Sara Scott stated she did not observe any obvious signs of abuse or neglect. Beaumont Home Care occupational therapist Adam Chalas did not observe anything out of the ordinary when he observed Resident S in the facility. Resident S appeared to be comfortable and familiar with staff. According to staff, Resident S is properly cared for.	
CONCLUSION:	VIOLATION NOT ESTABLISHED	

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her
	personal needs, including protection and safety, shall be

	attended to at all times in accordance with the provisions of the act.
ANALYSIS:	Resident S went to the hospital due to back pain and a wound in December 2021. Resident S began receiving wound care through Beaumont Home Health & Hospice in December 2021. Beaumont Home Care nurse Sara Scott did not observe any obvious signs of abuse or neglect. Beaumont Home Care occupational therapist Adam Chalas observed Resident S in the facility and did not observe anything out of the ordinary. Resident S appeared to be comfortable and familiar with staff.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

There is a concern for possible financial exploitation. Resident S receives over \$2,000 per month. He receives \$60 per month. It is unknown where the rest of his money is going.

INVESTIGATION:

On 12/15/2022, I conducted an unannounced onsite investigation. I interviewed staff Casio Flood and staff Marsha Hearst. I also interviewed Resident S. They did not have knowledge about Resident S' finances.

On 01/05/2022, I conducted a telephone interview with home manager Randall Underwood. Mr. Underwood stated Resident S does not receive over \$2,000 per month. Mr. Underwood was not certain how much Resident S pays to live in the facility monthly, but he stated Resident S' guardian puts \$300 on Resident S' debit card monthly for him.

On 01/13/2022, I reviewed Resident S' resident care agreement, dated and signed on 03/01/2021. Per the agreement, Resident S pays \$907.50 monthly for personal care, protection, and supervision. The basic fees include medical appointments, day programs, and access to the community. It is also documented that "I agree that ASI will be listed as joint recipient on food stamps secured in my name as long as I resident in a licensed AFC home provided or managed by ASI. The food stamps will be used to support the shared budget for purchase of food served within the AFC home." There was no documentation that the resident would have to pay \$300 monthly to cover food expenses if he is ineligible for food assistance.

In addition, I reviewed Resident S' Resident Funds Part II form for the time periods 11/01/2021 to 11/30/2021. No transactions were listed. The balance forwarded was \$20.

On 01/19/2022, I conducted a telephone interview with Resident S' guardian's case manager. She stated Resident S receives \$1659 per month as of January 2022. Resident S pays \$954 for care monthly. He is ineligible for food assistance. He pays \$300 per month for food as well. He receives a personal allowance of \$50 weekly. In 2021, Resident S received \$1567 per month and paid \$907.50 for care monthly. The monthly food expense and weekly personal allowance was the same as in 2022. Resident S' guardian's case manager did not have any knowledge of financial exploitation.

On 01/24/2022, I conducted a follow-up telephone call with APS specialist Jonathan Johnson. He stated he did not substantiate the allegations.

On 01/25/2022, I conducted a telephone interview with Resident S' cousin. She did not have knowledge about Resident S' finances.

On 01/25/2022, I reviewed Resident S' Resident Funds Part I. Per the form, the facility keeps track of Resident S' payment for adult foster care (AFC) and cash. I reviewed an account statement for Resident S' monthly AFC payments from 01/12/2021 to 12/07/2021. Resident S paid \$907.50 monthly. The Resident Funds Part II form was not used to document this. I reviewed Resident S' Resident Funds Part II forms from July 2021 to December 2021. The balance forward per month was \$20. No transactions were documented. However, I received two pages of copied receipts from transactions in November and December. I was unable to locate the dates on some of the receipts. None of these transactions were documented on the Resident Funds Part II form.

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.
ANALYSIS:	Per the agreement, Resident S pays \$907.50 monthly for personal care, protection, and supervision. The basic fees include medical appointments, day programs, and access to the community. It is also documented that "I agree that ASI will be listed as joint recipient on food stamps secured in my name as long as I reside in a licensed AFC home provided or managed by ASI. The food stamps will be used to support the shared budget for purchase of food served within the AFC home." There was no documentation that the resident would have to pay \$300 monthly to cover food expenses if he is ineligible for food assistance.

CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14315	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:	I reviewed Resident S' Resident Funds Part I. Per the form, the facility keeps track of Resident S' payment for adult foster care (AFC) and cash. I reviewed an account statement for Resident S' monthly AFC payments from 01/12/2021 to 12/07/2021. Resident S paid \$907.50 monthly. The Resident Funds Part II form was not used to document this. I reviewed Resident S' Resident Funds Part II forms from July 2021 to December 2021. The balance forward per month was \$20. No transactions were documented. However, I received two pages of copied receipts from transactions in November and December. I was unable to locate the dates on some of the receipts. None of these transactions were documented on the Resident Funds Part II form. Resident S' guardian's case manager stated Resident S receives \$1659 per month as of January 2022. Resident S pays
	\$954 for care monthly. He is ineligible for food assistance. He pays \$300 per month for food as well. He receives a personal allowance of \$50 weekly. In 2021, Resident S received \$1567 per month and paid \$907.50 for care monthly. The monthly food expense and weekly personal allowance was the same as in 2022. It is unknown where the remaining funds are going.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

About six years ago, the facility was filthy and had an odor. There were cigarette butts all over the carpet and by the door. In addition, about six years ago, Resident S was in the bathtub and he fell. There are no security rails.

INVESTIGATION:

On 12/15/2022, I conducted a telephone interview with APS specialist Johnathan Johnson. He stated he conducted an onsite visit. The facility has mostly hardwood floors. He did not observe any cigarette butts. The facility did not have a foul odor. The facility was cleaned.

On 12/15/2022, I conducted an unannounced onsite investigation. I interviewed staff Casio Flood and staff Marsha Hearst. I also interviewed Resident S. They did not have knowledge of these allegations. Mr. Flood and Ms. Heist stated staff clean the facility daily.

During the onsite investigation, I inspected the physical plant. I did not observe cigarette butts in the facility. The facility mostly has hardwood floors as opposed to carpet. The facility did not have a foul odor. The facility was cleaned. I observed secured handrails in the bathe/shower area.

On 01/05/2022, I conducted a telephone interview with home manager Randall Underwood. He denied the allegations. He stated the facility is cleaned as staff clean daily.

On 01/19/2022, I conducted a telephone interview with Resident S' guardian's case manager. She stated she did not have knowledge of the facility being filthy or having an odor. The last time she had been in the facility was before the start of the COIVD pandemic.

On 01/24/2022, I conducted a follow-up telephone call with APS specialist Jonathan Johnson. He stated he did not substantiate the allegations.

On 01/25/2022, I conducted a telephone interview with Resident S' cousin. She stated that she did not have knowledge of the facility's conditions. She had never been to the facility.

On 01/25/2022, I conducted an unannounced onsite investigation. I inspected the physical plant. I did not observe cigarette butts in the facility. The facility mostly has hardwood floors as opposed to carpet. The facility did not have a foul odor. The facility was cleaned.

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:	During an unannounced onsite investigation on 12/15/2021 and 01/25/2022, I did not observe cigarette butts in the facility. The facility mostly has hardwood floors as opposed to carpet. The facility did not have a foul odor. The facility was cleaned.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
	Maintenance of premises.
	(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.
ANALYSIS:	During an unannounced onsite investigation on 12/15/2022, I observed secured handrails in the bathe/shower area.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

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

02/07/2022

DaShawnda Lindsey Licensing Consultant Date

Approved By:

02/24/2022

Denise Y. Nunn

Date

Area Manager