



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 27, 2022

Katherine Frazier  
Hope Network Behavioral Health Services  
PO Box 890  
3075 Orchard Vista Drive  
Grand Rapids, MI 49518-0890

RE: License #: AM490392114  
Investigation #: 2022A0360026  
Bay Haven Integrated Care II

Dear Ms. Frazier:

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 (989) 732-8062.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matthew Soderquist".

Matthew Soderquist, Licensing Consultant  
Bureau of Community and Health Systems  
Ste 3  
931 S Otsego Ave  
Gaylord, MI 49735  
(989) 370-8320

enclosure

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

**I. IDENTIFYING INFORMATION**

|                                       |                                                                       |
|---------------------------------------|-----------------------------------------------------------------------|
| <b>License #:</b>                     | AM490392114                                                           |
| <b>Investigation #:</b>               | 2022A0360026                                                          |
| <b>Complaint Receipt Date:</b>        | 05/06/2022                                                            |
| <b>Investigation Initiation Date:</b> | 05/09/2022                                                            |
| <b>Report Due Date:</b>               | 07/05/2022                                                            |
| <b>Licensee Name:</b>                 | Hope Network Behavioral Health Services                               |
| <b>Licensee Address:</b>              | PO Box 890<br>3075 Orchard Vista Drive<br>Grand Rapids, MI 49518-0890 |
| <b>Licensee Telephone #:</b>          | (161) 643-0795                                                        |
| <b>Administrator:</b>                 | Katherine Frazier                                                     |
| <b>Licensee Designee:</b>             | Katherine Frazier                                                     |
| <b>Name of Facility:</b>              | Bay Haven Integrated Care II                                          |
| <b>Facility Address:</b>              | 799 Hombach Street<br>St. Ignace, MI 49781                            |
| <b>Facility Telephone #:</b>          | (616) 295-1751                                                        |
| <b>Original Issuance Date:</b>        | 04/12/2018                                                            |
| <b>License Status:</b>                | REGULAR                                                               |
| <b>Effective Date:</b>                | 10/12/2020                                                            |
| <b>Expiration Date:</b>               | 10/11/2022                                                            |
| <b>Capacity:</b>                      | 10                                                                    |
| <b>Program Type:</b>                  | DEVELOPMENTALLY DISABLED<br>MENTALLY ILL                              |

## II. ALLEGATION(S)

|                                                                                           | <b>Violation<br/>Established?</b> |
|-------------------------------------------------------------------------------------------|-----------------------------------|
| Resident A has a black eye and bruise on the ride side of her face from an unknown cause. | No                                |

## III. METHODOLOGY

|            |                                                                                               |
|------------|-----------------------------------------------------------------------------------------------|
| 05/06/2022 | Special Investigation Intake<br>2022A0360026                                                  |
| 05/06/2022 | APS Referral<br>Denied                                                                        |
| 05/09/2022 | Special Investigation Initiated - On Site                                                     |
| 05/09/2022 | Inspection Completed On-site<br>licensee designee Kathy Frazier, DCS Maggie Lundy, Resident A |
| 05/09/2022 | Contact - Telephone call made<br>DCS Patty Marrioti                                           |
| 06/17/2022 | Contact - Telephone call made<br>Guardian 1-A                                                 |
| 06/27/2022 | Exit Conference<br>With licensee designee Katherine Frazier                                   |

**ALLEGATION:** Resident A has a black eye and bruise on the ride side of her face from an unknown cause.

**INVESTIGATION:** On 5/06/2022 I was assigned a complaint from the LARA online complaint system.

On 5/09/2022 I conducted an unannounced onsite inspection at the facility. The administrator Katherine Frazier stated they noticed a small bruise on Resident A's right eye on 5/04/2022. She stated the next day on 5/05/2022 they noticed the bruising had gotten bigger on the right side of Resident A's face. She stated Resident A did not know how the bruising occurred. Ms. Frazier stated they reported the bruise to community mental health and then Resident A was sent to the hospital for a scan. She stated Resident A was diagnosed with a soft tissue bruise to the right periorbital area. Ms. Frazier provided the discharge paperwork from Mackinac Straits Hospital for Resident A documenting the bruise.

While at the facility on 5/09/2022 I interviewed direct care staff Maggie Lundy. Ms. Lundy stated Resident A reported to her that she fell out of bed but could not give any details about when it happened. Ms. Lundy stated that Resident A must have gotten herself back into bed because there was no documented fall. Ms. Lundy stated she was the staff who brought Resident A to the hospital where she was diagnosed with a bruise to her face.

While at the facility on 5/09/2022 I interviewed Resident A. Resident A still had bruising to the right side of her face. She stated she thinks she got the bruise falling out of bed, but she could not remember. She stated she was brought to the hospital to have it looked at. She denied anyone at the facility hurt her. She stated she receives very good care by the staff.

On 5/09/2022 I contacted direct care staff Patty Mariotti. Ms. Mariotti stated she noticed the bruise on Resident A on 5/05/2022. She stated she reviewed the staff notes and did not see any documentation regarding any falls. She stated Resident A stated she fell but there was no record of any falls. She stated Resident A told her it happened on the second floor of the facility and the facility is only one floor. She stated Resident A was sent to the Mackinac Straits emergency room on 5/6/2022 to have the bruise evaluated and she was diagnosed with a soft tissue bruise.

On 6/17/2022 I contacted Resident A's guardian. Guardian 1-A stated the facility has taken very good care of Resident A. She stated she does not have any concerns.

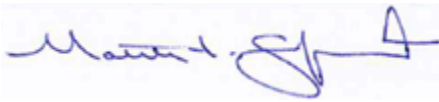
| <b>APPLICABLE RULE</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>R 400.14305</b>     | <b>Resident protection.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                        | <b>(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.</b>                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>ANALYSIS:</b>       | <p>The complaint alleged Resident A has a bruise on the right side of her face from an unknown cause.</p> <p>Resident A did have a bruise on the right side of her face from an unknown cause. The administrator stated she noticed a small bruise on Resident A's right eye on 5/04/2022. The bruise got bigger over the next day and Resident A was taken to hospital on 5/06/2022 and diagnosed with a soft tissue bruise.</p> <p>Direct care staff Maggie Lundy and Patty Mariotti were both told by Resident A that she fell however there was no documentation of any falls.</p> |

|                    |                                                                                                                                                                                                                                     |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                    | Guardian 1-A stated she did not have any concerns regarding the care Resident A has received in the home.<br><br>There is not a preponderance of evidence that Resident A's protection and safety was not attended to at all times. |
| <b>CONCLUSION:</b> | VIOLATION NOT ESTABLISHED                                                                                                                                                                                                           |

On 06/27/2022 I conducted an exit conference with licensee designee Katherine Frazier. Ms. Frazier concurred with the findings of the investigation.

**IV. RECOMMENDATION**

I recommend no change in the status of the license.



06/27/2022

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Matthew Soderquist  
Licensing Consultant

Date

Approved By:



06/27/2022

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Jerry Hendrick  
Area Manager

Date