



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

September 15, 2023

Charles Cryderman
Haven Adult Foster Care Limited
73600 Church Road
Armada, MI 48005

RE: License #: AL500066534
Investigation #: 2023A0617027
Haven Adult Foster Care Home

Dear Mr. Cryderman:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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.

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 grey ink, appearing to be 'EJ' with a stylized flourish.

Eric Johnson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202

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

I. IDENTIFYING INFORMATION

License #:	AL500066534
Investigation #:	2023A0617027
Complaint Receipt Date:	05/15/2023
Investigation Initiation Date:	05/19/2023
Report Due Date:	07/14/2023
Licensee Name:	Haven Adult Foster Care Limited
Licensee Address:	73600 Church Road Armada, MI 48005
Licensee Telephone #:	(586) 784-8890
Administrator:	Charles Cryderman
Licensee Designee:	Charles Cryderman
Name of Facility:	Haven Adult Foster Care Home
Facility Address:	58483 Pasco New Haven, MI 48048
Facility Telephone #:	(586) 749-3822
Original Issuance Date:	07/11/1995
License Status:	1ST PROVISIONAL
Effective Date:	05/02/2023
Expiration Date:	11/01/2023
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL; AGED

II. ALLEGATION(S)

	Violation Established?
There are bedbugs in the facility and Resident A has many bites.	Yes

III. METHODOLOGY

05/15/2023	Special Investigation Intake 2023A0617027
05/15/2023	APS Referral Adult Protective Services (APS) referral received - denied
05/19/2023	Special Investigation Initiated - Face to Face Conducted an unannounced onsite investigation,
05/19/2023	Inspection Completed On-site I conducted an unannounced investigation of the Haven Adult Foster Care Home. I interviewed staff Mary Gill, staff Marilyn Clark, Resident A, Resident B, Resident C and Licensee Chuck Cryderman.
05/19/2023	Contact - Telephone call received Stacey Conn via telephone
05/23/2023	Contact - Document Received I received and reviewed progress notes from Orkin Pest control.
05/27/2023	Contact - Document Received Email rec from Mr. Cryderman
06/07/2023	Contact - Document Received Email rec from Mr. Cryderman
06/07/2023	Contact - Face to Face I interviewed Mr. Cryderman at the facility.
06/12/2023	Contact - Telephone call made I conducted an interview with Ms. Laura Smith, Resident A's guardian.

06/12/2023	Contact - Telephone call made I spoke with Angela (last name not provided) from St. Joseph Manor, where Resident A is now residing.
06/12/2023	Contact - Telephone call made I interviewed Suzanne Kotulla of Midwest Center for Dermatology.
07/06/2023	Contact - Document Received I received and reviewed the medical notes from Midwest Center for Dermatology.
07/14/2023	Exit Conference I conducted an exit conference with Licensee Designee Charles Cryderman to discuss the findings of this report

ALLEGATION:

There are bedbugs in the facility and Resident A has many bites.

INVESTIGATION:

On 05/15/23, I received a complaint regarding the New Haven Adult Foster Home. The complaint stated, Resident A is diagnosed with Leukemia, high blood pressure, memory loss, high cholesterol, and bipolar disorder. Resident A is prescribed medications, but it is unknown if he is taking them. Resident A has not seen a doctor. Resident A looks like he is in a concentration camp. It is unknown what Resident A's current appearance is. The AFC home transports Resident A when they feel like it. There are bedbugs in the mattresses and on the furniture.

On 05/19/23, I conducted an unannounced investigation of the Haven Adult Foster Care Home. I interviewed staff Mary Gill, staff Marilyn Clark, Resident A, Resident B, Resident C and Licensee Chuck Cryderman.

During the onsite investigation I interviewed Ms. Gill and Ms. Clark. Both Ms. Gill and Ms. Clark stated that the facility no longer has bed bugs. Ms. Gill stated that the facility is still using the pest control services of Orkin, and they were at the facility earlier in the day; Orkin sprayed the first floor of the facility for bed bugs. According to Ms. Gill, when residents return to the facility from being out of the home, they are forced to shower immediately, and their clothing are checked for bed bugs.

During the onsite investigation, Resident A stated his bed is infested with bedbugs. Resident A stated that he has bites over his entire body, and he is in pain from scratches he is sustaining from scratching the bites. Resident A stated that his bed and mattress is full of live bugs. Resident A stated that he has had two new mattresses in recent months, but they all have bedbugs. He has asked staff to take him to get medical attention due to the bites, but staff refuses and just administers cream/ointment.

