



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 6, 2023

Jim Boyd
Crisis Center Inc - DBA Listening Ear
PO Box 800
Mt Pleasant, MI 48804-0800

RE: License #: AS370011271
Investigation #: 2023A1029022
Adams Home

Dear Mr. Boyd:

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 (231) 922-5309.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Browning". The script is cursive and fluid.

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
Browningj1@michigan.gov - (989) 444-9614

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS370011271
Investigation #:	2023A1029022
Complaint Receipt Date:	02/09/2023
Investigation Initiation Date:	02/10/2023
Report Due Date:	04/10/2023
Licensee Name:	Crisis Center Inc - DBA Listening Ear
Licensee Address:	107 East Illinois, Mt Pleasant, MI 48858
Licensee Telephone #:	(989) 773-6904
Administrator:	Jim Boyd
Licensee Designee:	Jim Boyd
Name of Facility:	Adams Home
Facility Address:	208 S. Adams Street, Mount Pleasant, MI 48858
Facility Telephone #:	(989) 317-8717
Original Issuance Date:	03/11/1987
License Status:	REGULAR
Effective Date:	10/04/2021
Expiration Date:	10/03/2023
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

ALLEGATION(S)

	Violation Established?
There are concerns regarding Resident A's personal care because his clothing looks like "rags," he smelled of urine, and he was losing weight dramatically.	No
Resident A needed to see a cardiologist and have a walker ordered and neither of these were completed.	No
Additional Findings	Yes

II. METHODOLOGY

02/09/2023	Special Investigation Intake 2023A1029022
02/10/2023	Special Investigation Initiated – Telephone to Sarah Watson, ORR
02/13/2023	APS Referral made to Centralized Intake
02/27/2023	Contact - Telephone call made to Sarah Watson ORR
03/01/2023	Inspection Completed On-site direct care staff members Ashley Wolfe and Brian Recker, and Resident A, face to face with Jim Boyd at different licensed facility.
03/15/2023	Contact - Document Received from Jim Boyd, Listening Ear
03/17/2023	Contact - Telephone call made to Guardian A1 and former direct care staff member Breanne Hale
03/21/2023	Contact – telephone call to Jim Boyd
03/22/2023	Telephone call to Harmony Cares Medical Group, Sonya Skacal, medical assistant, direct care staff members Kimberly Jones, Brandon Garber, William Besaw (Mailbox full)
03/23/2023	Inspection Completed On-site – Face to face with Jim Boyd and Katie Hohner, ORR, Resident A, Kimberly Jones, Brandon Garber, William Besaw, Brian Recker, Ashley Wolfe
03/29/2023	Contact – Telephone call to Loraine Crawford, CMH, Left message
03/30/2023	Exit conference with licensee designee Jim Boyd

ALLEGATION:

There are concerns regarding Resident A's personal care because his clothing looks like "rags," he smelled of urine, and he was losing weight dramatically.

INVESTIGATION:

On February 9, 2023, a complaint was received from the Bureau of Community and Health Systems online complaint system with concerns Resident A was losing weight dramatically, his clothes looked "like rags", and he smelled like urine.

On February 10, 2023 I interviewed Community Mental Health Office of Recipient Rights advisor (ORR), Sarah Watson who stated she spoke with Guardian A1 who informed her she had the above concerns about Resident A. Ms. Watson stated she interviewed direct care staff member Breanne Hale, whose role is home manager, on February 7, 2023 and Ms. Hale informed her Resident A had a recent hospital stay and has only been home about a week recovering from illness. Ms. Watson stated Ms. Hale also reported to her that Resident A has a wheelchair for mobility and that he is able to use the restroom independently. Ms. Watson stated she completed an onsite inspection at Adams Home and was able to observe all his clothes. Ms. Watson was informed he did smell like urine due to occasional incontinence and he was now on a schedule to see if he needed personal care assistance.

