



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

August 18, 2023

Jennifer Bhaskaran  
Alternative Services Inc.  
Suite 10  
32625 W Seven Mile Rd  
Livonia, MI 48152

RE: License #: AS250015343  
Investigation #: 2023A0779056  
Boyle Group Home

Dear Jennifer Bhaskaran:

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 cursive script that reads "Christopher A. Holvey".

Christopher Holvey, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 899-5659

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS250015343
<b>Investigation #:</b>	2023A0779056
<b>Complaint Receipt Date:</b>	07/05/2023
<b>Investigation Initiation Date:</b>	07/10/2023
<b>Report Due Date:</b>	09/03/2023
<b>Licensee Name:</b>	Alternative Services Inc.
<b>Licensee Address:</b>	Suite 10 32625 W Seven Mile Rd Livonia, MI 48152
<b>Licensee Telephone #:</b>	(248) 471-4880
<b>Administrator:</b>	Will Paige
<b>Licensee Designee:</b>	Jennifer Bhaskaran
<b>Name of Facility:</b>	Boyle Group Home
<b>Facility Address:</b>	222 Elizabeth Street Montrose, MI 48457
<b>Facility Telephone #:</b>	(239) 989-2919
<b>Original Issuance Date:</b>	12/13/1993
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	07/17/2022
<b>Expiration Date:</b>	07/16/2024
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Staff Rayshele Simmons smokes marijuana in car during shifts at this home.	No
Staff Rayshele Simmons leaves during shifts leaving only one staff working.	Yes
Staff Rayshele Simmons is mean and yells at the residents.	No

## III. METHODOLOGY

07/05/2023	Special Investigation Intake 2023A0779056
07/10/2023	APS Referral Complaint was referred to APS centralized intake.
07/10/2023	Special Investigation Initiated - Telephone Spoke to administrator.
07/12/2023	Contact - Telephone call made Spoke to recipient rights investigator, Pat Shepard.
07/12/2023	Inspection Completed On-site
07/13/2023	Contact - Telephone call made Interview conducted with staff person, Taryn Bonner.
07/13/2023	Contact - Telephone call made Interview conducted with staff person, Dominique Upchurch.
07/24/2023	Contact - Telephone call made Interview conducted with staff person, Samyria Bradshaw.
08/03/2023	Contact - Telephone call made Interview conducted with staff person, Rayshele Simmons.
08/03/2023	Contact - Telephone call made Spoke to recipient rights investigator, Pat Shepard.
08/07/2023	Contact - Telephone call made Interview conducted with staff person, Rebecca Conrad.
08/17/2023	Exit Conference Held with administrator, Will Paige.

**ALLEGATION:**

Staff Rayshele Simmons smokes marijuana in car during shifts at this home.

**INVESTIGATION:**

On 7/10/23, administrator, Will Paige, stated that he was not aware of staff person, Rayshele Simmons smoking marijuana while at work or working while under the influence. Administrator Paige stated that this home has no verbal residents to report anything like this and that none of the other staff have reported this being an issue.

During the course of this investigation, six different staff persons were all interviewed separately, and they all reported the same information. All six staff stated that they have not witnessed staff Rayshele Simmons smoking marijuana while at work. All six staff reported that staff Simmons behavior while working has not indicated that she has ever worked while under the influence of marijuana.

On 8/3/23, staff Simmons denied that she has ever smoked marijuana on the property of this home or while on shift. Staff Simmons stated that she does smoke cigarettes and/or vapes outside, but never marijuana.

<b>APPLICABLE RULE</b>	
<b>R 400.14204</b>	<b>Direct care staff; qualifications and training.</b>
	<b>(2) Direct care staff shall possess all of the following qualifications:</b> <b>(a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.</b> <b>(b) Be capable of appropriately handling emergency situations.</b>
<b>ANALYSIS:</b>	Staff Rayshele Simmons denies ever smoking marijuana on the property of this home or while on shift. Six different staff persons stated that they have not witnessed staff Simmons smoking marijuana while at work or work while under the influence of marijuana. There was no evidence found to prove that staff Simmons has used marijuana while at work or worked while under the influence of the drug.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

Staff Rayshele Simmons leaves during shifts leaving only one staff working.

**INVESTIGATION:**

All of the 5 residents *Assessment Plan for AFC Residents* were reviewed. This home currently has 5 residents, who are all non-verbal. Three of the 5 residents utilize wheelchairs and require total care when it comes to completing all their activities of daily living (ADL's). The other 2 residents require some assistance with most ADL's, with 1 of those residents being legally blind. One of the residents with a wheelchair requires 1 staff while using a mechanical lift and 2 staff without the lift for all transfers. Three residents have seizure disorders and 2 residents have a history of self-injurious behavior. All 5 residents are developmentally disabled, with varying levels of cognitive deficiencies.

On 7/12/23, Home manager, Cindy Matthews, stated that some staff will occasionally work double shifts (16 hours) and they have been allowed to leave the home and go get something to eat at local restaurants. Manager Matthews stated that there are 2 staff scheduled each shift and she admits that this leaves only 1 staff person with all 5 residents for a short time. Manager Matthews stated that some staff have reported that staff Simmons has left the home during shift for longer period of times.

On 7/12/23, staff person, Michelle Aaron, stated that staff Simmons has left during her shift to go to the local McDonalds to get food. Staff Aaron stated that staff Simmons is only gone a few minutes but this does leave only 1 staff to care for the 5 residents.

