

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 19, 2019

Robin Deerfield Thresholds Post Office Box 68327 Grand Rapids, MI 49516-8327

> RE: License #: AL410007103 Investigation #: 2020A0583001 Gladiola Home

#### Dear Ms. Deerfield:

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 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 (616) 356-0183.

Sincerely,

Toya Zylstra, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 (616) 333-9702

enclosure

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

### I. IDENTIFYING INFORMATION

License #:	AL410007103
Investigation #:	2020A0583001
Complaint Receipt Date:	12/06/2019
Investigation Initiation Date:	12/06/2019
Report Due Date:	01/05/2020
Nopoli Duo Duioi	0 1700/2020
Licensee Name:	Thresholds
Licensee Address:	1225 Lake Drive SE Grand Rapids, MI 49506
Tiled w	(040) 040 0475
Licensee Telephone #:	(616) 240-8475
Administrator:	Robin Deerfield
Licensee Designee:	Robin Deerfield
Name of Facility:	Gladiola Home
Facility Address:	3210 Gladiola Avenue, SW Wyoming, MI 49519-3225
Facility Telephone #:	(616) 538-3067
Original Issuance Date:	12/01/1976
License Status:	REGULAR
Effective Date:	08/12/2018
Expiration Date:	08/11/2020
Capacity:	16
Program Type:	DEVELOPMENTALLY DISABLED

## II. ALLEGATION(S)

# Violation Established?

Staff Tamika Foster and Staff Shanita Davis smoke marijuana at the facility. Staff Kimberly Brown supplies marijuana to Ms. Foster and Ms. Davis.	No
Staff Tamika Foster and Staff Shanita Davis are "very aggressive toward the residents". Ms. Foster has "hit and scared a few residents" and "hit a lady because she spilled her pills".	No
Administrator Kimberly Brown and Staff Shanita Davis steal residents' funds.	No
Additional Findings	Yes

## III. METHODOLOGY

12/06/2019	Special Investigation Intake 2020A0583001
12/06/2019	Contact - Telephone call made Complainant
12/06/2019	APS Referral
12/06/2019	Special Investigation Initiated - Letter APS Kevin Souser
12/09/2019	Contact - Telephone call made Staff Nathan Jager
12/09/2019	Inspection Completed On-site Home manager/Administrator Kimberly Brown, Staff Precious Wade, Resident A, Resident B, Resident C
12/09/2019	Contact - Telephone call made Staff Nathan Jagger
12/09/2019	Contact - Telephone call made Staff Shanita Davis
12/09/2019	Contact – Email Staff Michelle Jennenga
12/10/2019	Contact - Telephone call made Staff Tamika Foster

12/13/2019	Inspection Completed On-site Home manager/Administrator Kimberly Brown
12/18/2019	Exit Conference Licensee Designee, Robin Deerfield

ALLEGATION: Staff Tamika Foster and Staff Shanita Davis smoke marijuana at the facility. Administrator Kimberly Brown supplies marijuana to Ms. Foster and Ms. Davis.

**INVESTIGATION:** On 12/06/2019 I emailed a referral to Adult Protective Services.

On 12/06/2019 I received email confirmation from Adult Protective Services Staff, Kevin Souser, that the allegations were assigned for his investigation.

On 12/09/2019 I spoke with Thresholds Management Staff, Nathan Jager. Mr. Jager stated Kimberly Brown is the facility's Home Manager and Administrator. Mr. Jager stated he has no knowledge of staff smoking marijuana at the facility and has no knowledge of Ms. Brown providing marijuana to staff.

On 12/09/2019 I completed an unannounced onsite investigation at the facility and privately interviewed Administrator Kimberly Brown, Staff Precious Wade, Resident A, Resident B, and Resident C.

Ms. Brown stated she has never provided marijuana to staff members and has never witnessed staff members, including Staff Tamika Foster and Staff Shanita Davis, smoking marijuana at the facility. Ms. Brown denied she has ever smoked marijuana at the facility herself.

