



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 21, 2022

Paul Kerridge
GMPK Residential Services. Inc.
P.O. Box 2160
301 Michigan Ave.
Frankfort, MI 496352160

RE: License #: AG100000012
Investigation #: 2023A0870002
Crystal View AFC

Dear Mr. Kerridge:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On October 20, 2022, you submitted an acceptable written corrective action plan. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan.

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 (231) 922-5309.

Sincerely,

A handwritten signature in blue ink, reading "Bruce A. Messer".

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

enclosure

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

I. IDENTIFYING INFORMATION

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| License #: | AG100000012 |
| Investigation #: | 2023A0870002 |
| Complaint Receipt Date: | 10/10/2022 |
| Investigation Initiation Date: | 10/11/2022 |
| Report Due Date: | 12/09/2022 |
| Licensee Name: | GMPK Residential Services. Inc. |
| Licensee Address: | 301 Michigan Ave. Frankfort, MI 496352160 |
| Licensee Telephone #: | (231) 882-4864 |
| Administrator: | Paul Kerridge |
| Licensee Designee: | Paul Kerridge |
| Name of Facility: | Crystal View AFC |
| Facility Address: | 5908 Frankfort Highway Frankfort, MI 49635 |
| Facility Telephone #: | (231) 882-4864 |
| Original Issuance Date: | 04/02/1989 |
| License Status: | REGULAR |
| Effective Date: | 11/09/2021 |
| Expiration Date: | 11/08/2023 |
| Capacity: | 40 |
| Program Type: | PHYSICALLY HANDICAPPED, MENTALLY ILL DEVELOPMENTALLY DISABLED, AGED |

II. ALLEGATION(S)

| | Violation Established? |
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| The Licensee refused to take Resident A back following a hospitalization. | No |
| The Licensee did not contact Resident A's guardian following a fall and subsequent hospitalization. | Yes |

III. METHODOLOGY

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| 10/10/2022 | Special Investigation Intake 2023A0870002 |
| 10/11/2022 | APS Referral This referral came from the Michigan Department of Health and Human Services, Protective Services Centralized Intake unit. |
| 10/11/2022 | Special Investigation Initiated - Telephone Case discussion with Adult Services Worker Ron Stier. |
| 10/12/2022 | Contact - Telephone call made Telephone call with Licensee Designee Paul Kerridge. |
| 10/12/2022 | Contact - Telephone call made Case discussion with ASW Ron Stier. |
| 10/17/2022 | Contact - Telephone call made Telephone call with Sandy Fuller, Medical Social Worker - Munson Hospital Cadillac. |
| 10/17/2022 | Contact - Telephone call made Telephone call with Guardian Lee Storch. |
| 10/20/2022 | Inspection Completed On-site Interview with Licensee Designee Paul Kerridge and Resident A. |
| 10/20/2022 | Exit Conference Completed with Licensee Designee Paul Kerridge. |
| 10/20/2022 | Inspection Completed-BCAL Sub. Compliance |

ALLEGATION: The licensee refused to take Resident A back following a hospitalization.

INVESTIGATION: On October 11, 2022, I spoke by telephone with Ron Stier, Adult Services Specialist with the Benzie County Department of Health and Human Services. Mr. Stier stated that he provides services to Resident A through the department's Adult Community Placement program and was informed by Mr. Kerridge of Resident A's hospitalization. He noted that Resident A has a public guardian with Guardianship Services of Northwest Michigan, Lee Storch.

On October 12, 2022, I spoke by telephone with Licensee Designee Paul Kerridge. I informed Mr. Kerridge of the above allegations. Mr. Kerridge informed me that Resident A returned to Crystal View AFC home from the hospital on October 10, 2022. He noted that Munson Hospital-Cadillac called on Monday, October 10, 2022, informing him that Resident A was ready to be discharged and he returned later that same afternoon.

On October 17, 2022, I spoke by telephone with Munson Hospital-Cadillac, medical Social Worker Sandy Fuller. Ms. Fuller stated that Resident A was admitted to Munson Hospital – Cadillac on October 4, 2022. She noted that the hospital "had a discussion" with Mr. Kerridge on Friday, October 7, 2022, about possibly discharging Resident A back to the AFC home, but Mr. Kerridge "was hesitant" about Resident A's ability to manage stairs. Ms. Fuller stated that no further action or discussion occurred over that following weekend. She noted that on Monday October 10, 2022, the hospital felt Resident A was ready for discharge and upon further discussion with Mr. Kerridge, Resident A was discharged from the hospital and returned to Crystal View AFC that same day.

On October 17, 2022, I spoke by telephone with Lee Storch. Ms. Storch stated her agency provides guardianship services for Resident A. She stated she had a discussion with the hospital (could not recall the date) regarding Resident A's discharge but the hospital initially looked into sending Resident A to a "rehab" facility as there were questions regarding Resident A's ability to manage stairs at Crystal View AFC. Ms. Storch noted that later, on or about October 10, 2022, it was determined to discharge Resident A directly back to Crystal View AFC home. She noted that he returned, and is residing, at Crystal View AFC.

| APPLICABLE RULE | |
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| R 400.2403 | Admission and discharge. |
| | (9) A resident shall not be discharged from a congregate facility without adequate preparation, including a determination that a move is in a resident's best interest. At the time of discharge the responsible agency or the department of social services shall update the assessment plan to provide for continuity in |

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| | achieving objectives. A congregate facility shall record the date of discharge, the reason for discharge, the disposition of money and valuables held for safekeeping and a forwarding address of the resident or a relative, guardian or other adult. The foregoing does not restrict the resident's ability to make his own living arrangements. |
| ANALYSIS: | Resident A returned to Crystal View AFC the day he was ready for discharge from the hospital. Resident A was not discharge from Crystal View AFC home. |
| CONCLUSION: | VIOLATION NOT ESTABLISHED |

ALLEGATION: The licensee did not contact Resident A's guardian following a fall and subsequent hospitalization.

INVESTIGATION: Mr. Stier stated that he was informed by Mr. Kerridge of Resident A's hospitalization. He noted that he is Resident A's Adult Services worker through the Michigan Department of Health and Human Services, the responsible agency for Resident A's AFC placement.

Mr. Kerridge stated that he did not call Resident A's guardian, Guardianship Services of Northwest Michigan, Lee Storch, concerning Resident A's fall and subsequent hospitalization.

Ms. Storch stated that Crystal View AFC, or Mr. Kerridge, did not notify her, or her guardianship agency, that Resident A had a fall and was hospitalized. She stated she did not know of the hospitalization until two days later when she was contacted by the hospital.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.2404 | Illnesses and accidents. |
| | (1) In case of an accident or sudden adverse change in a resident's physical condition or adjustment, a congregate facility shall obtain needed care immediately and notify the responsible relative and the person or agency responsible for placing and maintaining the resident in the congregate facility. |
| ANALYSIS: | The Licensee failed to notify Resident A's guardian of his accident/fall. |

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| CONCLUSION: | VIOLATION ESTABLISHED |
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On October 20, 2022, I provided Licensee Designee Paul Kerridge with an exit conference. I explained my findings as noted above. Mr. Kerridge stated he understood and noted that he had no further information to provide, or questions, concerning this special investigation. Mr. Kerridge developed and submitted a corrective action plan to address the above cited rule violation. This corrective action plan was accepted by this Consultant.

IV. RECOMMENDATION

An acceptable corrective action plan was submitted by the Licensee Designee. I recommend the status of the license remain unchanged.



October 21, 2022

Bruce A. Messer
Licensing Consultant

Date

Approved By:



October 21, 2022

Jerry Hendrick
Area Manager

Date