GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 27, 2022

Ann Kelso
Simple Elegance, Inc.
422 Leland Place
Lansing, MI 48917

RE: License #: AS230285637
Investigation #: 2022A0466035
Simple Elegance II

Dear Ms. Kelso:

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 (517) 284-9727.

Sincerely,

Julie Elkins, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT
THIS REPORT CONTAINS QUOTED PROFANITY

I. IDENTIFYING INFORMATION

License #:	AS230285637
Investigation #:	2022A0466035
Complaint Receipt Date:	04/11/2022
Investigation Initiation Date:	04/11/2022
Report Due Date:	06/10/2022
Licensee Name:	Simple Elegance, Inc.
Licensee Address:	422 Leland Place Lansing, MI 48917
Licensee Telephone #:	(517) 507-1332
Administrator:	Ann Kelso
Licensee Designee:	Ann Kelso
Name of Facility:	Simple Elegance II
Facility Address:	4327 Gladys Lansing, MI 48911
Facility Telephone #:	(517) 507-1332
Original Issuance Date:	07/05/2007
License Status:	REGULAR
Effective Date:	04/07/2022
Expiration Date:	04/06/2024
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED

II. ALLEGATION:

	Violation Established?
Resident A was verbally threatened by direct care worker (DCW) Annette Williams.	No
Additional Findings	Yes

III. METHODOLOGY

04/11/2022	Special Investigation Intake-2022A0466035.
04/11/2022	Contact - Telephone call made to Complainant, message left.
04/11/2022	Special Investigation Initiated – Telephone call, Complainant interviewed.
04/15/2022	Inspection Completed On-site.
04/15/2022	Inspection Completed-BCAL Sub. Compliance.
04/15/2022	Contact - Telephone call made to Guardian A1 interviewed.
04/18/2022	Contact- Documents recevied from Ann Marie Kelso.
04/25/2022	Contact - Telephone call made to Resident A interviewed.
05/25/2022	Contact - Telephone call made to Ann Marie Kelso; documents requested.
05/25/2022	Contact- Documents recevied from Ann Marie Kelso.
05/26/2022	Exit Conference with Ann Marie Kelso.

ALLEGATION: Resident A was verbally threatened by direct care worker (DCW) Annette Williams.

INVESTIGATION:
On 04/11/2022, Complainant reported Resident A resides in an adult foster care (AFC) home and has a legal guardian. Complainant reported Resident A has cognitive concerns, cardiovascular issues, and diabetes. Complainant reported direct care worker (DCW) Annette Williams told Resident A she was going to “beat your (Resident A’s) ass.” Complainant reported it is unknown when this occurred.

Complainant reported that the licensee designee Ann Kelso was notified of this incident. Complainant reported licensee designee Kelso stated she would address the issue with DCW Williams.

On 04/15/2022, I conducted an unannounced investigation and DCW Williams was on shift at the facility. DCW Williams reported Resident A was not at the facility as she left earlier to be with family for the weekend. DCW Williams denied that she ever verbally threated Resident A. DCW Williams denied she told Resident A she was going to "beat her ass." DCW Williams reported Resident A has some mental health concerns that contribute to Resident A exhibiting behavioral issues. DCW Williams reported Resident A argues with her all of the time but then apologizes. DCW Williams reported that she only works Fridays at the facility.

Resident A was not at the facility during the time of the unannounced investigation and therefore Resident A was not interviewed.

On 04/15/2022, I interviewed licensee designee Kelso who reported she has never had any concerns about how DCW Williams talks to the residents. Licensee designee Kelso reported none of the residents have ever reported to her that they were verbally threatened by DCW Williams. Licensee designee Kelso reported Resident A did not tell her DCW Williams verbally threatened her. Licensee designee Kelso reported that one of Resident A's providers did contact her about DCW Williams verbally threatening Resident A. Licensee designee Kelso reported she did not believe that the incident occurred and she did not want to upset DCW Williams so she did not address the allegation with DCW Williams.

On 04/15/2022, I interviewed Guardian A1 who reported that Resident A has mental health concerns that can cloud her judgement and her ability to understand things. Guardian A1 reported Resident A can have a temper when she does not get what she wants. Guardian A1 reported Resident A never told him about any DCW verbally threatening her. Guardian A1 reported he talks to and visits with Resident A several times per week. Guardian A1 reported Resident A visits and talks with other family members also. Guardian A1 reported Resident A did not report that she was being verbally threatened to any other family members either. Guardian A1 believes the services and care provided by direct care staff members meets Resident A's needs and he does not have any concerns. Guardian A1 has met DCW Williams and he does not believe she verbally threatened Resident A.

On 04/18/2022, I reviewed Resident A's *Health Care Appraisal* that was dated 10/21/2021 and documented that Resident A has impaired cognition along with behavior and mood disorder.

On 04/25/2022, I interviewed Resident A who reported DCW Williams did tell her that she was going to "beat my ass." Resident A reported she could not remember the date this occurred but that she went to change her clothes and DCW Williams wanted her to take her pills so this was the reason DCW Williams was upset.

Resident A reported sometimes DCW Williams does not say nice things but that she has forgiven her. Resident A reported this incident happened in her bedroom and was not witnessed by any other residents or DCWs.

On 05/25/2022, I reviewed a Michigan Workforce Background Check which was dated 09/25/2019 and documented that DCW Williams was eligible to work in an AFC home.

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:	Complainant and Resident A reported DCW Williams verbally threatened Resident A, however DCW Williams denied the allegation and there were no witnesses to this alleged incident. Therefore, there is not enough evidence to support that Resident A was not treated with dignity in accordance with the act.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION:
On 04/15/2022, I conducted an unannounced onsite investigation and DCW Williams was on shift. DCW Williams reported she was not aware of the location of Resident A's written assessment plan because she only works on Fridays. Although DCW Williams looked for the paperwork and called licensee designee Kelso, the documents were not located or available for review while I was at the facility.

On 04/15/2022, licensee designee Kelso called me and reported that she would fax me Resident A's written assessment plan which she did.

APPLICABLE RULE	
R 400.14301	**Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**
	(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall

	maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	On 04/15/2022, Resident A's written assessment plan was not available for review at the time of the unannounced investigation as DCW Williams could not locate nor did she know the location of Resident A's written assessment plan at the facility.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION:
On 04/15/2022, I conducted an unannounced investigation and I observed medications for Resident B and Resident C unsecured on the kitchen counter. Additionally, I observed ear drops on the kitchen counter unsecured.

APPLICABLE RULE	
R 400.14312	**Resident medications.**
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.
ANALYSIS:	On 04/15/2022, the facility had both prescribed and over the counter medications on the kitchen counter unsecured. Therefore, a violation has been established as all medications are required to be in a locked cabinet or drawer.
CONCLUSION:	**VIOLATION ESTABLISHED**

On 05/26/2022, I conducted an exit conference with licensee designee Kelso who understood the findings of the investigation.

IV. RECOMMENDATION

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

05/26/2022

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Julie Elkins Date
Licensing Consultant

Approved By:

05/27/2022

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Dawn N. Timm Date
Area Manager