Staff Precious Wade stated she has never witnessed staff members, including Ms. Foster and Ms. Davis, smoke marijuana at the facility. Ms. Wade stated she has never witnessed Ms. Brown providing staff members with marijuana.

Resident A, Resident B, and Resident C were each interviewed privately. Resident A, Resident B, and Resident C each stated they have never witnessed staff members, including Ms. Foster and Ms. Brown, smoking marijuana at the facility. Resident A, Resident B, and Resident C each stated they have never witnessed Ms. Brown providing staff members with marijuana. Resident A, Resident B, and Resident C each stated they are happy with the care provided at the facility and reported no concerns.

On 12/09/2019 I interviewed Staff Shanita Davis via telephone. Ms. Davis stated she has never smoked marijuana at the facility at any time. Ms. Davis stated she has never witnessed other staff members, including Ms. Foster, smoke marijuana at

the facility. Ms. Davis stated Ms. Brown has never provided her with marijuana and she has never witnessed Ms. Brown providing other staff members with marijuana.

On 12/10/2019 I interviewed Staff Tamika Foster via telephone. Ms. Foster stated she has never smoked marijuana at the facility at any time. Ms. Foster stated she has never witnessed other staff members, including Ms. Davis, smoke marijuana at the facility. Ms. Foster stated Ms. Brown has never provided her with marijuana and she has never witnessed Ms. Brown providing other staff members with marijuana.

12/18/2019 I completed an Exit Conference with Licensee Designee Robin Deerfield and informed her of the findings. Ms. Deerfield stated she understood the findings.

APPLICABLE RULE		
R 400.15201	Qualifications of administrator, direct care staff, licensee, and members of the household; provision of names of employee, volunteer, or member of the household on parole or probation or convicted of felony; food service staff.	
	(10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.	
ANALYSIS:	Administrator Kimberly Brown stated she has never provided marijuana to any staff members and has never witnessed any staff members, including Tamika Foster and Shanita Davis smoking marijuana at the facility. Ms. Brown denied she has ever smoked marijuana at the facility.	
	Staff Precious Wade stated she has never witnessed any staff member, including Ms. Foster or Ms. Davis, smoke marijuana at the facility. Ms. Wade also stated she has never witnessed Ms. Brown providing staff members with marijuana.	
	Resident A, Resident B, and Resident C were each interviewed privately. Resident A, Resident B, and Resident C each stated they have never witnessed any staff members, including Ms. Foster and Ms. Brown, smoking marijuana at the facility. Resident A, Resident B, and Resident C each stated they have never witnessed Ms. Brown providing staff members with marijuana.	
	Staff Shanita Davis stated she has never smoked marijuana at the facility at any time. Ms. Davis stated she has never witnessed other staff members, including Ms. Foster, smoke marijuana at the facility. Ms. Davis stated Ms. Brown has never	

provided her with marijuana and she has never witnessed Ms. Brown providing other staff members with marijuana.

Staff Tamika Foster stated she has never smoked marijuana at the facility at any time. Ms. Foster stated she has never witnessed other staff members, including Ms. Davis, smoke marijuana at the facility. Ms. Foster stated Ms. Brown has never provided her with marijuana and she has never witnessed Ms. Brown providing other staff members with marijuana.

There is insufficient evidence to substantiate violation of R 400.15201 (10).

CONCLUSION: VIOLATION NOT ESTABLISHED

ALLEGATION: Staff Tamika Foster and Staff Shanita Davis are "very aggressive toward the residents". Ms. Foster has "hit and scared a few residents" and "hit a lady because she spilled her pills".

**INVESTIGATION:** On 12/09/2019 I spoke with Thresholds Management Staff Nathan Jager. Mr. Jager stated he has no knowledge of staff threatening or physically abusing residents.

On 12/09/2019 I completed an unannounced onsite investigation at the facility and privately interviewed Administrator Kimberly Brown, Staff Precious Wade, Resident A, Resident B, and Resident C.

Ms. Brown stated she has never witnessed any staff members, including Ms. Foster and Ms. Davis, verbally or physically abuse any residents.

