GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 20, 2019

Kimberly O'Neal
Spectrum Community Services
332 First St
Manistee, MI 49660

RE: License #: AS410289784
Investigation #: 2020A0583002
Blythefield Home

Dear Mrs. O'Neal:

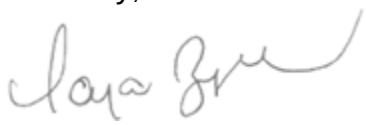
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 #:	AS410289784
Investigation #:	2020A0583002
Complaint Receipt Date:	12/17/2019
Investigation Initiation Date:	12/17/2019
Report Due Date:	01/16/2020
Licensee Name:	Spectrum Community Services
Licensee Address:	28303 Joy Rd. Westland, MI 48185
Licensee Telephone #:	(734) 458-8729
Administrator:	Sharon Blain
Licensee Designee:	Sharon Blain
Name of Facility:	Blythefield Home
Facility Address:	3485 Rogue River Rd. NE Belmont, MI 49306
Facility Telephone #:	(616) 447-9380
Original Issuance Date:	06/25/2007
License Status:	REGULAR
Effective Date:	12/29/2017
Expiration Date:	12/28/2019
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Staff Alla Sikolova physically assaulted Resident A.	Yes

III. METHODOLOGY

12/17/2019	Special Investigation Intake 2020A0583002
12/17/2019	Special Investigation Initiated - Letter Recipient Rights Bob Patterson
12/18/2019	Inspection Completed On-site Staff Antoine Kataombo, Staff Alla Sikolova, Staff Tara Myer, Resident A
12/18/2019	APS Referral
12/18/2019	Contact - Telephone call made Staff Inga Deloof
12/20/2019	Exit Conference Licensee Designee Sharon Blain

ALLEGATION: On 12/15/2019 Staff Alla Sikolova physically assaulted Resident A.

INVESTIGATION: On 12/17/2019 I emailed Recipient Rights Bob Patterson. Mr. Patterson stated he will be investigating the above complaint allegation and we agreed to coordinate our interviews at the facility on 12/18/2019.

On 12/18/2018, I conducted an unannounced on-site investigation and inspected Resident A's wheelchair. Recipient rights staff, Bob Patterson, and Corporate rights staff for the licensee, Dereka Seigel accompanied me on this inspection. While on-site, we interviewed staff Antoine Kataombo, Staff Alla Sikolova, Staff Tara Myer, and Resident A each privately.

Staff Antoine Kataombo stated he worked with Staff Inga Deloof and Staff Alla Sikolova on 12/15/2019. Mr. Kataombo stated at approximately 7:30 am he was showering a resident when he heard Resident A crying. Mr. Kataombo stated when he finished showering the resident, he exited the bathroom and observed Resident A was "crying". Mr. Kataombo stated Resident A informed him that Ms. Sikolova "took my radio" and "pushed me down on the floor". Mr. Kataombo stated Resident A

complained of back pain and Mr. Kataombo viewed a red mark and scratch on the upper back of Resident A that subsequently turned black and blue days later. Mr. Kataombo stated Ms. Deloof reported she witnessed Ms. Sikolova push Resident A to the floor in the living room because Resident A was “not being quiet”. Mr. Kataombo stated Ms. Deloof reported Ms. Sikolova admitted to hitting Resident A in the head with his pillow while in Resident A’s bedroom as well. Mr. Kataombo stated Ms. Sikolova admitted to him that she confiscated Resident A’s “radio” but provided no further details of the physical altercation. Mr. Kataombo stated he reported the information to the facility home manager Tara Myer later that same day.

Staff Alla Sikolova stated she has worked at the facility for approximately six months and worked with Ms. Deloof and Mr. Kataombo on 12/15/2019. Ms. Sikolova stated she never pushed Resident A to the floor and never hit Resident A with his pillow at any time. Ms. Sikolova stated she was not upset with Resident A on that day. Ms. Sikolova stated she never observed a mark or injury on Resident A’s back.

