

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 20, 2022

Megan Fry MCAP Holt Opco, LLC Suite 115 21800 Haggerty Road Northville, MI 48167

> RE: License #: AL330404596 Investigation #: 2023A0577007 Prestige Way #1 (Cedar Cottage)

Dear Ms. Fry:

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 (231) 922-5309.

Sincerely,

Bridget Vermeesch

Bridget Vermeesch, Licensing Consultant Bureau of Community and Health Systems 1919 Parkland Drive Mt. Pleasant, MI 48858-8010 (989) 948-0561

enclosure

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

I. IDENTIFYING INFORMATION

Licence #	41 220 40 4500
License #:	AL330404596
Investigation #:	2023A0577007
Complaint Receipt Date:	11/17/2022
Investigation Initiation Date:	11/18/2022
Report Due Date:	01/16/2023
Report Due Date.	01/10/2023
Licensee Name:	MCAP Holt Opco, LLC
Licensee Address:	Suite 115
	21800 Haggerty Road
	Northville, MI 48167
Licensee Telephone #:	(517) 694-2020
Administrator/Licensee	Megan Fry
	Megalitiy
Designee:	
Name of Facility:	Prestige Way #1 (Cedar Cottage)
Facility Address:	4300 Keller Road
	Holt, MI 48842
Facility Telephone #:	(517) 694-2020
/	
Original Issuance Date:	11/02/2020
original isodaniec Bate.	11/02/2020
License Status:	REGULAR
License Status.	REGULAR
	05/00/0004
Effective Date:	05/02/2021
Expiration Date:	05/01/2023
Capacity:	20
Program Type:	AGED
	ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Direct care staff member LaCher Greenwood threatened Resident	Yes
A by saying, "you better calm down before I put you out in the rain."	
Food being provided to the residents is greasy.	No
Back in March 2022, a dead rat was found under the refrigerator in the kitchen.	No
Residents' clothes are being laundered with soiled briefs.	No

III. METHODOLOGY

11/17/2022	Special Investigation Intake 2023A0577007
11/18/2022	APS Referral
	Denied for investigation.
11/18/2022	Special Investigation Initiated - Telephone
11/23/2022	Intake#191856 was dismissed and added as additional information to current complaint.
11/23/2022	Contact-Telephone call made- Jennifer Browning, AFC Consultant interviewed Complainant.
11/30/2022	Contact - Telephone call made- Interview with Witness's.
11/30/2022	Contact-Document Received- Email Correspondences.
12/01/2022	Inspection Completed On-site
12/01/2022	Exit Conference with acting licensee designee and administrator Marica Curtis.

ALLEGATION: Direct care staff member LaCher Greenwood threatened Resident A by saying, "you better calm down before I put you out in the rain."

INVESTIGATION:

On November 17, 2022, an anonymous complaint was received alleging that on November 05, 2022, Resident A appeared to be frantic after direct care staff member (DCS) LaCher Greenwood was overheard saying to Resident A, "you better calm down before I put you out in the rain."

On November 18, 2022, I interviewed DCS Jamie Carlson who reported she is no longer employed at the facility. DCS Carlson reported she was not working during this specific incident with Resident A but had been made aware of the incident by other staff working. DCS Carlson reported DCS LaCher Greenwood is very rough with the residents when transferring and often overheard yelling and/or threatening residents saying such statements as, "I told you to sit down and wait, do not get up, or what do you think you are doing-not listening."

On November 30, 2022, I interviewed DCS Darlene Gonzalez who reported a few weeks ago DCS LaCher Greenwood was working in the other building when DCS Gonzalez received a telephone call from DCS Greenwood regarding Resident A having a behavior. DCS Gonzalez reported DCS Greenwood said, "you better get over here because I am about to slap [Resident A] in the face." DCS Gonzalez reported she went to the other building and found DCS Greenwood in the dining room area saying to Resident A, "you better behave and straighten up or I am going to put you out in the rain and cold weather." DCS Gonzalez reported she put herself between DCS Greenwood and Resident A to calm the situation. DCS Gonzalez reported she was told by DCS Greenwood that Resident A threw a cup of tea at DCS Greenwood. DCS Gonzalez reported she started picking things up off of the floor while Resident A sat in her wheelchair and out of the corner of her eye, she saw Resident A's wheelchair fall backwards. DCS Gonzalez reported she jumped up to find DCS Greenwood had grabbed Resident A's wheelchair, tipped it backwards flinging Resident A back into her chair and started forcefully pushing Resident A down the hallway. DCS Gonzalez reported she got in between DCS Greenwood and Resident A in Resident A's bedroom and requested DCS Greenwood leave Resident A's bedroom which she did. After this incident, DCS Gonzalez wrote a written report, contacted Corporate Vice President Marcia Curtis, and reported the incident. DCS Gonzalez reported the facility has video cameras in the common areas of the facility such as the dining room, living room and hallways. DCS Gonzalez reported Ms. Curtis watched the facility video immediately, called back to the facility and advised DCS Gonzalez to have DCS Greenwood leave the premises immediately until further notice. DCS Gonzalez reported this has been going on for months and the direct of nursing and administrator have been covering things up and refusing to address the issues. DCS Gonzalez reported Director of Operations Amanda Dunlap, Director of Nursing Julia Jones, and DCS Greenwood are no longer employed at the facility.

