



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

October 6, 2023

Janet Patterson  
Pathways to Self Determination, LLC  
Suite 102  
28237 Orchard Lake Rd.  
Farmington Hills, MI 48334

RE: License #: AS630339657  
Investigation #: 2023A0612036  
Saginaw Center

Dear Ms. Patterson:

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 "Johnna Cade". The signature is written in black ink and is positioned below the word "Sincerely,".

Johnna Cade, Licensing Consultant  
Cadillac Place  
3026 W. Grand Blvd. Ste 9-100  
Detroit, MI 48202  
Phone: 248-302-2409

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
 BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
 SPECIAL INVESTIGATION REPORT  
 THIS REPORT CONTAINS QUOTED PROFANITY**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630339657
<b>Investigation #:</b>	2023A0612036
<b>Complaint Receipt Date:</b>	09/08/2023
<b>Investigation Initiation Date:</b>	09/11/2023
<b>Report Due Date:</b>	11/07/2023
<b>Licensee Name:</b>	Pathways to Self Determination, LLC
<b>Licensee Address:</b>	Suite 102 - 28237 Orchard Lake Rd. Farmington Hills, MI 48334
<b>Licensee Telephone #:</b>	(248) 723-7152
<b>Administrator:</b>	Janet Patterson
<b>Licensee Designee:</b>	Janet Patterson
<b>Name of Facility:</b>	Saginaw Center
<b>Facility Address:</b>	312 Saginaw Pontiac, MI 48340
<b>Facility Telephone #:</b>	(248) 723-7152
<b>Original Issuance Date:</b>	11/21/2014
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	02/03/2022
<b>Expiration Date:</b>	02/02/2024
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL; AGED TRAUMATICALLY BRAIN INJURED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Resident A has been forcing Resident B and Resident C to give him "blow jobs" in exchange for soda, cigarettes, and coffee.	Yes
Additional Findings	Yes

**III. METHODOLOGY**

09/08/2023	Special Investigation Intake 2023A0612036
09/11/2023	APS Referral Referral received from Adult Protective Services (APS). APS denied referral.
09/11/2023	Special Investigation Initiated - Letter I made a referral to Oakland Community Health Network - Office of Recipient Rights via email.
09/19/2023	Inspection Completed On-site I completed an unscheduled onsite investigation. There was no response.
09/20/2023	Contact - Telephone call made Telephone interview completed with Pathways to Self Determination director, Shannon Patterson, and home manager, Laproches Welch.
09/21/2023	Inspection Completed On-site I completed an unscheduled onsite investigation. I interviewed Resident A, Resident B, Resident C, and home manager, Laporches Welch.
09/21/2023	APS Referral I made a referral to APS. The referral was denied. The allegation was referred to the Oakland County Sheriff's Department.
09/21/2023	Contact - Document Received During the onsite inspection, I received a copy of Resident C's Appointment Record dated 09/06/23.

09/25/2023	Contact - Document Received Resident A, Resident B, and Resident C's Individual Plan of Service (IPOS).
09/28/2023	Exit Conference I held an exit conference with licensee, Janet Patterson via telephone.

**ALLEGATION:**

**Resident A has been forcing Resident B and Resident C to give him “blow jobs” in exchange for soda, cigarettes, and coffee.**

**INVESTIGATION:**

On 09/11/23, I received a complaint from Adult Protective Service (APS). APS denied the referral. The complaint alleged Resident A has been forcing Resident B and Resident C to give him “Blow jobs” in exchange for soda, cigarettes, and coffee. I initiated my investigation on 09/11/23, with an email to Oakland Community Health Network (OCHN) – Office of Recipient Rights (ORR) to make a referral. OCHN – ORR denied the referral.

On 09/19/23, I completed an unscheduled onsite investigation. I knocked at the front door multiple times, there was no response.