Home Manager Tara Myer stated she did not work on 12/15/2019. Ms. Myer stated on 12/16/2019 Resident A was “shaking and crying” when he reported to her that Ms. Sikolova “yelled at me” and “slapped me with a pillow”. Ms. Myer stated she observed a scratch and bruise on Resident A’s upper back on 12/16/2019.

Resident A presents with a developmental disability and limited mobility. Resident A utilizes a walker for assistance. Resident A stated Ms. Sikolova “pulled me down in the hallway” and “took radio away”. Resident A stated Ms. Sikolova came into his bedroom after pushing him to the ground and struck him in the head with his pillow. I observed a scratch and yellow colored bruise on Resident A’s upper back and Resident A reported it was a result of Ms. Sikolova pushing him to the ground.

On 12/18/2019 I emailed a referral to Adult Protective Services Centralized Intake.

On 12/18/2019 I interviewed Staff Inga Deloof via telephone. Ms. Deloof stated she worked at the facility on 12/15/2019 with Staff Antoine Kataombo and Staff Alla Sikolova. Ms. Deloof stated at approximately 7:30 am she witnessed Resident A coming into the living room area “screaming”. Ms. Deloof stated Resident A utilizes a walker for mobility limitations. Ms. Deloof stated she observed Ms. Sikolova grab Resident A’s shirt and then push Resident A to the ground forcefully. Ms. Deloof stated she was upset by Ms. Sikolova’s behavior and asked her “what are you doing?” Ms. Deloof stated Ms. Sikolova answered by stating “so, he’s screaming”. Ms. Deloof stated she and Ms. Sikolova helped Resident A to his feet and Ms. Sikolova escorted Resident A back to his bedroom. Ms. Deloof stated she immediately heard Resident A screaming again while he was in his bedroom with Ms. Sikolova. Ms. Deloof stated Ms. Sikolova exited Resident A’s bedroom shortly afterwards and Ms. Sikolova informed Ms. Deloof that she “hit him with pillows” because Resident A “didn’t shut up”. Ms. Deloof stated she immediately checked on Resident A and he reported Ms. Sikolova hit him with his pillow in his (Resident A’s) face. Ms. Deloof stated she did not observe injuries on Resident A’s face. Ms.

Deloof stated she observed a large red mark and scratch on Resident A's back which she believed is consistent with being pushed to the floor by Ms. Sikolova. Ms. Deloof stated no other staff or residents witnessed the incidents and she immediately informed Staff Antoine Kataombo.

On 12/20/2019 I conducted by telephone an exit conference with the licensee designee, Sharon Blain. Mrs. Blain concurred with the findings of my investigation and did not have any additional comments for my report.

APPLICABLE RULE	
R 400.14308	**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: **(b) Use any form of physical force other than physical restraint as defined in these rules.**
ANALYSIS:	Resident A stated Staff Alla Sikolova pushed him to the ground causing a scratch and bruise and struck Resident A in the head with a pillow. I viewed a yellow bruise and scratch on Resident A's upper back. Staff Alla Sikolova denied she pushed Resident A to the ground and denied she struck Resident A in the head with a pillow. Staff Inga Deloof stated on 12/15/2019 she witnessed Ms. Sikolova push Resident A to the ground in the facility's living room. Ms. Deloof stated she viewed a bruise and scratch on Resident A's back consistent with falling to the ground. Ms. Deloof stated Ms. Sikolova admitted to hitting Resident A in the head with a pillow in Resident A's bedroom because he was not being quiet. There is sufficient evidence to substantiate violation of R 400.14308 (2) (b).
CONCLUSION:	**VIOLATION ESTABLISHED**

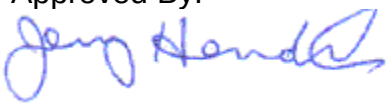
IV. RECOMMENDATION

Upon receipt of an acceptable plan of correction, I recommend that the status of the license remain unchanged

12/20/2019

Toya Zylstra Date
Licensing Consultant

Approved By:



12/20/2019

Jerry Hendrick Date
Area Manager