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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 12, 2022

Kimberly Rawlings
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AS630387842
Investigation #: 2022A0465041
Beacon Home at Dilley

Dear Ms. Rawlings:

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,

A handwritten signature in cursive script that reads "Stephanie Gonzalez".

Stephanie Gonzalez, LCSW
Adult Foster Care Licensing Consultant
Bureau of Community and Health Systems
Department of Licensing and Regulatory Affairs
Cadillac Place, Ste 9-100
Detroit, MI 48202
Cell: 248-514-9391
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enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630387842
Investigation #:	2022A0465041
Complaint Receipt Date:	07/19/2022
Investigation Initiation Date:	07/19/2022
Report Due Date:	09/17/2022
Licensee Name:	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110 - 890 N. 10th St. Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
Administrator:	Kimberly Rawlings
Licensee Designee:	Kimberly Rawlings
Name of Facility:	Beacon Home at Dilley
Facility Address:	7570 Dilley Road Davisburg, MI 48350
Facility Telephone #:	(248) 382-5648
Original Issuance Date:	08/13/2018
License Status:	REGULAR
Effective Date:	02/13/2021
Expiration Date:	02/12/2023
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL; AGED TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
On July 1, 2022, Resident A was left in a urine-soaked brief by direct care staff, Miracle Horne.	No
On 7/18/2022, there was not adequate food in the home to serve breakfast and lunch meals to residents.	Yes

III. METHODOLOGY

07/19/2022	Special Investigation Intake 2022A0465041
07/19/2022	Special Investigation Initiated - Letter Spoke to Complainant via email
07/19/2022	APS Referral Adult Protective Services (APS) referral was denied
07/26/2022	Inspection Completed On-site I completed a walk-through of the facility reviewed Resident A's file, observed the meal menus and the food items in the home and interviewed Resident B, Resident C and direct care staff/home manager, Jordan Eldridge
07/27/2022	Contact - Telephone call made I interviewed ORR Officers Marissa George (St. Clair County) and Nancy Tezak (Sanilac County)
07/28/2022	Contact - Document Received Email exchange with Ramon Beltran (Corporate staff)
08/16/2022	Contact – Telephone call made I left a voice message for direct care staff, Miracle Horne
08/30/2022	Contact - Telephone call made I interviewed direct care staff, Kiyana Harrison, via telephone
09/02/2022	Contact – Telephone call made I spoke to Mr. Horne via telephone
09/02/2022	Contact - Telephone call made I spoke to Guardian A1 via telephone

09/06/2022	Contact - Telephone call made I interviewed direct care staff, Nakeesha Woodward, via telephone
09/08/2022	Exit Conference I conducted an exit conference with licensee designee/ administrator, Kimberly Rawlings, via telephone

ALLEGATION:

On July 1, 2022, Resident A was left in a urine-soaked brief by direct care staff, Miracle Horne.

INVESTIGATION:

On 7/19/2022, a complaint was received, alleging that on July 1, 2022, Resident A was left in a urine-soaked brief by direct care staff. The complaint stated that Resident A was being transported by direct care staff, Miracle Horne, to a family visit, and during this drive, Resident A needed to use the restroom. The complaint stated that Ms. Horne refused to stop the vehicle so that Resident A could use the restroom which subsequently led to Resident A being left in a urine-soaked brief for an unknown duration of time.

On 7/19/2022, I spoke to Complainant, who confirmed that the information contained in the complaint is accurate.

On 7/26/2022, I conducted an onsite investigation at the facility. During the onsite investigation, I conducted a walk-through of the facility and interviewed direct care staff/home manager, Jordan Eldridge. At the time of my onsite investigation, I was informed that Resident A was receiving hospice services and passed away on 7/18/2022.

Resident A's *Face Sheet* stated that Resident A resided in the facility from 11/3/2021 – 7/18/2022 and has a legal guardian, Guardian A1. The *Health Care Appraisal* stated that Resident A's medical diagnosis was Stage 4 Colon Cancer. The *Assessment Plan for AFC Residents* stated that Resident A moved independently in the community, had a history of verbal aggression, independently completed personal care tasks with prompting and did not require use of assistive devices.