On March 1, 2023, I completed an unannounced onsite investigation at Adams Home and met with direct care staff members Ashley Wolfe and Brian Recker. Ms. Wolfe stated Resident A has never worn clothes that look like "rags" and has nice clothes because he typically wears Adidas and Under Armor name brands in good condition. Ms. Wolfe stated Resident A was admitted to the hospital on January 28, 2023 and upon his discharge back to the facility he has been sleeping more and having some incontinence concerns because his health is declining.

I attempted to interview Resident A however he was in his bed just waking up. Resident A gave me permission to look through his clothing items and I noticed that all clothes were in almost new condition, all name brands, and clean. Resident A was in sweatpants, a shirt, and slippers while he was lying down. Resident A appeared to be clean and free from any odors at the time of my observation.

During the onsite investigation, I reviewed Resident A's resident record. According to Resident A's *Assessment Plan for AFC Residents*, under the section titled *B. Toileting* it stated Resident A "Needs staff assistance on the rare occasion" and under the section titled *F. Personal Hygiene* it stated Resident A needs, "Reminders for when to bathe." There was a communication record from Harmony Cares Medical Group from a visit on January 20, 2023 stating he was "well hydrated, monitor BP daily, hold BP meds if BP is less than 135/80 – on hold- Amlodipine, Diltiazem, Hydrochlorot, and Metoprolol." There was a physician order for Boost Nutrition supplements starting on August 1, 2022 to be given to Resident A at 8:00 a.m. and 2:00 p.m. This order also included soaker pads for

his bed / couch as needed for incontinence and a wheelchair with seat belt for safety reasons. While reviewing the resident record, I was unable to find the weight records for Resident A.

On March 1, 2023, I interviewed licensee designee, Jim Boyd who stated he has never had concerns about Resident A's clothing and says he has nice clothes. Mr. Boyd stated Resident A tends to dress comfortable style clothing in the home since he is lying down a lot. Since I was unable to find weight records during the onsite inspection, Mr. Boyd sent them to me and I reviewed the weight records for Resident A. According to Resident A's weight record there was a comment stating "*he lost 30 pounds in one year and Visiting Physicians Association ordered Boost shakes and labs*" from the time frame of August 1, 2021 - July 11, 2022. Resident A's weight for January 2023 was 157 pounds so since June 1, 2021 and adding the Boost nutrition shakes, he has gained back 15 pounds.

On March 22, 2023, I contacted Harmony Cares Medical Group and spoke to medical assistant, Sonya Skacal. Ms. Skacal stated she has provided medical care to Resident A for at least for four years. Ms. Skacal stated she had concerns regarding his condition and his cleanliness during one of the visits in February 2023. Ms. Skacal stated she notified Guardian A1 of the concerns. Ms. Skacal stated in the past, he was always well put together and had clean clothes on however, the last couple times she has been there, Resident A has smelled of urine and had food in his mustache. Ms. Skacal stated she feels Resident A is incontinent at this point and he may need more assistance because he has declined quite a bit. Ms. Skacal stated his brief was soaked through to his sweatpants last time she saw him on February 6, 2023 and according to his medical chart, he is incontinent. Ms. Skacal stated Resident A is still using the Boost shakes which have slowed his weight loss. Ms. Skacal stated on March 6, 2023, he had hypertension so he had scheduled him a follow up with a cardiologist on March 9, 2023. Ms. Skacal stated during the appointment on March 6, 2023, there was also documentation that he was disheveled appearance and smelled of urine. Ms. Skacal stated she did not see an order for a walker in his medical chart. Ms. Skacal stated Resident A is the hardest patient they have to control his blood pressure. Ms. Skacal stated she was concerned that a urinary tract infection from sitting in his urine soaked clothes could make the condition worse. Ms. Skacal stated "*diaper or napkin rash*" is one of the diagnoses in this chart so he wears briefs and he also has a "*malnutrition*" diagnosis. Ms. Skacal stated Resident A does not talk a lot during the visits and will sometimes only say a "yes / no" or a "Hello" when she comes to the home. Ms. Skacal stated at this point the direct care staff members need to change his briefs or at the bare minimum he would need to be taken into the bathroom and prompting him.