On November 30, 2022, I received an email from Adult Foster Care Licensing Consultant Julie Elkins who is the assigned consultant for this facility. Ms. Elkins stated she received an email from Vice President Marcia Curtiss reporting administrator Amanda Dunlap and Director of Nursing Julia Jones are no longer employed at the facility thus verifying this information.

On December 01, 2022, I completed an unannounced onsite investigation and interviewed Resident A who reported DCS LaCher Greenwood was mean to her. Resident A reported DCS Greenwood yelled at her and was rough with her when providing hands on assistance. Resident A reported DCS Greenwood made threats to her, such as putting Resident A in the rain. Resident A stated, "LaCher is often mean to me, for some reason she does not like me."

On December 01, 2022, I interviewed DCS Delfina Earls who reported she was not working during the time of the incident when DCS Greenwood threatened to put Resident A in out into the rain. DCS Earls reported she was made aware of DCS Greenwood is no longer employed due to her mistreatment of the residents and was notified of this upon shift change on November 05, 2022.

On December 01, 2022, I interviewed Corporate Vice President Marcia Curtiss who reported on November 05, 2022, she received a telephone call from direct care staff reporting DCS LaCher Greenwood threatened to put Resident A in the rain if Resident A did not start behaving and was rough while transporting Resident A in her wheelchair. Ms. Curtiss reported she watched the video and heard DCS Greenwood swearing while in the kitchen, with no residents in the area, and then continued to make comments under her breath about residents. Ms. Curtis reported per the video it appeared DCS Greenwood was talking under her breathe and swearing not in the presence of the residents. Ms. Curtis reported after reviewing the video, DCS Greenwood was terminated immediately.

APPLICABLE RULE	
R 400.15308	Resident behavior interventions prohibitions.
	(2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following: (iv) Threats.
ANALYSIS:	During the investigation it was found DCS LaCher Greenwood threatened to put Resident A out in the rain if she did not behave. Resident A also confirmed that DCS LaCher Greenwood threatened to put her outside in the rain, made her feel afraid and intimidated her during regular interactions.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Food being provided to the residents is greasy.

INVESTIGATION:

On November 23, 2022, Complainant reported the food being served is not good in quality or taste, specifically when they make chili there is a thick layer of grease due to the fat of the meat not being drained prior to adding the chili ingredients. DCS Darlene Gonzalez reported she does have concerns regarding the quality of food being provided. DCS Gonzalez reported she thinks it is a lack of training and knowledge of how to cook for large groups of people at one time. DCS Gonzalez reported the food does not look appealing nor does it taste good and most residents will not eat the food. DCS Gonzalez reported there recently has been different cooks and they have been amazing, the food is great, both appealing to the eye and taste. DCS Gonzalez reported the residents are happy and are clearing their plates again when eating meals.

On December 01, 2022, I interviewed DCS Delfina Earls who reported the food being served is getting better, but there were times when it looked and tasted terrible. DCS Earls stated new cooks started over the past few weeks and are doing great. During my December 01, 2022, onsite investigation, I observed the lunch meal being served and it was appropriately cooked and looked appealing. The lunch served was baked chicken, stewed tomatoes, cottage cheese, and pears.

On December 01, 2022, I interviewed Resident A, Resident B, Resident C, and Resident D who reported the food is fine, but not always the best looking or tasting. Resident B, Resident C and Resident D reported they have not noticed the food being greasy rather if anything the food is bland.

On December 01, 2022, I observed lunch being served which was baked chicken with stewed tomatoes, cottage cheese, and pear slices. I reviewed the menus for the months of November 2022 and December 2022 and did not observe a meal that would have been greasy. I also interviewed cook Edward Kolle who reported he drains the fat or grease off the food he prepares prior to serving or mixing with other ingredients. Mr. Kolle reported he has witnessed other cooks do the same but cannot say this happens all the time or with each cook due to everyone having their own touches when making meals.