I interviewed direct care staff, Jordan Eldridge, who stated that she has worked at the facility for one year. Ms. Eldridge stated that during the time that Resident A resided at the facility, she was ambulatory and able to complete self-care tasks independently. Ms. Eldridge stated, "Due to Resident A's medical diagnosis, she had cysts on her buttocks. There was a cream that we put on Resident A's buttocks to assist with treating the cysts, and sometimes Resident A preferred to wear briefs to provide additional support to her buttocks area. Resident A chose to wear briefs, but it was not medically required.

In early July, direct care staff, Miracle Horne, transported Resident A to visit her family. I am not aware of any incident during which Mr. Horne, or any other staff, refused to allow Resident A to use the bathroom.” Ms. Eldridge denied this allegation is true.

On 8/30/2022, I spoke to direct care staff, Kiyana Harrison, via telephone. Ms. Harrison stated that she has worked at the facility for one year. Ms. Harrison stated, “We provided good care to Resident A. Resident A was able to independently complete personal care tasks until the last few days leading up to her passing. I assisted Resident A with personal care tasks if she asked, but most times we prompted her with reminders only. I don’t know of any time when a staff refused to assist Resident A with personal care tasks.” Ms. Harrison denied knowledge of this allegation being true.

On 9/2/2022 I spoke to direct care staff, Miracle Horne, via telephone. Mr. Horne stated, “I have never denied any resident access to using the bathroom if needed. I did transport Resident A to see her family in July 2022. About 20 minutes into the drive, Resident A asked to use the bathroom, but at that time we were stuck in a traffic backup on the highway. We were stuck in the traffic backup for about 20 minutes. Once we got out of the traffic backup, I asked Resident A if she still needed to use the bathroom and she said no. We arrived at her family’s location about 20 minutes later and she appeared to be fine. If Resident A did have an accident while we were in the car, she did not tell me.” Mr. Horne denied this allegation is true.

On 9/2/2022, I spoke to Guardian A1, via telephone. Guardian A1 stated, “I had no concerns related to the personal care, supervision and protection provided to Resident A. Resident A passed away on 7/18/2022 due to medical reasons. Prior to Resident A’s passing, I had no concerns and I believe that the staff provided quality care to Resident A.”

On 9/6/2022, I spoke to direct care staff, Nakeesha Woodward via telephone. Ms. Woodward stated that she has worked at the facility for three years. Ms. Woodward stated, “Resident A was able to complete her personal care tasks independently for the majority of the time that she resided in her facility. Resident A wore briefs as a personal preference and did not require help with changing her briefs. I never observed any issues and I never refused to assist Resident A with personal care tasks if she asked. I do not know of a time when any staff refused to assist Resident A with personal hygiene care.”

On 9/8/2022, I spoke to licensee designee/administrator, Kimberly Rawlings. Ms. Rawlings stated, “Resident A was able to complete personal hygiene tasks with prompting. I am not aware of a time when direct care staff refused to assist Resident A with personal care tasks. I have no knowledge of Mr. Horne refusing to allow Resident A to use to bathroom when he transported her to Detroit.” Ms. Rawlings denied that this allegation is true.

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:	<p>According to Mr. Horne, he never refused to allow Resident A access to a bathroom on 7/1/2022. Mr. Horne denied that this allegation is true.</p> <p>According to Mr. Eldridge, Ms. Harrison, and Ms. Woodward, they are not aware of any incident during which Mr. Horne, or any other staff, refused to allow Resident A to use the bathroom or refused to assist in a brief change. Ms. Eldridge denied this allegation is true.</p> <p>According to Ms. Rawlings, Resident A was able to complete personal hygiene tasks with prompting. Ms. Rawlings denied knowledge of Mr. Horne refusing to allow Resident A to use to bathroom when he transported her to Detroit.</p> <p>Based on the information above, there is not sufficient information to confirm that, on 7/1/2022, Mr. Horne refused to allow Resident A access to a bathroom, nor refused to assist Resident A with a brief change.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

On 7/18/2022, there was not adequate food in the home to serve breakfast and lunch meals to residents.

INVESTIGATION:

On 7/19/2022, a complaint was received, alleging that there not sufficient food in the home on 7/18/2022, to provide meals to residents.

