GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 7, 2023

Audrey Farrow
693 S Clarwin Ave
Gladwin, MI 48624

RE: License #: AF260002067
Investigation #: 2023A1033019
Audrey Farrow's AFC

Dear Ms. Farrow:

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 (517) 284-9730.

Sincerely,

Jana Lipps, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF260002067
Investigation #:	2023A1033019
Complaint Receipt Date:	01/04/2023
Investigation Initiation Date:	01/06/2023
Report Due Date:	03/05/2023
Licensee Name:	Audrey Farrow
Licensee Address:	693 S Clarwin Ave Gladwin, MI 48624
Licensee Telephone #:	(989) 426-8710
Administrator:	Audrey Farrow
Licensee Designee:	N/A
Name of Facility:	Audrey Farrow's AFC
Facility Address:	693 S Clarwin Avenue Gladwin, MI 48624
Facility Telephone #:	(989) 426-8710
Original Issuance Date:	05/04/1979
License **Status:**	REGULAR
Effective Date:	06/08/2021
Expiration Date:	06/07/2023
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A's teeth are very decayed. Resident A has not been to a dentist in five years. For the past year and half, Audrey, the owner of the AFC, has been encouraged to get dental appointments for Resident A and the other residents but she has not done so.	No
Licensee is not providing personal care, including shaving, for Resident B. Resident B requires help shaving her facial hair and Licensee has refused to assist.	Yes
Additional Findings	Yes

III. METHODOLOGY

01/04/2023	Special Investigation Intake 2023A1033019
01/06/2023	APS Referral- Complaint stemmed from denied APS referral.
01/06/2023	Special Investigation Initiated – Telephone call made- Interview with Complainant, via telephone.
01/06/2023	Contact - Telephone call made- Interview with Community Mental Health Case Manager for Resident A, via telephone.
01/13/2023	Inspection Completed On-site- Interview with Licensee, Audrey Farrow, Resident A, B, & C. Review of Resident records, facility walk through completed.
01/13/2023	Inspection Completed-BCAL Sub. Compliance
01/13/2023	Exit Conference- Completed on-site with Licensee, Audrey Farrow.
01/17/2023	Contact – Telephone call received- Interview with Guardian B1 completed via telephone.
01/17/2023	Contact – Document Sent- Email communication send to CMH Case Manager, Kristine Ehlers.
01/17/2023	Contact – Telephone call made- Interview with Adult Protective Services worker, Mike Wirth, via telephone.

ALLEGATION:

Resident A's teeth are very decayed. Resident A has not been to a dentist in five years. For the past year and half, Audrey, the owner of the AFC, has been encouraged to get dental appointments for Resident A and the other residents but she has not done so.

INVESTIGATION:

On 1/4/23 I received an online complaint regarding the Audrey Farrow's AFC home (the facility). The complaint alleged that Resident A has not been receiving proper dental care which has resulted in Resident A's teeth decaying. On 1/6/23 I interviewed Kristine Ehlers, Case Manager with Community Mental Health for Central Michigan, via telephone. Ms. Ehlers is the case manager for Resident A. Ms. Ehlers reported she is the case manager for all four residents who reside at the facility. Ms. Ehlers reported Resident A has needed dental work for the past five years but has not had an appointment scheduled. Ms. Ehlers reported she has asked licensee Audrey Farrow to schedule a dental appointment for Resident A, on numerous occasions but Ms. Farrow has not done so until recently when Ms. Ehlers noted to Ms. Farrow that she would be calling Adult Protective Services. Ms. Ehlers reported Resident A is her own decision maker and does not have a guardian appointed at this time. Ms. Ehlers reported she has held these conversations with Ms. Farrow in person and through written text message. Ms. Ehlers reported she has documentation of a conversation that occurred between herself and Ms. Farrow, on 8/20/21, requesting she schedule a dental appointment for Resident A.

On 1/13/23 I completed an on-site investigation at the facility. I interviewed licensee Audrey Farrow. Ms. Farrow reported she did not want to cooperate with the investigation as she had "closed" the facility. Ms. Farrow reported she had discussed with Ms. Ehlers, from Community Mental Health, that she was closing the facility and Ms. Ehlers was currently looking for new placements for the four residents. I explained to Ms. Farrow that her license was not closed so she allowed the on-site investigation to occur. Ms. Farrow reported Resident A had a recent dental appointment on 12/16/22 at the My Community Dental Center in Harrison, MI. Ms. Farrow reported Resident A has a follow up appointment with this clinic on 2/15/23 to have all her teeth pulled and begin the process of being fitted for dentures. Ms. Farrow reported she was aware Ms. Ehlers had wanted Resident A to have a dental appointment prior to December 2022 but she was having difficulty finding a local dentist who would take Resident A's Medicaid insurance. Ms. Farrow reported due to COVID-19 the dental offices in their area were not taking new patients and many of them were not accepting Medicaid insurance. Ms. Farrow reported she was unaware Resident A had a broken tooth and reported Resident A did not inform her of the broken tooth.