On March 22, 2023, I interviewed direct care staff member Brandon Garber who has worked with Resident A for one year. Mr. Garber stated since Resident A fell he has required more assistance with toileting because he has been weaker. Mr. Garber stated before that time, he went to the bathroom on his own however because he had more problems recently they did take him for a urinalysis to determine the issues. Mr. Garber stated Resident A does not have an order or use adult incontinence briefs at this

time. Mr. Garber stated he is capable of doing this on his own but now he is getting used to using the wheelchair to get into the bathroom so it takes him a bit longer to get into the bathroom. Mr. Garber stated there are urinary incontinence accidents daily but on Mr. Garber's shift which is second, it usually happens once per week. Mr. Garber stated they will remind Resident A for bowel movements, but he will urinate on his own. Mr. Garber stated if they did smell urine on him, they would give him a shower but he has not noticed this on his shift. Mr. Garber stated has not noticed Resident A looking unkempt in appearance.

On March 22, 2023, I interviewed direct care staff member, Kimberly Jones. Ms. Jones stated when she first started Resident A could do a lot on his own and would need some coaching with most areas. Ms. Jones stated in the couple months Resident A has been a lot more unsteady so direct care staff members will have to stand in the bathroom to assist with going to the bathroom or taking a shower. Ms. Jones stated lately Resident A has been urinating in the bed so he will have showers in the middle of the night then she will also change his clothes and bedding. Ms. Jones stated she has come in a couple times and Resident A has smelled like urine and if she smells this, then she would give him a shower and get him fresh clothes. Ms. Jones stated she has never seen him in an incontinence brief as he has always worn underwear. Ms. Jones stated she thought he should be wearing briefs at this point because sometimes he also has incontinence with bowels. Ms. Jones stated she has mentioned it to the direct care staff members at staff meetings and they have said they are going to take him to the doctor to see if he had a urinary tract infection because it started after the fall he had. Ms. Jones stated he is still doing the BOOST shakes and has these at his 8 am medication pass. Ms. Jones stated that sometimes Resident A will not eat a lot. Ms. Jones stated she will fix him some food in the middle of the night if he gets up and she needs to change his sheets. Ms. Jones stated Resident A has a lot of new clothing that he has not worn yet.

On March 23, 2023, I interviewed direct care staff member William Besaw. Mr. Besaw stated there were a couple times when he would arrive to work and noticed Resident A needed assistance to change his clothes and take a shower. Mr. Besaw stated when he noticed this then he would clean Resident A and get him fresh clothes. Mr. Besaw stated this has been a recent change in Resident A's condition so Mr. Boyd is working on an order for briefs which will help his incontinence issues. Mr. Besaw stated he has never noticed Resident A's clothing looking dirty or worn. Mr. Besaw stated the direct care staff members do not have to remind Resident A to use the bathroom. Mr. Besaw stated Resident A did have some weight loss, however, he is still drinking the BOOST shakes at 8 am and 2 pm daily which has helped keep his weight stable.

On March 23, 2023, I completed another onsite investigation and completed the exit conference with Mr. Boyd. Mr. Boyd stated he updated the *Assessment Plan for AFC Residents* for Resident A to reflect the change in his personal care needs and now has an order for incontinence supplies written by Bridget Ross, NP which states "*Patient has incontinence both urine and fecal. Patient is able to utilize incontinence supplies daily.*"

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	There is no indication the licensee designee Jim Boyd and the direct care staff members at Adams Home are not providing supervision, protection and personal care as defined in Resident A's <i>Assessment Plan for AFC Residents</i> . Resident A's <i>Assessment Plan for AFC Residents</i> was completed in July 2022 and since that time, Resident A has had some decline in his health. Mr. Boyd has updated Resident A's <i>Assessment Plan for AFC Residents</i> to reflect his personal care needs more accurately at this time and has obtained a medical order for incontinence supplies to be used daily for Resident A. I completed two onsite investigations with the first occurring on March 1 and the second on March 23, 2023 and both times Resident A appeared to be clean and free from odors.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A needed to see a cardiologist and have a walker ordered and neither of these were completed.