Ms. Wade stated she has never witnessed any staff members, including Ms. Foster and Ms. Davis, verbally or physically abuse any residents.

Resident A, Resident B, and Resident C were each interviewed privately. Resident A, Resident B, and Resident C each stated they have never witnessed any staff members, including Ms. Foster and Ms. Brown, verbally or physically abuse any residents.

On 12/09/2019 I interviewed Shanita Davis via telephone. Ms. Davis stated she has never verbally or physically abused residents. Ms. Davis stated she has never witnessed Ms. Foster verbally or physically abuse residents.

On 12/10/2019 I interviewed Tamika Foster via telephone. Ms. Foster stated she has never verbally or physically abused residents. Ms. Foster stated she cannot recall a resident spilling their prescribed medications because resident medications

are locked and administered by staff. Ms. Foster stated she never struck a resident for spilling pills on the floor. Ms. Foster stated she has never witnessed Ms. Davis verbally or physically abuse residents.

12/18/2019 I completed an Exit Conference with Licensee Designee Robin Deerfield and informed her of the findings. Ms. Deerfield stated she understood the findings.

APPLICABLE RULE		
R 400.15305	Resident protection.	
	(1) A resident shall be assured privacy and protection from moral, social, and financial exploitation.	
ANALYSIS:	Administrator Kimberly Brown stated she has never witnessed any staff members, including Ms. Foster and Ms. Davis, verbally or physically abuse any residents.	
	Staff Precious Wade stated she has never witnessed any staff members, including Ms. Foster and Ms. Davis, verbally or physically abuse any residents.	
	Resident A, Resident B, and Resident C each stated they have never witnessed any staff members, including Ms. Foster and Ms. Brown, verbally or physically abuse any residents.	
	Staff Shanita Davis stated she has never verbally or physically abused residents. Ms. Davis stated she has never witnessed Ms. Foster verbally or physically abuse residents.	
	Staff Tamika Foster stated she has never verbally or physically abused residents. Ms. Foster stated she cannot recall a resident spilling their prescribed medications because resident medications are locked and administered by staff. Ms. Foster stated she never struck a resident for spilling pills on the floor. Ms. Foster stated she has never witnessed Ms. Davis verbally or physically abuse residents.	
	There is insufficient evidence to substantiate violation of rule R 400.15305 (1).	
CONCLUSION:	VIOLATION NOT ESTABLISHED	

ALLEGATION: Administrator Kimberly Brown and Staff Shanita Davis steal residents' funds.

**INVESTIGATION:** On 12/09/2019 I spoke with Thresholds Management Staff Nathan Jager. Mr. Jager stated he has no knowledge of Ms. Davis and Ms. Brown stealing residents' funds. Mr. Jager stated Thresholds Management Staff Michelle Jannenga audited all residents' funds at the facility on or about 12/06/2019 and the audit indicated all residents' funds were adequately accounted for. Mr. Jager stated Ms. Brown is the only staff with access to the safe containing residents' funds and the only other staff responsible for documenting the use of residents' funds.

On 12/09/2019 I completed an unannounced onsite investigation at the facility and interviewed Administrator Kimberly Brown, staff Precious Wade, Resident A, Resident B, and Resident C.

Ms. Brown stated she has never stolen residents' funds. Ms. Brown stated she is the only staff with access to the facility's safe that secures eight of eleven resident's monies. Ms. Brown stated a staff currently on medical leave has access to a separate safe that holds Resident J and Resident K's residents' funds. Ms. Brown stated Resident A holds and manages her own resident funds. Ms. Brown stated she disperses residents' funds directly to "higher functioning" residents, records each transaction in the residents' funds ledger, and subsequently locks the cash and receipts back in the facility safe for safe keeping. Ms. Brown stated she directly disperses residents' funds to staff for "lower functioning" residents, staff purchase the required items, return any remaining cash and receipts to Ms. Brown, who records the transactions on the residents' Resident Funds Part II ledger. Ms. Brown stated she has never witnessed Ms. Davis steal residents' funds. Ms. Brown stated Resident A holds and manages her own funds. Ms. Brown stated Resident E has a debit card that is utilized by staff to purchase items and pay for outings. Ms. Brown stated there is no documentation from a bank statement or record on the Resident Funds Part II ledger for the use of Resident E's debit card.