On 7/26/2022 at 10:30 am, I conducted a walk-through of the facility, observed the meal menus and the food items in the home and interviewed Resident B, Resident C, and direct care staff/home manager, Jordan Eldridge. At the time of the onsite investigation, there were four residents residing in the facility.

I observed the refrigerator and pantry areas to be very low on food supply. I reviewed the meal menu and compared the meal items listed on the menu to the food items in the home. I determined the following discrepancies:

7/26/2022:

Lunch Meal: Spanish Egg Bake, California Blend, Applesauce, Wheat Crackers, and sandwich cookie. I was unable to locate applesauce, wheat crackers or the ingredients for the egg bake.

Dinner Meal: Tacos with tortillas. No snack was listed. I was only able to locate one pound of ground beef. I was unable to locate tortillas or any other item to be used for a taco meal.

7/27/2022:

Breakfast Meal: Toaster Strudel (two pastries), skim milk (one cup), frozen mixed berries and orange juice concentrate. I was unable to locate toaster strudels, mixed berries, or sufficient milk to provide a one cup portion size to each resident.

Lunch Meal: Cheese sandwich with Swiss cheese, graham crackers, carrots, and snack of choice. I was unable to locate sufficient bread to make sandwiches for four residents. I was also unable to locate graham crackers and carrots.

Dinner Meal: Turkey sausage roll and pasta, coleslaw, honeydew melon, skim milk (one cup), ice pops and vegetable. I was unable to locate turkey sausage, coleslaw, and honeydew melon.

I interviewed Resident B, who stated he has resided at the facility for several years. Resident B stated, "Yea, there are times when there is no food in the home. Usually this happens at the middle or end of the month. Sometimes the amount of food we get for meals is smaller because there isn't much food in the home."

I interviewed Resident C, who stated he has lived at the facility for a few years. Resident C stated, "Sometimes there is not a lot of food in the home. Sometimes we miss a meal or snack if there is no food here. And sometimes there are no snacks to eat."

I interviewed Ms. Eldridge, who stated, "I am not able to keep sufficient food in the home to feed residents. I am given a food budget every month. I have \$1,300 to spend per month. This money has to cover food for the entire month, as well as all resident outings, prescription copays and all over-the-counter medications. On the 1st of each month, I grocery shop and buy food for the home based on the menu, but within the first 3 – 4 days, all of the food is gone. The residents eat everything up. The residents eat all day every day. They cook meals at 2am and it's their right to access any food that is in the home. The residents will eat up all the food items that I need to use for the next days meals, and then I don't have the ingredients to cook the meals on the menu. Food does not last here. And I can't deny residents access to whatever food items they want. It's a resident rights rule. I have been cited by recipient rights for not allowing the residents to eat whatever they want, whenever they want, so I can't stop them from

eating all the food. And as of today, I have spent all of the monthly food budget money. I only have \$187.18 left to use for the rest of this month. I don't get any more money to buy food until the 1st of August. If I spend all the food money, I have to wait until the 1st of the next month to buy more groceries. This issue happens every month. I have spoken to Ms. Rawlings about the food budget, and I have been told that the food budget will remain in place, and I don't know what else to do. I can only buy food with the money I am given. I don't have all of the ingredients to make the lunch meal, or the dinner meal listed on the menu. The residents ate all the tortillas and a lot of the other ingredients I need. I do not have all the ingredients to cook the meals listed on the menu for the next five days. Our snack cabinet is almost empty. But even when we are low on food, I still find something to serve the residents. There has never been a time when there was not enough food to prepare a meal. Residents were provided breakfast and lunch on 7/18/2022. I don't recall what they were served but I know they were given a meal even if it did not match the menu." Ms. Eldridge admitted that the home is low on food items and does not have sufficient food items to cook the meals for residents for the next five days based on the meal menu.

On 7/27/2022, I spoke to the Office of Recipient Rights (ORR) staff, Marissa George from St. Clair County, via telephone. Ms. George stated that her county has a contract with the facility and currently has residents residing in the home. Ms. George stated, "It is a recipient rights rule that residents must have access to food at all times, however, that does not mean that they have to be provided seven-course meals during non-meal hours. The facility does have the right to offer specific food items to residents to avoid meal items/ingredients being eaten. The facility can tell residents that there are certain items that are available for non-meal hours."