INVESTIGATION:

On February 9, 2023, a complaint was received from the Bureau of Community and Health Systems online complaint system with concerns Resident A was supposed to have a walker and a cardiologist appointment and the direct care staff member at Adams Home did not follow through with Resident A's medical needs.

On February 10, 2023 I interviewed Community Mental Health Office of Recipient Rights advisor (ORR), Sarah Watson. Ms. Watson stated she followed up with direct care staff member whose previous role was home manager, Ms. Hale on February 7, 2023. According to Ms. Watson, Ms. Hale reported she had reached out to the Cardiologist and was waiting for the Cardiologist to call her back for the follow up appointment to be made. Ms. Hale stated she was not aware that Resident A needed a walker.

On March 1, 2023, I interviewed licensee designee, Jim Boyd who stated he was informed by the previous home manager there was a referral for a cardiologist appointment for Resident A. Mr. Boyd stated he was under the impression that

Resident A's doctor was going to follow up with them regarding this appointment but there is nothing in the resident record this has occurred. Mr. Boyd stated there has never been an order for Resident A to use a walker and there is also nothing in the discharge notes from the hospital. Mr. Boyd stated Resident A receives care through Harmony Care which was formerly named Visiting Physicians Association.

On March 1, 2023, I completed an unannounced onsite investigation at Adams Home. During the onsite, I was able to review Resident A's resident record. According to documentation in the resident record, Resident A has an order to use a wheelchair. According to his record, this order was received after Resident A was discharged from a recent hospital stay and the wheelchair's purpose is to prevent falls due to unforeseen blood pressure drops and sedation. I did not observe an order for a walker in Resident A's record. On the hospital discharge instructions, it says follow up with PHCP. I reviewed the discharge summary from the hospital which included a discharge diagnosis of *1. Orthostatic hypotension. 2. High cholesterol 3. laceration without foreign body of right forearm. Subsequent encounter 4. Intellectual disability, 5. On continuous oral anticoagulation 6. Recurrent falls.* According to the instructions, Resident A was required to have a follow up within 5-7 days with Shihab Rabh, MD in Bay City, MI and that Dr. Rabh's office would contact the Adams House to schedule this appointment. There were no future appointments listed on the discharge instructions.

During the onsite investigation, I also interviewed direct care staff members Ashley Wolfe and Brian Recker. Ms. Wolfe stated she was not aware of Resident A having an order for a walker. Ms. Wolfe stated he receives services through Harmony Care and they would have completed this order. Ms. Wolfe stated the former home manager, Ms. Hale is the one who picked him up from the hospital. Ms. Wolfe stated there is a cardiologist appointment scheduled for Resident A in March.

On March 15, 2023, I received email from Mr. Boyd with further medical documentation for Resident A. Mr. Boyd also confirmed there is no record of a walker being ordered but there were physician notes from the cardiologist appointment which Resident A attended on March 9, 2023.

On March 17, 2023 I interviewed former direct care staff member whose role was home manager, Breanne Hale. Ms. Hale stated Resident A never had an order for a walker but he did have an order for a wheelchair. Ms. Hale stated the wheelchair was a safety precaution because he was a fall risk recently. Ms. Hale stated she was not aware that he needed to see a cardiologist but this could have changed in the last two weeks.