According to Resident A, the facility has had a nurse check him out but the cream she prescribed is not working and he is still in pain and discomfort. Resident A stated that Orkin was out today and sprayed the home, but it is not working. According to Resident A, he was in so much pain and discomfort that he once called EMS for help but when they arrived, they told him they did not have anything to treat the bedbug bites and he should go to an urgent care. Resident A stated that the facility has denied him the opportunity to see an actual doctor. I observed (pictures taken) of Resident A's upper body including his stomach, chest, back, arm, hands and neck to be covered with what appears to be bug bites or rash. Resident A also had bites/ rash on both of his legs. I observed both live and dead bed bugs on Resident A's bedding and mattress. Resident A stated that he takes his medication regularly and has no issues with the facility administering his medications timely. Resident A stated that on a scale of 1-10 with 10 being the strongest; his pain and discomfort at the present moment is a 8.

During the onsite investigation I interviewed Resident A's roommate, Resident B. According to Resident B, the facility continues to have bedbugs. He has seen bedbugs in his room as recently as three days ago. Orkin was out today and sprayed the lower level of the facility. Resident B does not have any current bites.

During the onsite investigation I interviewed Resident C. According to Resident C, the facility bedbugs issue has gotten better as of recent. Resident C stated that he mainly sees the bedbugs in the first level of the home. He hasn't seen them in his room in a while. I observed both live and dead bed bugs on Resident C's bedding and mattress during onsite investigation.

During the onsite investigation, I interviewed nurse practitioner Stacey Conn via telephone. According to Ms. Conn, she is a nurse practitioner, and she has seen and treated Resident A since he has arrived at the facility. Ms. Conn stated that since Resident A arrived at the facility he has complained of complications with a rash. Ms. Conn has treated Resident A for his rash, and it is getting extremely better. According to Ms. Conn, Resident A scratches the rash and that causes it to spread and become irritated. Ms. Conn stated that Resident A's rash does not look like bedbug bites and has diagnosed him with contact dermatitis. She has prescribed Resident A with the medication Prednisone, Triamcinolone cream, and Hydrocortisone cream. According to Ms. Conn, due to Resident A's rash improving, he changed the medication order from twice daily to as needed. Ms. Conn stated that she gave the change order verbally and not written. Ms. Conn stated that she completed an in-person evaluation of Resident A about 10 days ago. Ms. Conn stated that she will make Resident A an appointment with the dermatologist.

During the onsite investigation, I completed a medication review for Resident A. I observed that Resident A's file did not have an order changing the medication Triamcinolone cream from twice daily to as needed. I also observed Resident A's medication Fluoxetine Tab 60mg, which is prescribed to take one tablet by mouth once daily, was not signed in the medication log for the dates 05/01/23-05/19/23.

On 05/23/23, I received and reviewed progress notes from Orkin Pest control. According to the report dated 3/17/23, the Orkin exterminator believes that they need to do something different, as the report states, "need to come up with a new gameplan".

On 06/07/23, I interviewed Mr. Cryderman onsite at the facility. Mr. Cryderman notified me that the Resident A was scheduled to see a dermatologist on June 1st, but he is no longer a member of the facility. According to Mr. Cryderman, Resident A was discharged on 5/27/23, prior to the appointment. Mr. Cryderman stated that he made sure that the resident's guardian was aware of the appointment, but he is unaware if the appointment was kept. Mr. Cryderman stated that the bedbug issue has gotten better. Mr. Cryderman stated that they got rid of all of the upholstered furniture because it is believed the bedbugs were hiding in there. I did not observe any bedbugs live or dead during the onsite investigation.

On 06/12/23, I conducted an interview with Ms. Laura Smith, Resident A's guardian. According to Ms. Smith, there had been a plan in place to move Resident A to a facility closer to his wife. However, Mr. Cryderman contacted her on 05/22/23 to get an update on the status of Resident A's discharge as he stated it was urgent that the resident be moved. Resident A was moved on 05/26/23 to St. Joseph Manor. Ms. Smith stated that Mr. Cryderman did not provide her with the information for Resident A's dermatology appointment.

On 06/12/23, I spoke with Angela (last name not provided) from St. Joseph Manor, where Resident A is now residing. According to Resident A's new facility, the facility was provided with the dermatology appointment, but Resident A missed the appointment on 06/01/23 due to transportation issues, but it was rescheduled for 06/06/23. The diagnosis of the examination is unknown according to the new facility, but he was prescribed a cream and has a follow up appointment on 06/20/23.