Ms. Wade stated she has never witnessed any staff members steal residents' funds. Ms. Wade stated Ms. Brown is the only staff with access to nine of eleven resident's funds and is in charge of documenting the residents' funds ledger.

Resident A, Resident B, and Resident C were each interviewed privately. Resident A, Resident B, and Resident C each stated they have never witnessed any staff member, including Ms. Davis and Ms. Brown, steal resident funds. Resident A stated she holds and manages her own funds.

I reviewed Resident B's Resident Funds Part II ledger which indicated Resident B should have \$1.00 in cash. I counted Resident B has \$1.00 in cash.

I reviewed Resident C's Resident Funds Part II ledger which indicated Resident C should have .41 cents in cash. I counted Resident C has .41 cents in cash.

I reviewed Resident D's Resident Funds Part II ledger which indicated Resident D should have \$1.00 in cash. I counted Resident D has \$1.00 in cash.

I reviewed Resident E's Resident Funds Part II ledger which indicated Resident E has no cash on hand and instead utilizes a debit card. I observed that the ledger contained no documented debits, deposits, or balances.

I reviewed Resident F's Resident Funds Part II ledger which indicated Resident F should have \$3.08 in cash. I counted Resident B has \$3.08 in cash.

I reviewed Resident G's Resident Funds Part II ledger which indicated Resident G should have \$4.63 in cash. I counted Resident G has \$4.63 in cash.

I reviewed Resident H's Resident Funds Part II ledger which indicated Resident H should have \$17.94 in cash. I counted Resident H has \$17.94 in cash.

I reviewed Resident I's Resident Funds Part II ledger which indicated Resident I should have \$20.92 in cash. I counted Resident I has \$20.92 in cash.

On 12/09/2019 I interviewed Staff Shanita Davis via telephone. Ms. Davis stated she has never stolen resident funds. Ms. Davis stated "higher functioning" residents are given their resident funds from Ms. Brown and purchase their own items while "lower functioning" residents require assistance from staff. Ms. Davis stated Ms. Brown will provide resident funds of lower functioning residents directly to Ms. Davis for outings and purchasing personal items. Ms. Davis stated she will purchase the required items for the resident, collect a receipt, and provide the excess monies and receipt directly to Ms. Brown. Ms. Davis stated Ms. Brown is the only staff with direct access to eight of eleven residents' funds which are locked in the facility safe. Ms. Davis stated Ms. Brown is the only staff with access to nine of the residents' funds ledgers and is charged with the duty of keeping the ledger up to date. Ms. Davis stated she has never witnessed Ms. Brown stealing resident funds.

On 12/09/2019 I received an email from Thresholds Management Staff, Michelle Jannenga. Ms. Jannenga stated she audited the resident funds on 12/05/2019 and 12/06/2019 and observed "everything was accounted for".

On 12/10/2019 I interviewed Staff Tamika Foster via telephone. Ms. Foster stated she has never witnessed Ms. Brown or Ms. Foster steal resident funds. Ms. Foster stated "higher functioning" residents are given their resident funds directly from Ms. Brown and purchase their own items while "lower functioning" residents require assistance from staff. Ms. Foster stated Ms. Brown will provide resident funds of lower functioning residents directly to staff for outings and staff purchase the personal items. Ms. Foster stated staff will purchase the required items for the resident, collect a receipt, and provide the excess monies and receipt directly to Ms. Brown. Ms. Foster stated Ms. Brown is the only staff with direct access to eight of eleven residents' funds which are locked in the facility safe. Ms. Foster stated Ms. Brown is the only staff with access to the resident funds ledger and is charged with the duty of keeping the ledger up to date.