During the on-site investigation, on 1/13/23, I interviewed Resident A. Resident A reported that she is having her teeth pulled on 2/15/23. Resident A reported her

teeth have not been bothering her, just the one that is broken in the front. She reported this tooth has been broken for at least a year. Resident A reported she completes her own dental hygiene at the facility and feels confident in this task. Resident A reported she did not inform Ms. Farrow that she had a broken tooth. Resident A was able to point to her broken tooth, which is one of her top front teeth.

During the on-site investigation, on 1/13/23, I requested to review the *Assessment Plan for AFC Residents* form for Resident A. Ms. Farrow was not able to provide me an updated copy of this form. She did not have a current or former assessment plan for me to review for Resident A.

On 1/6/23 I received an email from Ms. Ehlers with Community Mental Health. Ms. Ehlers shared visit summary notes from her meetings with Resident A and Ms. Farrow. On 8/20/21 Ms. Ehlers documented, “CM met with [Resident A] and AFC provider/Audrey at the AFC home. CM encouraged [Resident A] to schedule an appointment with a dentist as it is apparent that [Resident A] has broken teeth and likely cavities on some of her front teeth that can be seen. [Resident A] denies any pain with her teeth and states that she doesn't like going to the dentist but agreed to set up an appointment. However, she needs to find a dentist that will accept her insurance as her previous dentist no longer accepts her insurance.” On 12/14/22 Ms. Ehlers documented, “Writer spoke to AFC provider/Audrey regarding concerns with [Resident A's] teeth being very decayed and writer has asked Audrey for months to get a dental appointment for [Resident A]. Writer stated that [Resident A’s] teeth are very decayed and broken and [Resident A] reports that she has not been to a dentist in over 5 years. Writer expressed concerns that writer is concerned that the decay might cause medical issues for [Resident A] and needs to be addressed. Writer shared with AFC provider that writer did call in an APS complaint regarding this matter. Writer expressed concerns that writer is concerns about Audrey's ability to ensure that residents health and welfare are taken care of. Audrey did not respond as to why she has not made a dental appointment for [Resident A].”

APPLICABLE RULE	
R 400.1407	**Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.**
	(2) A licensee shall not accept or retain a resident for care unless and until a written assessment is made and it is determined that the resident is suitable pursuant to the following provisions: **(a) The amount of personal care, supervision, and protection required by the resident is available in the home.**

ANALYSIS:	Based upon interviews with Ms. Ehlers, Ms. Farrow, Resident A, review of Resident A's resident record and review of Ms. Ehlers documentation of encounters with Resident A and Ms. Farrow, licensee Audrey Farrows was not immediately able to locate a dentist who was accepting new patients and took Resident A's Medicaid insurance. Further, Resident A is her own decision maker and could have chosen to make this appointment on her own or with the assistance of the CMH case manager. It was not the sole responsibility of licensee Audrey Farrow to schedule this appointment although she was eventually able to do so and took Resident A to the dentist in December 2022.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ALLEGATION:

Licensee is not providing personal care, including shaving, for Resident B. Resident B requires help shaving her facial hair and licensee Audrey Farrow has refused to assist.

INVESTIGATION:

On 1/11/23 I received an on-line complaint regarding the facility. The complaint alleged licensee Audrey Farrow was not providing for the appropriate personal care required for Resident B. The complaint alleged Resident B requires assistance shaving her facial hair and Ms. Farrow has declined to assist with this care. On 1/13/23 I completed an on-site investigation at the facility. I interviewed Ms. Farrow regarding the allegation who reported Resident B has an arrangement with Ms. Farrow that she will ask Ms. Farrow to be shaved on Tuesdays after the noon meal. Ms. Farrow reported if Resident B does not request to be shaved then Ms. Farrow will not shave Resident B. Ms. Farrow reported it had been about 2-3 weeks since Resident B had requested to be shaved. She reported Adult Protective Services sent an investigator to the facility to discuss this issue with Ms. Farrow. Ms. Farrow reported she is now shaving Resident B every week and has done so for the past two weeks. She reported going forward she will shave Resident B every week and not wait for her to request to be shaved on her own.

During the on-site investigation I was able to observe Resident B. Resident B had some short facial hair at this time. This visit took place on a Friday afternoon and Ms. Farrow had noted that she shaves Resident B every Tuesday.

During the on-site investigation, on 1/13/23, I requested to review Resident B's resident record. Ms. Farrow did not have a current or a former copy of an assessment plan for Resident B for my review.

On 1/17/23 I interviewed Adult Protective Services Specialist, Mike Wirth, via telephone. Mr. Wirth reported he had made a couple of visits to the facility to check on Resident B and the stated allegations of Ms. Farrow not providing for her personal care by shaving her facial hair. Mr. Wirth reported that he was most recently at the facility on 1/9/23 and Resident B had been shaved, recently. Mr. Wirth also reported he spoke with several community members regarding Resident B's facial hair and did substantiate for neglect due to multiple community members reporting that Resident B was frequently seen in the community with a full beard.