APPLICABLE RULE	
R 400.15313	Resident nutrition.
	(2) Meals shall meet the nutritional allowances
	recommended pursuant to the provisions of "Appendix I:
	Recommended Dietary Allowances, Revised 1980" contained in the publication entitled "Basic Nutrition Facts:
	A Nutrition Reference," Michigan Department of Public
	Health publication no. H-808, 1/89. This publication may be

ANALYSIS:	obtained at cost from The Division of Research and Development, Michigan Department of Public Health, P.O. Box 30195, Lansing, Michigan 48909.There was insufficient evidence found that food served to residents is greasy. I observed the lunch meal served on December 01, 2022, which consisted of baked chicken with stewed tomatoes, cottage cheese and pear slices and did not observe any grease. I observed the menus and interviewed Cook Kolle who denied the food being greasy. Residents also denied the food being excessively greasy.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: In March 2022, a dead rat was found under the refrigerator in the kitchen.

INVESTIGATION:

On November 23, 2022, a second complaint was received reporting that in March 2022 a dead rat was observed dead in the kitchen.

On November 23, 2022, Jennifer Browning, Adult Foster Care Licensing Consultant contacted Complainant who reported that back in March 2022 Complainant saw a dead rat under the refrigerator. Complainant reported this was the only time a rat was observed in the facility.

On November 30, 2022, DCS Darlene Gonzalez reported she has never witnessed a rat or any type of rodent in the kitchen. Ms. Gonzalez reported when the weather starts to cool down there are times where they will find mice in the utility closet, but nowhere else. Ms. Gonzalez stated, "I believe this to be false information."

On December 01, 2022, I interviewed DCS Delfina Earls and Vice President Marcia Curtiss who both reported they have never seen any type of rodent at any time in the facility, nor have they heard of one being seen by others. Ms. Curtiss reported the facility has a contract with Rose Pest Solutions who provides monthly services for rodents and bugs. I reviewed and received monthly statements from Rose Pest Solutions from March 2022-November 2022. The stated did not document any concerns about rodents or the removal of any rodents from the facility.

On December 01, 2022, I interviewed Mr. Kolle, Cook who reported he has never witnessed any rodents dead or alive in either kitchen. Mr. Kolle, Cook reported he has not heard of any other cook staff seeing any rodents in the kitchen.

On December 01, 2022, I interviewed Resident A, Resident B, Resident C, and Resident D who all reported they have not seen any rodents in the facility.

APPLICABLE RULE	
R 400.15401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.
ANALYSIS:	Based on the information gathered during the investigation there was no evidence found to support the allegations of the facility having issues with rodents. The facility has a monthly contract with Rose Pest Solutions to provide continued protection to residents from insects, rodents, and pest control.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Residents clothes are being laundered with soiled briefs.

INVESTIGATION:

On November 23, 2022, Complainant reported residents' disposable briefs are being laundered with residents' clothes due to the residents leaving the briefs in their clothing after taking their clothes off. Complainant alleged direct care staff do not remove the soiled briefs from the residents' clothes prior to doing laundry rather it's all laundered together.

On November 30, 2022, DCS Darlene Gonzalez reported there have been times when a blue pad was wrapped up in a resident's sheet set or a brief was in a resident's pant bottom and they were laundered together accidentally, but this is a rare occasion. DCS Gonzalez stated, "it is no different than when you wash a pair of your jeans and there is dirty Kleenex left in the pocket that gets washed." DCS Gonzalez reported she was not aware of this happening on a regular or purposeful basis.

On December 01, 2022, I observed the laundry room and residents' dirty laundry waiting to be laundered. I observed there were clothes in the washing machine and dryer and did not observe any used briefs being laundered with clothing. I did not observe any used briefs in the laundry room garbage either. On December 01, 2022, I interviewed DCS Delfina Earls who reported she has never laundered soiled briefs with resident clothing and was not aware of this happening.

On December 01, 2022, I interviewed Resident A, Resident B, Resident C, and Resident D who denied receiving clothes with briefs in them after they have been laundered. On December 01, 2022, I interviewed Resident A, Resident B, Resident C, and Resident D who all reported the facility does a great job at laundering their clothing.

APPLICABLE RULE	
R 400.15403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
ANALYSIS:	There was no evidence found residents' clothes being laundered with soiled briefs. I observed the laundry room and residents' dirty clothes waiting to be laundered and did not observe any soiled briefs in residents' laundry. Per Resident A, Resident B, Resident C, and Resident D they have not received ever received their laundry back from being cleaned with used briefs in the clothes.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Upon the receipt of an approve corrective action plan, I recommend continuation of the current status of the license of this AFC adult large group home capacity of 20.

Bridget Vermeesch

12/08/2022

Bridget Vermeesch Licensing Consultant

Date

Approved By:

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12/20/2022

Dawn N. Timm Area Manager

Date