On March 17, 2023, I interviewed Guardian A1. Guardian A1 stated Resident A went into the hospital because he was falling a lot and she recalled a discharge nurse mentioning on January 31, 2023, Resident A needed a walker. Guardian A1 stated she referred this nurse back to the home staff members to follow up on this. Guardian A1 was not aware if an order was written for a walker but knows Resident A has been using a wheelchair currently. Guardian A1 stated she was informed by Harmony Cares that Resident A needed to be seen by a cardiologist.

On March 22, 2023, I interviewed Harmony Cares Medical Group medical assistant, Ms. Skacal. Ms. Skacal stated she did not see an order for a walker in his medical chart but if he needed one then they could provide one to him. Ms. Skacal stated they saw Resident A for a post hospital visit on February 6, 2023 after he fell and had to get stitches. Ms. Skacal stated she inquired with one of the direct care staff members if there was a follow up with the cardiologist and no one could give an answer. Ms. Skacal stated when she was at the home on February 6, 2023 she wrote a note to the direct care staff member and home manager so they would follow up through the cardiologist and also discuss any medication changes regarding his blood thinner.

On March 22, 2023, I interviewed direct care staff member Brandon Garber. Mr. Garber stated he has never observed an order from a walker and he has not met with Harmony Care about this because they come during day shift.

On March 22, 2023, I interviewed direct care staff member Kimberly Jones. Ms. Jones stated she did know that Resident A needed a cardiologist appointment but she has never read any notes or orders regarding him having a walker. Ms. Jones stated Resident A has been in a wheelchair since those two falls.

APPLICABLE RULE	
R 400.14310	Resident health care.
	<p>(1) A licensee, with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician or other health care professional with regard to such items as any of the following:</p> <p>(d) Other resident health care needs that can be provided in the home. The refusal to follow the instructions and recommendations shall be recorded in the resident's record.</p>
ANALYSIS:	<p>There is no indication licensee designee, Jim Boyd, has not followed the instructions and recommendations of Resident A's physician. Resident A did not have an order for a walker at any time. According to Resident A's resident record, there was a communication record from February 6, 2023 from Harmony Cares to follow up with the cardiologist about the pros and cons of the blood thinner with Resident A's recent falls. Resident A did have an appointment with cardiologist Dr. Mohon on March 9, 2023 and is scheduled for a follow up appointment on September 14, 2023.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

According to the Resident A's resident record, monthly weights are not completed regularly on the *Resident Weight Record* because there were only eight recorded weights since June 2021.

On March 1, 2023, I completed an unannounced onsite investigation at Adams Home. During the onsite, I was able to review Resident A's resident record and I did not locate any *Resident Weight Record* for Resident A.

On March 15, 2023, I received an email from Mr. Boyd stating while reviewing resident records with Ms. Watson from ORR he discovered the resident weights were not done consistently. Mr. Boyd sent me the *Resident Weight Record* which was located for Resident A.

On March 22, 2023, I interviewed direct care staff member, Brandon Garber. Mr. Garber stated they are usually taken on the first of the month by the day shift staff. Mr. Garber stated the weights are taken on a monthly basis. Mr. Garber was not aware of Resident A not having all weights on his *Weight Record*.

On March 23, 2023, I interviewed direct care staff member, William Besaw at Adams Home. Mr. Besaw stated the procedure is to record weights within the first five days of the month which are recorded in their Community Mental Health records and the home provider's log.

APPLICABLE RULE	
R 400.14310	Resident health care.
	(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
ANALYSIS:	According to the Resident A's resident record, monthly weights are not completed regularly on the <i>Resident Weight Record</i> . There were no weights recorded from September 2021-July 2022.
CONCLUSION:	VIOLATION ESTABLISHED

III. RECOMMENDATION

Upon receipt of an approved corrective action plan, I recommend no change in the license status.

Jennifer Browning

03/29/2023

Jennifer Browning
Licensing Consultant

Date

Approved By:

Dawn Timm

04/06/2023

Dawn N. Timm
Area Manager

Date