On 1/17/23 I interviewed Guardian B1 via telephone. Guardian B1 reported Resident B has times where she does and does not want personal care from others. Guardian B1 reported that she was not aware of an instance where Resident B was upset by having facial hair.

On 1/6/23 I received an email from Ms. Ehlers with Community Mental Health. Ms. Ehlers shared visit summary notes from her meetings with Resident B and Ms. Farrow. On 12/14/22 Ms. Ehlers documented, "Writer spoke to AFC provider about concerns that she has not helped [Resident B] shave and that [Resident B] does not like having facial hair. Writer explained to AFC provider that this is a conversation that has been brought up in the past a few times regarding AFC provider not helping [Resident B] shave. Audrey/AFC provider stated that "I have told [Resident B] to ask me on Tuesday's and she never does." "She will ask me at the end of the work week and I feel like she should be shaved on Tuesday's before she leaves the house." Writer suggested that she just put it on her calendar of things she needs to do for the week to ensure that it gets done." On 12/14/22 Ms. Ehlers also documented, "Writer called and spoke to guardian regarding APS complaint filed regarding [Resident B]. Writer expressed concerns that AFC provider is not assisting [Resident B] with shaving on a weekly basis and [Resident B] had a lot of facial hair today, said she didn't like looking like a man, and that Audrey won't help her shave when she asks."

APPLICABLE RULE	
R 400.1407	**Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.**
	(2) A licensee shall not accept or retain a resident for care unless and until a written assessment is made and it is determined that the resident is suitable pursuant to the following provisions: **(a) The amount of personal care, supervision, and protection required by the resident is available in the home.**

ANALYSIS:	Based upon interviews with Mr. Wirth, Ms. Farrow, review of documentation from Ms. Ehlers, observations from on-site investigation and review of Resident B resident record, it can be determined Ms. Farrow was not consistently providing for Resident B's personal care needs. Ms. Farrow was unable to produce a completed assessment plan for Resident B to identify the agreed upon plan of shaving Resident B every Tuesday, if requested by Resident B. Ms. Ehlers had documented conversations with Ms. Farrow regarding Resident B's facial hair and Mr. Wirth reported that multiple community members had shared concerns regarding Resident B's unkempt facial hair.
CONCLUSION:	**VIOLATION ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION:

I completed an on-site investigation at the facility on 1/13/23. I requested to review the *Assessment Plan for AFC Residents* forms for all four residents. Licensee Audrey Farrow was not able to provide a current or former copy of an assessment plan for any of the current residents. I requested to review the Community Mental Health (CMH) assessment plan for the current residents, as all four residents have the same CMH case manager. Ms. Farrow reported that she did not have CMH assessment plans to view in the facility.

APPLICABLE RULE	
R 400.1407	**Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.**
	(3) In situations where a resident is referred for admission, the resident assessment plan shall be conducted in conjunction with the resident or the resident's designated representative, the responsible agency, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	Ms. Farrow was unable to produce any type of assessment plan for the four current residents at the facility during on-site investigation.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION:

During the on-site investigation on 1/13/23, I requested to review the *Resident Care Agreement* forms for the current residents at the facility. Ms. Farrow reported that she has not kept her paperwork up to date for Residents A, B, C, and D. She was not able to provide a current or former copy of this form for my review at the time of the on-site investigation.

APPLICABLE RULE	
R 400.1407	**Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.**
	(6) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency at least annually or more often if necessary.
ANALYSIS:	Ms. Farrow was unable to produce any documentation of completed *Resident Care Agreement* forms for the four current residents at the facility during on-site investigation.
CONCLUSION:	**VIOLATION ESTABLISHED**

INVESTIGATION:

During the on-site investigation, on 1/13/23, I requested to review the Resident Medication Administration Records (MARs) for all current residents. Ms. Farrow reported that she has not been recording medications administered on resident MARs since November 2022. Ms. Farrow was able to produce the November 2022 MARs for my review during on-site investigation, for Residents A, B, and C. Ms. Farrow was not able to locate any MAR for Resident D.

APPLICABLE RULE	
R 400.1418	**Resident medications.**
	(4) When a licensee or responsible person supervises the taking of medication by a resident, the licensee or responsible person shall comply with the following provisions: **(a) Maintain a record as to the time and amount of any prescription medication given or applied. Records of prescription medication shall be maintained on file in the home for a period of not less than 2 years.**

ANALYSIS:	Ms. Farrow has not been keeping records of medications administered to Residents A, B, and C since November 2022. Ms. Farrow has no record of medications administered to Resident D, that she could present at the time of this on-site investigation.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Following the receipt of an approved corrective action plan, and relocation of Residents A, B, C, and D, the license will be closed at the request of the Licensee, Audrey Farrow.

02/07/2023

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Jana Lipps Date
Licensing Consultant

Approved By:

02/07/2023

_____

Dawn N. Timm Date
Area Manager