On 7/13/23, staff persons, Taryn Bonner, and Dominique Upchurch, stated that staff Simmons has never left during a shift for any extended length of time. Staff Bonner and Upchurch stated that with permission from their supervisor, many different staff have left to go get something to eat, leaving only 1 staff working alone for a few minutes.

On 8/3/23, staff Simmons stated that the home manager does sometimes allow staff to leave the home to go get food at local restaurants and come right back and that several staff have done it. Staff Simmons stated that this only leaves 1 staff working for just a few minutes, since there are several local fast-food places only 2-3 minutes from this home.

<b>APPLICABLE RULE</b>	
<b>R 400.14206</b>	<b>Staffing requirements.</b>
	<b>(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services</b>

	<b>specified in the resident's resident care agreement and assessment plan.</b>
<b>ANALYSIS:</b>	It was confirmed that there are 2 staff assigned to work each shift at this home and that several different staff have been allowed to leave during shift to go get food from local fast-food restaurants, which leaves only 1 staff to care for all 5 residents. All 5 residents are developmentally disabled and non-verbal. Three residents are in wheelchairs and are total care and the other 2 require some assistance with ADL's. One resident is legally blind, 3 residents have seizure disorders and 2 have history of self-injurious behavior. One resident requires 1 staff using a mechanical lift and 2 staff without the lift for all transfers. Due to the significant cognitive deficiencies and health issues of the residents and the requirement of staff assistance with completing all ADL's, having only 1 staff person on duty places the residents at substantial risk of receiving insufficient personal care and protection.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ALLEGATION:**

Staff Rayshele Simmons is mean and yells at the residents.

**INVESTIGATION:**

On 7/10/23, administrator, Will Paige, stated that staff Simmons has worked for this company for 10 or more years and that he is not aware of any past allegations being made regarding staff Simmons being mean or yelling at residents. Administrator Paige stated that all 5 residents in the home are non-verbal and cannot speak to if this is an issue or not.

On 7/12/23, home manager, Cindy Matthews, stated that staff Simmons can have an attitude at times, but that she has not heard staff Simmons yell at or be mean toward any resident. Manager Matthews stated that some staff have complained about staff Simmons yelling at the residents but have not given any specific examples of how staff Simmons is mean or disrespectful.

On 7/12/23, staff person, Michelle Aaron, stated that staff Simmons can get frustrated and raises her voice with the residents at times and that she had had to calm her down on 2 occasions. Staff Aaron stated that staff Simmons does not cuss, but can be mean and/or short with the residents. When asked to provide more specific examples of things staff Simmons says to the residents, staff Aaron could not do so.

On 7/13/23, staff person, Taryn Bonner, stated that she has not witnessed staff Simmons yell or be mean toward any resident. Staff Bonner stated that staff Simmons has a loud voice sometimes, but does not yell.

On 7/13/23, staff person, Dominique Upchurch, stated that staff Simmons does yell at the residents and often has an attitude. Staff Upchurch stated that staff Simmons says things to the residents like, "You're getting on my nerves" and/or I don't got time for this". Staff Upchurch stated that staff Simmons does not cuss at residents or call them names.

On 7/24/23, staff person Samyria Bradshaw, stated that staff Simmons does have a loud type of voice at times, but that staff Simmons does not yell at the residents. Staff Bradshaw stated that she has never witnessed staff Simmons be mean, cuss at or be disrespectful toward any resident.

On 8/3/23, staff Rayshele Simmons, denied that she is mean or yells at any residents. Staff Simmons stated that she treats all the residents like family and does not respect them. Staff Simmons admitted that many of the other staff at this home do like her and often do not even speak to her, because she does not get involved in the drama and gossip amongst the staff.

On 8/7/23, staff person, Rebecca Conrad, stated that staff Simmons can be rude and yells at the residents. Staff Conrad stated that staff Simmons seems to lack patience and often has an attitude. The only example that Staff Conrad could provide regarding Staff Simmons yelling at residents is staff Simmons yelling to Resident A from down the hall telling Resident A to come to her.

<b>APPLICABLE RULE</b>	
<b>R 400.14308</b>	<b>Resident behavior interventions prohibitions.</b>
	<b>(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> <b>(f) Subject a resident to any of the following:</b> <b>(i) Mental or emotional cruelty.</b> <b>(ii) Verbal abuse.</b> <b>(iii) Derogatory remarks about the resident or members of his or her family.</b> <b>(iv) Threats.</b>



<b>ANALYSIS:</b>	Staff person, Rayshele Simmons, denies that she yells at or is mean toward any residents. Six different staff persons were asked about these allegations and 3 of them stated that they have not witnessed staff Simmons yell at or be mean to any residents. The other 3 staff claim that staff Simmons does yell but could not provide any specific examples as to what staff Simmons has yelled to a resident that would rise to the level considered to be mental or emotional cruelty, verbal abuse, or disrespect. All 5 residents of this home are non-verbal and cannot speak to if this is an issue. There was insufficient evidence found to support the allegation that staff person, Rayshele Simmons, is yelling at and/or being mean to the residents of this home.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

On 8/17/23, an exit conference was held with administrator, Will Paige. He was informed as to the outcome of this investigation and that a written corrective action plan is required.

**IV. RECOMMENDATION**

Upon receipt of an approved written corrective action plan, it is recommended that the status of this home's home remain unchanged.

*Christopher A. Holvey*

8/18/2023

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Christopher Holvey  
Licensing Consultant

\_\_\_\_\_  
Date

Approved By:

*Mary Holton*

8/18/2023

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Mary E Holton  
Area Manager

\_\_\_\_\_  
Date