On 09/20/23, I completed a telephone interview with Pathways to Self Determination director, Shannon Patterson. Ms. Patterson stated Resident A has lived in this facility for many years. He has never displayed any inappropriate sexual behaviors. Ms. Patterson stated an internal investigation was conducted. Resident B did not want to talk about the allegation. Resident C admitted to giving Resident A “blow jobs.” Ms. Patterson stated Resident A, Resident B, and Resident C are verbal and can consent to sexual activity. Resident A has a guardian, Resident B and Resident C do not have guardians.

On 09/20/23, I completed a telephone interview with home manager, Laproches Welch. Ms. Welch stated she became the home manager at this facility on August 16, 2023. Since taking over in this position all the previous employees have been terminated or are no longer working at the home. Ms. Welch stated she was told by the old employees that Resident A could act out sexually, but she had never observed this behavior. Ms. Welch stated she was sitting on the front porch with Resident B and Resident C when Resident B disclosed to her that Resident A made her give him “blow jobs.” When Resident B shared this, Resident C who was also present said Resident A makes her give him “blow jobs” too. Ms. Welch stated Resident B and Resident C do not have guardians and they are both verbal. Ms. Welch stated she took Resident C to a scheduled doctor’s appointment on 09/06/23, at which time she had a physical. This appointment was prescheduled and not related to the allegation. During the

appointment, Resident C stated that she engaged in sexual activity however she referred to Resident A as “her man” and did not indicate that she had any concerns about having sexual intercourse with him. Then, when Resident C spoke to Pathways to Self Determination corporate compliance officer, Sonia McKeown Resident C said that Resident A was making her give him “blow jobs” for cigarettes and coffee however, she never received these items in return. Ms. Welch stated since becoming aware of this issue she has increased staffing on all shifts. There are now two staff on each shift. Staff are expected to complete visual checks every 30 minutes. Ms. Welch held a meeting with Resident A, Resident A’s guardian, and Resident A’s supports coordinator to discuss the concern. Resident A’s guardian has also begun taking him home on the weekends.

On 09/21/23, I completed a second unannounced onsite investigation. I interviewed Resident A, Resident B, Resident C, and home manager Laporches Welch. During the onsite investigation I observed the home. This is a two-story home. Resident A, Resident B, and Resident C’s bedrooms are all upstairs next door to one another. The upstairs level of the home does not have any common spaces or sitting area. The upstairs consists of resident bedrooms and a bathroom only. All the bedrooms have locks on the doors. The locks are equipped with non-locking against egress hardware.

On 09/21/23, I interviewed Resident C. Resident C stated Resident A is her housemate, his bedroom is down the hallway from her bedroom. Resident C has been having sexual intercourse with Resident A and giving him “blow jobs.” These activities take place in her bedroom, Resident A’s bedroom, and in Resident B’s bedroom. Resident C estimates that she was having sexual intercourse with Resident A about two times a week. Resident C stated, “she does not really want to have sex with (Resident A) however, she is gullible.” Resident C stated she was having sexual intercourse with Resident A in exchange for cigarettes, money, and to use his cell phone. Resident C explained that Resident A will not give her cigarettes, money, or allow her to use his phone without having sexual intercourse or giving him a “blow job.” Resident C stated she cannot obtain these items for herself and therefore on occasion she has agreed to have sexual contact with Resident A in exchange for these things.

Resident C stated there have been times that she has told Resident A that she does not want to have sex with him, and he has had sexual intercourse with her anyway. Resident C remarked, “I feel like he is forcing me because I don’t want to do it.” Resident C explained at night when the staff are downstairs, Resident A will come into her bedroom because he wants to sleep on her bedroom floor. Resident C does not want Resident A to sleep in her bedroom, but he will stand in her doorway refusing to leave. Resident C has a lock on her bedroom door however, she stated that the lock is broken and therefore cannot be used to keep Resident A out of her bedroom.

