



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

December 19, 2023

Holly Heath
Community Opportunity Center NPHC
14147 Farmington Rd
Livonia, MI 48154

RE: License #: AL820007573
Investigation #: 2024A0575006
Livonia Opportunity House

Dear Ms. Heath:

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 (517) 284-9720.

Sincerely,

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

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

I. IDENTIFYING INFORMATION

License #:	AL820007573
Investigation #:	2024A0575006
Complaint Receipt Date:	12/13/2023
Investigation Initiation Date:	12/13/2023
Report Due Date:	01/12/2024
Licensee Name:	Community Opportunity Center NPHC
Licensee Address:	14147 Farmington Road Livonia, MI 48154
Licensee Telephone #:	(734) 838-0536
Administrator:	Holly Heath, Designee
Licensee Designee:	Holly Heath, Designee
Name of Facility:	Livonia Opportunity House
Facility Address:	31230 Lyndon Livonia, MI 48154
Facility Telephone #:	(734) 422-1020
Original Issuance Date:	08/15/1980
License Status:	REGULAR
Effective Date:	10/04/2023
Expiration Date:	10/03/2025
Capacity:	16
Program Type:	DEVELOPMENTALLY DISABLED

II. ALLEGATION(S)

	Violation Established?
Direct care staff Renee Ballinger called Resident A “retarded.”	Yes

III. METHODOLOGY

12/13/2023	Special Investigation Intake-2024A0575006
12/13/2023	APS Referral
12/13/2023	Referral - Recipient Rights
12/13/2023	Special Investigation Initiated – Telephone-home manager-Corielle Duley
12/14/2023	Inspection Completed On-site-interviews with (a) Residents A and B; (b) Nicole McCain-facility cook; (c) home manager-Corielle Duley
12/14/2023	Contact - Telephone call made-(a) direct care staff-Renee Ballinger; (b) Resident A’s guardian-Ginger Bradfield
12/14/2023	Exit Conference with licensee designee-Holly Heath

ALLEGATION:

Direct care staff Renee Ballinger called Resident A “retarded.”

INVESTIGATION:

APS and ORR referrals were made/received.

On 12/14/2023, I interviewed Resident A who stated that direct care staff Renee Ballinger called him “retarded” around lunchtime. Resident A stated Resident B and the facility cook were present and heard what staff Renee Bradfield said to him.

On 12/14/2023, I interviewed Resident B who corroborated Resident A’s allegation.

On 12/14/2023, I interviewed the facility cook, Nicole McCain. She stated she was walking out of the room and did not hear what was alleged to have been said.

On 12/14/2023, I called direct care staff Renee Ballinger. She stated she no longer works at Livonia Opportunity House, she did not know about the complaint, and she denied calling Resident A “retarded.”

On 12/14/2023, I called Resident A’s guardian from Faith Connections, Ginger Bradfield. She stated she knew about the incident and was satisfied with Resident A’s placement.

On 12/14/2023, I conducted an exit conference with the licensee designee, Holly Heath. I explained to her I was substantiating the allegations and would need a plan of correction. She stated she agreed with my conclusion and has already terminated direct care staff Renee Ballinger’s employment.

APPLICABLE RULE	
R 400.15308	Resident behavior interventions prohibitions.
	(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: (f) Subject a resident to any of the following: (ii) Verbal abuse.
ANALYSIS:	Since Resident A and Resident B were both believed to be credible, and staff Renee Ballinger was not believed to be credible, then there is a preponderance of evidence that direct care staff Renee Ballinger subjected Resident A to verbal abuse when she called him “retarded”.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon submission of an acceptable plan of correction; I recommend no changes in the status of the license.



Jeffrey J. Bozsik
Licensing Consultant

Date: 12/18/23

Approved By:



Ardra Hunter
Area Manager

Date: 12/19/23