On 12/13/2019 I completed a scheduled onsite investigation at the facility. I interviewed Administrator Kimberly Brown privately. Ms. Brown stated Resident E will no longer be utilizing a debit because it is too difficult for staff to track. Ms. Brown stated she does not have a bank statement to accompany purchases for Resident E. Ms. Brown stated a staff who is currently on medical leave is the only staff with access to the safe holding Resident J and Resident K's monies and is the only staff charged with completing the Resident Funds Part II ledger for Resident J and Resident K. Ms. Brown stated she recently secured the key to the safe and records for Resident J and Resident K. Ms. Brown stated Resident J entrusts staff with her cash and a debit card. Ms. Brown stated staff are entrusted to utilize Resident J's debit card to purchase outings and personal items however it is not being recorded on Resident J's Resident Funds Part II ledger.

I reviewed Resident J's Resident Funds Part II ledger which indicates Resident J should have \$28.72 in cash. I counted Resident J has \$28.72 in cash. I also viewed Resident J has a debit card with no recorded debits, deposits, or balances on the ledger.

I reviewed Resident K's Resident Funds Part II ledger indicates Resident K should have \$50.88 in cash. I counted Resident K has \$50.88 in cash.

12/18/2019 I completed an exit conference with Licensee Designee Robin Deerfield and informed her of the findings. Ms. Deerfield stated she understood the findings.

APPLICABLE R	APPLICABLE RULE	
R 400.15305	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:	Administrator Kimberly Brown stated she has never witnessed any staff members steal residents' funds. Ms. Brown stated she has never stolen residents' funds.	
	Staff Precious Wade stated she has never witnessed any staff members stealing residents' funds.	
	Resident A, Resident B, and Resident C each stated they have never witnessed any staff members stealing resident's funds.	
	Staff Shanita Davis stated she has never witnessed any staff members stealing residents' funds.	

	Staff Tamika Foster stated she has never witnessed any staff members stealing residents' funds.
	I verified Residents B, C, D, E, F, G, H, I, J, and K's Residents' Funds Part II ledgers do correspond with the counted cash on hand. Resident E and Resident J utilize debit cards in addition to cash which has not been adequately documented in the Resident Funds Part II ledger.
	There is insufficient evidence to substantiate violation of rule R 400.15305 (3).
CONCLUSION:	VIOLATION NOT ESTABLISHED

# ADDITIONAL FINDING: Staff failed to complete Resident E and Resident J's Resident Funds Part II ledger.

**INVESTIGATION:** On 12/09/2019 I completed an unannounced onsite investigation at the facility and interviewed Administrator Kimberly Brown. Ms. Brown stated Resident E utilizes a debit card that is entrusted to staff for use to purchase items for Resident E.

I reviewed Resident E's Resident Funds Part II ledger which indicates Resident E has no cash on hand and instead utilizes a debit card. I observed the ledger and noted that no debits, deposits, or balances were recorded on the ledger.

On 12/13/2019 I completed a scheduled onsite investigation at the facility. I interviewed Administrator Kimberly Brown privately. Ms. Brown stated Resident J utilizes a debit card that is entrusted to staff for use to purchase items for Resident J.

I reviewed Resident J's Resident Funds Part II ledgers which did not document the use of Resident J's debit card or contain receipts to document said debit cards use.

12/18/2019 I completed an exit conference with Licensee Designee Robin Deerfield and informed her of the findings. Ms. Deerfield stated she understood the findings and would submit an acceptable Corrective Action Plan.

APPLICABLE RULE	
R 400.14315	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables
	transaction form completed and on file for each resident. A
	department form shall be used unless prior authorization

	for a substitute form has been granted, in writing, by the department.
ANALYSIS:	Staff have access to Resident E and Resident J's debit cards however there is no documentation of these debit cards use in the Resident Funds Parts II ledger.
	There is sufficient evidence to substantiate violation of R 400.14315 (13).
CONCLUSION:	VIOLATION ESTABLISHED

## IV. RECOMMENDATION

Upon receipt of an acceptable correction action plan, I recommend the license remain unchanged.

Japa gru	12/18/2019
Toya Zylstra Licensing Consultant	Date
Approved By:	
0 0	12/19/2019
Jerry Hendrick Area Manager	Date