Resident C reported she is on birth control. Resident C stated when she has sexual intercourse with Resident A, she does not use condoms because she is allergic to latex. Resident C stated that she is aware that Resident A may also be having sexual contact with Resident B. Resident C reported because of the frequent sexual intercourse with

Resident A she has experienced abnormal vaginal bleeding. Resident C stated she recently had a doctor's appointment with her primary care doctor, and she was tested for human immunodeficiency virus (HIV). She does not know the results of the test. On 09/21/23, I observed the lock on Resident C's bedroom door. The door is equipped with a non-locking against egress lock. The lock was functional.

On 09/21/23, I interviewed Resident B. Resident B stated on multiple occasions she has given Resident A "blow jobs" in exchange for a 2 – liter of pop and/or a pack of cigarettes. Resident B stated she initiates this exchange and has only given Resident B a "blow job" when she asks him to do it. Resident B stated Resident A has never forced her to engage in any form of sexual contact. Resident B remarked, Resident A is nice to look at and gentle. She has no concerns with their sexual relationship.

On 09/21/23, I interviewed Resident A. Resident A was evasive and defensive to questioning. Resident A stated he has lived in this home for eight years. He stated that he has a 20-year-old daughter. Resident A stated that he has had sexual intercourse and received "blow jobs" from women who live in the home. Resident A would not confirm the names of the women he was referring to. Resident A stated that the women are old enough to consent to sexual activity. Resident A stated he had a meeting with his guardian and supports coordinator and since the meeting he is no longer having sexual contact with any of his housemates. Resident A stated he has slept on the floor in Resident C's bedroom. However, he remarked that he has slept in all his housemate's bedrooms not just Resident C's.

On 09/21/23, I completed a second interview with home manager, Laproches Welch. Ms. Welch stated she took Resident C to an appointment with her primary care doctor on 09/06/23. During the appointment, the doctor discontinued a few medications and spoke to her about Ozempic and her Hemoglobin A1C levels. Her next appointment is scheduled on 11/01/23. Ms. Welch stated during the appointment Resident C was not tested for HIV however, she does have transmittable health conditions and cervical cancer (in remission). Ms. Welch provided me with a copy of Resident C's appointment record.

I reviewed Resident C's Appointment Record dated 09/06/23. It indicated Resident C is prediabetic and that Ozempic was discussed.

I reviewed Resident A's Resident B's, and Resident C's CNS Individual Plan of Service:

- Resident B's IPOS dated 07/21/23, in summary indicated staff are to ensure that she is safe around the home, monitoring her whereabouts as needed.
- Resident A's IPOS dated 09/07/23, in summary indicated staff will monitor for any signs/symptoms of agitation, aggression, or sexual behavior.
- Resident C's IPOS dated 07/05/23 in summary indicated Resident C will avoid placing self into risky and dangerous situations. Staff are to provide daily guidance and assistance to appropriately care for self and the living environment, getting along with others, problem-solving concerns and understanding and adhering to physician/health care recommendations.

<b>APPLICABLE RULE</b>	
<b>R 400.14305</b>	<b>Resident protection.</b>
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
<b>ANALYSIS:</b>	<p>Based on the information gathered through my investigation there is sufficient information to conclude that Resident A, Resident B, and Resident C’s personal needs, including protection and safety were not attended to at all times. Resident A’s IPOS states that staff will monitor for any signs of agitation, aggression, or sexual behavior. Resident C’s IPOS indicates that she is at risk of placing herself into risky and dangerous situations. Therefore, staff are to provide daily guidance and assistance. Resident B’s IPOS states staff will ensure her safety around the home.</p> <p>Resident C has been having unprotected sexual intercourse with Resident A and giving him “blow jobs” in exchange for cigarettes, money, and to use his phone. These sexual acts have occurred at the facility while staff are unavailable or otherwise engaged. Although Resident C does not have a guardian, she does not understand the risks and consequences of her behavior and further, she has a health condition that is transmittable, and she does not understand the necessity of informing her sexual partners. Resident C stated that she feels forced to have sexual contact with Resident A. Resident C refers to herself as gullible and stated there have been times when she has told him that she does not want to have sex and he has had sexual intercourse with her anyway.</p> <p>Resident B has also given Resident A “blow jobs” in exchange for pop and cigarettes. Resident B consents to the sexual contact with Resident A however, Resident B is unknowingly placing herself at risk of harm due to Resident C’s transmittable health condition.</p> <p>Residents A, B and C reside in a two-story home. Their bedrooms are upstairs, and next door to one another. When the staff are downstairs, Resident A has come into Resident C’s bedroom and slept on her bedroom floor. Resident C stated that she does not want Resident A to sleep in her bedroom, but he will stand in her doorway refusing to leave.</p>



