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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 1, 2023

Charles Cryderman
Haven Adult Foster Care Limited
73600 Church Road
Armada, MI 48005

RE: License #: AG500066337
Investigation #: 2023A0604005
Ridgeway

Dear Mr. Cryderman:

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 "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 West Grand Blvd Ste 9-100
Detroit, MI 48202
(248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AG500066337
Investigation #:	2023A0604005
Complaint Receipt Date:	12/05/2022
Investigation Initiation Date:	12/06/2022
Report Due Date:	02/03/2023
Licensee Name:	Haven Adult Foster Care Limited
Licensee Address:	73600 Church Road Armada, MI 48005
Licensee Telephone #:	(586) 784-8890
Administrator:	Charles Cryderman
Licensee Designee:	Charles Cryderman
Name of Facility:	Ridgeway
Facility Address:	72188 Russ Road Richmond, MI 48062
Facility Telephone #:	(586) 727-7650
Original Issuance Date:	05/31/1995
License Status:	REGULAR
Effective Date:	08/15/2022
Expiration Date:	08/14/2024
Capacity:	31
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED AGED

II. ALLEGATION(S)

	Violation Established?
The facility is dirty. There are unmade beds and uncleaned bathrooms.	Yes
Food is inadequate and resident lost weight.	No

III. METHODOLOGY

12/05/2022	Special Investigation Intake 2023A0604005
12/06/2022	Special Investigation Initiated - Letter Email to Adult Protective Services (APS) Worker, Debra Johns. APS does not have an open investigation.
12/07/2022	Inspection Completed On-site Completed unannounced onsite investigation. Interviewed Staff, Patty Jackson and Jim Sealey. Interviewed Resident A and Resident B.
12/08/2022	Contact - Document Sent Email to Cec Ball requesting resident records.
12/08/2022	Contact - Document Received Email from Cec Ball
12/09/2022	Contact - Document Sent Email to Cec Ball
12/10/2022	Contact - Document Received Received Ridgeway documents by email from Cec Ball
12/12/2022	Contact- Document Sent Email to Cec Ball
01/25/2023	Contact - Document Sent Email to Chuck Cryderman and Cec Ball
01/26/2023	Exit Conference TC to Chuck Cryderman's office. Completed exit conference with Mr. Cryderman's Assistant, Cec Ball.

ALLEGATION:

The facility is dirty. There are unmade beds and uncleaned bathrooms.

INVESTIGATION:

I received a complaint regarding Ridgeway on 12/05/2022. The Complainant stated the following: they are turning in this facility because they are not providing adequate care to their residents. Residents are given the same thing for breakfast every day. They get either a bowl of oatmeal or cream of wheat, no meat, eggs, or toast. For lunch residents get cold soup, Jell-O or pudding. For dinner there is either beef or chicken with rice. Complainant knows a resident that went in at 150 pounds and today weighed 120 pounds in only a month. Their living space is nasty. Resident had sweat stains on her pillowcase when they got there, beds unmade, there was also what looked like boogers wiped on the wall next to the bed, and uncleaned bathrooms. There was an employee attacked by a patient and ended up with a concussion. Complainant stated that they are so disgusted with these conditions that they took pictures so they would have proof if needed. I was unable to contact Complainant for the pictures as Complainant and resident information were not provided.

On 12/07/2022, I completed an unannounced onsite investigation. I interviewed Staff, Patty Jackson, Cook Jim Sealey, Residents A and Resident B.

On 12/07/2022, I interviewed Staff, Patty Jackson. Ms. Jackson stated that she was attacked by a resident the day before Thanksgiving. She stated that the resident was moved immediately the same day. Ms. Jackson stated that the resident had mental health issues, however, no history of aggression. She feels that the facility handled the incident appropriately. Ms. Jackson stated that linens are changed every morning or when they are soiled. She did not report any concerns regarding the cleanliness of the facility. She indicated that some staff do more cleaning than others. She stated that she was currently in the process of doing laundry.

On 12/07/2022, I interviewed Resident A at the facility. Resident A believed the facility was clean. She did not report any concerns regarding the cleanliness or maintenance of the facility.

On 12/07/2022, I interviewed Resident B at the facility. She stated that she has lived at Ridgeway for about eight months. She stated that it is very quiet and not a lot to do. Resident B stated that the bedrooms and bathrooms are clean. Resident B stated that she has had items stolen since she moved to facility including a computer and that she does not have her cell phone. On 12/10/2022, I received a copy of Resident B's inventory of valuables. There is no record of Resident B having a cell phone or computer at time of admission.

On 12/07/2022, During the onsite investigation, I completed a walkthrough of the facility with Ms. Jackson. Some beds did not have linens as Ms. Jackson was doing laundry. I observed that the facility was generally clean during the time of my investigation. I observed the following items needed maintenance:

- Bedroom #9 had a strong musty odor
- Bathroom #1 had a broken toilet.
- Bathroom #3 had a leaking sink with a towel on the floor to collect water
- Bathroom #4 had a missing closet door

On 12/10/2022, I received an email from Cec Ball with pictures of a toilet, sink and the closet door. The pictures showed that closet door in Bathroom #4 was replaced. I also received a picture of the bathroom sink with the towel to collect water was removed and a picture of a toilet. The email also included a written statement that Bedroom #9 was cleaned, and air fresheners were added. It is also stated that Bedroom #9 is a private room and the resident is a fragile psychiatric client who is very protective of her space. No information was provided to confirm that the sink and toilet have been repaired as well as specifically how the room has been cleaned and will be maintained.

