



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

April 20, 2023

Carol Smith  
Timberline Lodge Inc  
3741 Colwood Rd.  
Caro, MI 48723

RE: License #: AM790009691  
Investigation #: 2023A0572025  
Timberline Lodge

Dear Ms. Smith:

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) 643-7960.

Sincerely,

A handwritten signature in black ink that reads "Anthony Humphrey". The signature is written in a cursive style with a large, looping flourish at the end.

Anthony Humphrey, Licensing Consultant  
Bureau of Community and Health Systems  
411 Genesee  
P.O. Box 5070  
Saginaw, MI 48605  
(810) 280-7718

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM790009691
<b>Investigation #:</b>	2023A0572025
<b>Complaint Receipt Date:</b>	02/28/2023
<b>Investigation Initiation Date:</b>	02/28/2023
<b>Report Due Date:</b>	04/29/2023
<b>Licensee Name:</b>	Timberline Lodge Inc
<b>Licensee Address:</b>	3741 Colwood Rd. Caro, MI 48723
<b>Licensee Telephone #:</b>	(989) 673-8151
<b>Administrator:</b>	Victoria Balzer
<b>Licensee Designee:</b>	Carol Smith
<b>Name of Facility:</b>	Timberline Lodge
<b>Facility Address:</b>	3771 Colwood Rd Caro, MI 48723
<b>Facility Telephone #:</b>	(989) 673-4990
<b>Original Issuance Date:</b>	02/09/1990
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	01/02/2023
<b>Expiration Date:</b>	01/01/2025
<b>Capacity:</b>	12
<b>Program Type:</b>	AGED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Home Manager, Lisa Nusz did not complete a background check on Theresa Periso although she is aware of Theresa's background.	Yes

**III. METHODOLOGY**

02/28/2023	Special Investigation Intake 2023A0572025
02/28/2023	Special Investigation Initiated - Letter
02/28/2023	APS Referral
03/10/2023	Inspection Completed On-site
03/10/2023	Contact - Face to Face Home Manager, Lisa Nusz; Staff, Ashley Clark; Staff, Katelyn Emmons; Resident A, Resident B and Resident C.
03/13/2023	Contact - Document Received Home Manager, Lisa Nusz.
04/20/2023	Contact - Telephone call made Home Manager, Lisa Nusz.
04/20/2023	Exit Conference Licensee, Carol Smith.

**ALLEGATION:**

Home Manager, Lisa Nusz did not complete a background check on Theresa Periso although she is aware of Theresa's background.

**INVESTIGATION:**

On 02/28/2023, the local licensing office received a complaint for investigation. APS referred the complaint to licensing.

On 03/10/2023, I conducted an unannounced onsite at Timberline Lodge AFC, located in Tuscola County Michigan. I interviewed Home Manager, Lisa Nusz; Staff,

Ashley Clark; Staff, Katelyn Emmons and observed Resident A, Resident B and Resident C.

On 03/10/2023, I interviewed Home Manager Lisa Nusz regarding the allegations. She confirmed that Theresa Periso is employed at Timberline Lodge AFC. She completed an ICHAT for Theresa Periso on 12/13/2022 and this was confirmed during my onsite. Ms. Nusz was not aware that there was anything further that needed to be completed and informed that whatever she needs to do for Theresa Periso, that she will also have to do for her other two new hires, Stephen Hill, and Faith Curtis. Ms. Nusz just became the Home Manager a short time ago and is still learning the job. I sat with Ms. Nusz, and we created her an account on the LARA website so she can schedule her three new hires for their background checks. Ms. Nusz was able to schedule the three new hires for their background check for 03/13/2023. Ms. Nusz informed that there have not been any issues with Ms. Periso and any of the residents. She stated, "They love her."

On 03/10/2023, I interviewed staff, Ashley Clark regarding the allegation. Ms. Clark informed that she has never witnessed or heard of an issue with Ms. Periso. Ms. Clark trained Ms. Periso and believes that she is a good worker. Ms. Clark has been employed for 4 years and had a background check completed when she started, but there was a different Home Manager working at the time.

On 03/10/2023, I interviewed Staff, Katelyn Emmons regarding the allegation. Ms. Emmons informed that she is aware of who Ms. Theresa Periso is she is a good worker that is still learning the job. She does not have any concerns with Ms. Periso caring for any of the residents. Ms. Emmons has been employed for a couple years and completed a background check when she became employed. She informed that they had a different Home Manager at the time.

On 03/10/2023, I reviewed all of the employee files and they all had ICHATs in the file. The 3 new hires had not completed their fingerprinting, therefore; the results of their workforce background checks were not in their files.

On 03/10/2023, I observed Resident A, B and C. They all appeared to have appropriate health and well-being. Resident C stated, "This is like a home away from home." They did not report any concerns regarding any of the staff members.

On 03/13/2023, I received an email from Home Manager, Lisa Nusz with the results of Staff, Theresa Periso, Stephen Hill, and Faith Curtis background checks. They were all eligible for employment in a job that involves direct access or providing direct services to a patient or resident in an adult foster care facility.

On 04/20/2023, I contacted Home Manager, Lisa Nusz and asked for the employee schedule for the month of February. She informed that prior to getting their fingerprints completed, Theresa Periso worked 3<sup>rd</sup> shift, so she would have worked alone prior to completing her background check.

On 04/20/2023, I reviewed the staff schedule for the month of February 2023 and confirmed that Ms. Periso was working 3<sup>rd</sup> shift alone prior to completing the background check on 03/13/2023.

<b>APPLICABLE RULE</b>	
<b>MCL 400.734</b>	<p><b>400.734b. This amended section is effective January 9, 2009 except Section 734b(1)(e)(iv) after the word "or" which will not be effective until October 31, 2010.</b></p> <p><b>Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.</b></p>
	<p><b>(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or</b></p>

	<b>she is no longer exempt and shall be terminated from employment or denied employment.</b>
<b>ANALYSIS:</b>	Based on the interviews of the staff and reviewing of the employee files, there is substantial evidence to confirm a rule violation. Home Manager, Lisa Nusz completed ICHATs for her new hires, however; she did not complete a background check for these staff. Staff were still eligible to work with just the ICHATs, but they would not be able to work alone without the background completed. Ms. Periso was working on 3 <sup>rd</sup> shift by herself prior to getting the background check completed.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 04/20/2023, an Exit Conference was held with Licensee, Carol Smith regarding the allegation and the results of the special investigation. She was informed that a corrective action plan would need to be submitted within 15 days of the receipt of this special investigation report.

#### IV. RECOMMENDATION

I recommend that no changes be made to the licensing status of this medium sized adult foster care group home, pending the receipt of an appropriate corrective action plan (Capacity 1-12).



04/20/2023

Anthony Humphrey  
Licensing Consultant

Date

Approved By:



04/20/2023

Mary E. Holton  
Area Manager

Date