	As Resident A has a history of aggression and sexual behavior. Resident C is at risk of placing herself into risky and dangerous situations and Resident B requires staff to ensure her safety around the home. It can be concluded that Resident A, Resident B, and Resident C's personal needs, including protection and safety were not attended to at all times.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

During the unscheduled onsite investigation completed on 09/21/23, I observed several maintenance issues in the upstairs bathroom. The following items were broken and in need of repair: The vent in ceiling, the toilet paper holder, there was no cover on the light fixture, and there is a cracked tile on floor in front of the toilet. The blinds throughout the facility are broken.

On 09/28/23, I placed a telephone call to licensee Janet Patterson to conduct an exit conference and review my findings. Ms. Patterson stated Resident C is promiscuous and has a history of making allegations such as this. Resident C fabricates situations to suit herself. In the past, Resident C alleged that a male staff sexually assaulted her. The staff was terminated. Ms. Patterson has concern that this is an ongoing issue. Ms. Patterson expressed concern that initially Resident C said that Resident A was her boyfriend then later changed her story to allege that the sexual contact was not consensual. Ms. Patterson stated staff complete routine visual checks on residents throughout the evening. Ms. Patterson stated that she would like to provide copies of the documentation that is completed by staff. Ms. Patterson acknowledged that staff do not always complete thorough and/or accurate documentation. Ms. Patterson explained during visual checks staff do not look to see if the resident is breathing because these residents do not have serious physical health concerns. Staff observe if the resident is in their bedroom. If Resident A was sleeping in Resident C's bedroom, he could have been hiding on the floor, not visible to staff during the check. Ms. Patterson discussed the importance of honoring resident's rights while also keeping them safe. She acknowledged that although Resident B is consenting to sexual contact with Resident A she is unknowingly placing herself at risk of harm due to Resident C's transmittable health condition. Ms. Patterson and I discussed the importance of working with Resident C's supports coordinator to educate her on safe sex practices and the importance of communicating her medical conditions to sexual partners. Ms. Patterson and I discussed if it was appropriate for Resident A and/or Resident B to continue living in a co-ed home. Ms. Patterson stated Resident C may benefit from an all-female home. However, it is unknown if the issue would be resolved in that setting. Ms. Patterson reported she is aware of the maintenance issues at the facility, and they have been repaired.

As of 10/03/23 Ms. Patterson has not provided the documentation detailing staff's routine visual checks.

<b>APPLICABLE RULE</b>	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	<b>(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.</b>
<b>ANALYSIS:</b>	Based on my observation during an unscheduled onsite investigation completed on 09/21/23, there is sufficient information to conclude that the home furnishings were not comfortable, clean, and orderly. In the upstairs bathroom the vent in ceiling was broken, the toilet paper holder was broken, there was no cover on the light fixture, and there was a cracked tile on floor in front of the toilet. The blinds throughout the facility were also broken.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

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



10/03/2023

Johnna Cade  
Licensing Consultant

Date

Approved By:



10/06/2023

Denise Y. Nunn  
Area Manager

Date