On 06/27/23, I interviewed Suzanne Kotulla of Midwest Center for Dermatology. According to Ms. Kotulla, Resident A was seen on 06/06/23 and 06/20/23. Resident A was diagnosed with contact dermatitis due to poison ivy eczema and not bed bug bites.

On 07/06/23, I received and reviewed the medical notes from Midwest Center for Dermatology. According to the documents, Resident A was seen for a complaint of rash located on the arms, legs, and trunk. The rash is itchy and mild in severity. The rash has been present for months, and he is currently prescribed Triamcinolone. Resident A was previously residing in a facility with bed bugs and the rash has been active since October 2022. Resident was seen for further evaluation and management. According to the documents, Resident A was diagnosed with contact dermatitis due to poison ivy eczema and not bed bug bites.

On 07/14/23, I conducted an exit conference with Licensee Designee Charles Cryderman to discuss the findings of this report. Mr. Cryderman stated he will review the report and contact me if needed.

APPLICABLE RULE	
R 400.15305	Resident protection.
	(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.
ANALYSIS:	<p>Residents have experienced bug bites. During my investigation 05/19/23, I observe both live and dead bed bugs in the resident's rooms. During the onsite investigation on 05/19/23, Resident A stated that he asked staff to take him to get medical attention due to the bites, but staff refuses and just administers cream/ointment. According to Resident A, the facility has had a nurse check him out but the cream she prescribed is not working and he is still in pain and discomfort. According to Mr. Cryderman, Resident A does not have bedbug bites and he has been seen and treated by nurse practitioner Stacey Conn. According to Mr. Cryderman, Resident A has not been seen by any other medical professional other than Ms. Conn.</p> <p>Ms. Conn stated that Resident A's rash does not look like bedbug bites and has diagnosed him with contact dermatitis. She has prescribed Resident A with the medication Prednisone, Triamcinolone cream, and Hydrocortisone cream. During the onsite investigation on 05/19/23, I observed Resident B's upper body including his stomach, chest, back, arm, hands and neck to be cover with what appears to be bug bites or a rash. Resident A also had bites/rash on both of his legs. I observed both live and dead bed bugs on Resident A's bedding and mattress.</p> <p>I interviewed Suzanne Kotulla of Midwest Center for Dermatology. According to Ms. Kotulla, Resident A was seen on 06/06/23 and 06/20/23. Resident A was diagnosed with contact dermatitis due to poison ivy eczema and not bed bug bites.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.15401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.
ANALYSIS:	<p>Residents stated that there have been issues and sighting of bed bugs in the home. Residents have experienced bug bites. During the onsite investigation, Resident A stated that he has bites over his entire body, and he is in pain from scratches he is sustaining from scratching the bites. Resident A stated that his bed and mattress is full of bugs.</p> <p>During my onsite investigation on 05/19/23, I observe both live and dead bed bugs in the residents' rooms. According to Mr. Cryderman, the facility has utilized the assistance of a professional pest control program through Orkin pest control. I received and reviewed progress notes from Orkin Pest control.</p> <p>On 06/07/23, Mr. Cryderman stated that the bedbug issue has gotten better. Mr. Cryderman stated that they got rid of all of the upholstered furniture because it is believed the bedbugs were hiding in there. I did not observe any bedbugs live or dead during the onsite investigation.</p>
CONCLUSION:	REPEAT VIOLATION ESTABLISHED (BUT CORRECTED) Reference Special Investigation #2023A0617005 dated 01/12/23 and CAP dated 01/18/23

APPLICABLE RULE	
R 400.14312	Resident medications.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
ANALYSIS:	<p>During the onsite investigation, I completed a medication review for Resident A. I observed that Resident A's file did not have an order changing the medication Triamcinolone cream from twice daily to as needed. I also observed Resident A's medication Fluoxetine Tab 60mg, which is prescribed to take one tablet by mouth once daily, was not signed in the medication log for the dates 05/01/23-05/19/23.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

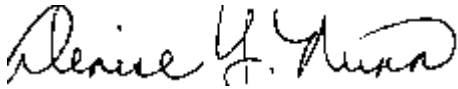


07/12/23

Eric Johnson
Licensing Consultant

Date

Approved By:



09/15/2023

Denise Y. Nunn
Area Manager

Date