On 7/27/2022, I spoke to Office of Recipient Rights (ORR) staff, Nancy Tezak Sanilac County, via telephone. Ms. Tezak stated that her county has a contract with the facility and currently has residents residing in the home. Ms. Tezak stated, "Per rights rules, the facility has to allow residents free access to food at all times. But the facility can restrict residents from eating specific food items that are going to be utilized for meals or other purposes. The garage space is not a licensed area therefore, the facility can store overflow food items in a refrigerator or deep freezer in the garage area and place a lock on it to restrict access to residents until the food items are ready to be used inside the home."

On 7/28/2022, I spoke to corporate staff, Ramon Beltran via telephone. Mr. Beltran stated that Ms. Rawlings is out of the office, and he is covering for her today. Mr. Beltran acknowledged that the facility should have adequate food in the home at all times, to ensure that the meals listed on the meal menu are able to be provided to residents. Mr. Beltran stated, "The facility does have a monthly food budget, but the food budget can also be exceeded if the food runs out before the start of the new month. We (as a corporation), have recently increased the budget due to inflation costs. I do not know why the home does not have the necessary food needed to meet the meal requirements. I will ensure that Ms. Eldridge goes shopping today and buys groceries for the home."

On 8/30/2022, I spoke to Ms. Harrison, via telephone. Ms. Harrison stated, “We have food in the home, but the food is gone fast. The residents eat whatever they want, whenever they want. And we can’t stop them from doing it, so the food gets eaten quickly. The residents will get up in the middle of the night and they will eat everything. I don’t know of a time when residents did not get served a meal on 7/18/2022 or any other day. I know that the food supply gets low, and Ms. Eldridge then has to go back and buy more food.

On 9/2/2022 I spoke to Mr. Horne, via telephone. Mr. Horne stated, “The residents eat a lot of food throughout the night, and they often eat the ingredients we need to prepare the meals for the next day. There have been issues where the food is low, and we can’t cook what is on the menu. Residents do receive three meals a day, it just sometimes is not what is on the menu. And if food supply is low, we have to wait for Ms. Eldridge to go back to the store to buy food items.”

On 9/6/2022, I spoke to Ms. Woodward via telephone. Ms. Woodward stated, “I observe residents eating a lot of food at night. Often times, they will eat everything that is needed for the meals the next day. The residents will cook full meals in the middle of the night, and we can’t stop them from doing it. So, the next day, we don’t have the items we need to prepare meals. I am not aware of a time when residents did not get served a meal, I just know that the food supply gets low very quickly because residents are able to eat anything they want at all times.”

On 9/9/2022, I conducted an exit conference with Ms. Rawlings via telephone. Ms. Rawlings stated that she is in agreement with the findings of this report. Ms. Rawlings stated that the facility has implemented measures to ensure that the home always has sufficient food in the home to provide the meals listed on the menu.

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.
ANALYSIS:	On 7/26/2022 at 10:30 am, I observed the refrigerator and pantry areas to be very low on food supply. I reviewed the meal menu and compared the meal items listed on the menu to the food items in the home. I determined that the facility did not have the required food items and ingredients necessary to provide breakfast, lunch, and dinner for the residents for the next five days.

	<p>According to Resident B and Resident C, the facility is often low in food supply, which leads to smaller portion sizes of meals and, on occasion, missed meals and snacks.</p> <p>According to Ms. Eldridge, she is given a food budget of \$1300.00 per month, that must also cover the costs of resident outings, prescription copays and all over-the-counter medications. Ms. Eldridge stated that it is a common occurrence each month to run out of food/ingredients and not have the required items available in the home to prepare three meals daily. Ms. Eldridge stated that she does not have the food items and ingredients available in the home to prepare the necessary meals for residents for the remainder of the month of July 2022.</p> <p>According to Ms. Harrison, Mr. Horne, and Ms. Woodward, it is common for the facility to not have the necessary food items and ingredients required to prepare three nutritious meals daily to residents.</p> <p>Based on the information above, the facility is not ensuring they have sufficient food items and ingredients available in the home to provide three nutritious meals daily to residents.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend that the status of the license remains unchanged.

Stephanie Gonzalez

10/12/2022

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:

Denise Y. Nunn

10/12/2022

Denise Y. Nunn
Area Manager

Date