APPLICABLE RULE	
R 400.2431	Home environment.
	(1) A congregate facility shall be so constructed, arranged and maintained as to provide adequately for the health, safety and well-being of occupants.
ANALYSIS:	<p>On 12/07/2022, I completed an onsite investigation. I observed the following items needed maintenance:</p> <ul style="list-style-type: none"> - Bathroom #1 had broken toilet. - Bathroom #3 had leaking sink with a towel on the floor to collect water - Bathroom #4 had a missing closet door <p>On 12/10/2022, the facility reported that the above items had been repaired and provided pictures of sink and toilet. No verification was provided to confirm repairs to the sink and toilet have been made. Picture did confirm that closet door in Bathroom #4 has been replaced.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.2431	Home environment.
	(2) Furnishings and housekeeping standards shall be such that a congregate facility presents a comfortable, clean and orderly appearance.
ANALYSIS:	On 12/07/2022, I completed an onsite investigation. I found that Bedroom #9 had a strong musty odor. On 12/10/2022, the facility reported that the bedroom had been cleaned and air fresheners added. No information was provided as to how the room has been cleaned and maintained.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Food is inadequate and resident lost weight.

INVESTIGATION:

On 12/07/2022, I interviewed the cook, Jim Sealey at Ridgeway. He stated that there is always plenty of food at facility. They get weekly meat deliveries. Mr. Sealey showed me a copy of the weekly menus. Breakfasts included cold cereal, pancakes, French toast and cream of wheat along with choices for toast with butter/jelly, fruit cup, milk, juice, coffee and tea. Lunches included chicken nuggets, cold cut sandwich, spaghetti, biscuits and sausage gravy, hot dog and pulled pork sandwiches. Lunches were served with sides that included baked beans, garlic toast, soup, salad, cake, pudding, milk, coffee, and tea. Dinners included baked chicken, pork chops, stuffed cabbage casserole, beef pot roast, Hawaiian ham with pineapple, shepherd's pie, and German meat loaf. Dinners were served with items that included rice pilaf, fruit/vegetable, butter noodles, brownies, cake, milk, coffee, and tea.

I observed food available in kitchen. I observed an adequate amount of food in the kitchen including ham, potatoes, carrots, bread, pork chops, hamburger, roast, ham, kielbasa, mixed vegetables, pears, and rice pudding. I reviewed menus provided by Mr. Sealey and the meals served appeared to provide adequate nutrition. The facility is serving a variety of options including both fruits and vegetables.

On 12/07/2022, I interviewed Staff, Patty Jackson. She stated that residents that are losing weight are given nutrition supplement such as an Ensure with lunch.

On 12/07/2022, I interviewed Resident A at the facility. She stated that she has lived at Ridgeway for about a week. She stated that she gets enough food to eat. She stated a

typical dinner is ham, potatoes, peas, and pudding. She stated that she usually chooses to only drink liquids for breakfast. She stated that that she is tired of oatmeal but there are other options. She would like to drink Boost for breakfast.

On 12/07/2022, I interviewed Resident B at the facility. Resident B stated that she gets enough food to eat. She stated that she typically eats cereal for breakfast. She stated that they do not serve eggs and that she would prefer more protein for breakfast. She stated that they get toast and canned fruit with breakfast. Resident B indicated that the meals are starchy and that the dinners are very bland and may include ham, spaghetti, and steamed vegetables. She stated that there are no salads, and a lot of canned fruit and vegetables are served.

On 12/10/2022, I received resident weight records for January-December 2022 from Cec Ball. I reviewed the weight records and did not identify any residents who had lost 20 pounds in one month. Complainant did not indicate which resident they believed lost 20 pounds in one month. Also, Ms. Ball sent prescriptions and daily logs for all residents that are prescribed a special diet of supplements or extra snacks to maintain weight.

I completed an exit conference by phone on 01/26/2023. I contacted Licensee Designee, Chuck Cryderman's office and completed exit conference with Cec Ball. I informed her of the violations found and that a copy of the special investigation report would be mailed once approved.

APPLICABLE RULE	
R 400.2415	Health care of residents.
	(3) The weight of each resident shall be recorded upon admission and a monthly record of the weight of each resident shall be maintained.
ANALYSIS:	There is not enough evidence to determine that residents are losing weight due to food provided. I reviewed 2022 weight records and did not find any residents with a recent 20-pound weight loss in one month. The weight record indicates which resident receive meal supplements. The facility provided prescriptions for meal supplements and daily logs for residents who need assistance maintaining weight.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.2471	Quality of meals.
	(1) A minimum of 3 regular, nutritious, attractively prepared meals shall be provided daily. Not more than 15 hours shall

	elapse between the evening and morning meal. Meals shall be of proper form, consistency and temperature. Meals shall meet the general requirements for nutrition published by the department or currently found in the Recommended Daily Dietary Allowances, Food and Nutrition Board, National Academy of Science.
ANALYSIS:	There is not enough information to determine that the facility is serving inadequate food or the same meals daily. During the onsite investigation, I observed a variety of food at the facility and a varied menu. I reviewed menus provided by the cook, Jim Sealey, during the onsite investigation. Resident A stated she was tired of oatmeal for breakfast. Resident B indicated she would like more protein for breakfast.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in license status.

Kristine Cilluffo

01/26/2023

Kristine Cilluffo
Licensing Consultant

Date

Approved By:

Denise Y. Nunn

02/01/2023

Denise Y. Nunn
Area Manager

Date