



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

January 31, 2024

Laura Hopkins
Hopkins AFC Homes, Inc.
PO Box 728
Ewart, MI 49631

RE: License #: AS670263222
Investigation #: 2024A0360011
Hopkins #US10

Dear Laura Hopkins:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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 (866) 865-0006.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matthew Soderquist".

Matthew Soderquist, Licensing Consultant
Bureau of Community and Health Systems
Ste 3
931 S Otsego Ave
Gaylord, MI 49735
(989) 370-8320

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS670263222
Investigation #:	2024A0360011
Complaint Receipt Date:	01/16/2024
Investigation Initiation Date:	01/17/2024
Report Due Date:	02/15/2024
Licensee Name:	Hopkins AFC Homes, Inc.
Licensee Address:	1375 Chaput Sears, MI 49679
Licensee Telephone #:	(231) 734-5936
Administrator:	Robert Hopkins
Licensee Designee:	Laura Hopkins
Name of Facility:	Hopkins #US10
Facility Address:	12377 US Highway 10 Ewart, MI 49631
Facility Telephone #:	(231) 734-2607
Original Issuance Date:	12/02/2005
License Status:	REGULAR
Effective Date:	04/07/2023
Expiration Date:	04/06/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Residents are missing appointments due to a lack of staff.	No

III. METHODOLOGY

01/16/2024	Special Investigation Intake 2024A0360011
01/17/2024	Special Investigation Initiated - On Site
01/17/2024	Inspection Completed On-site DCS Monique Shephard, Resident A, B, C, D and E.
01/19/2024	Contact - Telephone call received CMH ORR Sarah Watson, CMH Caseworker Melissa Emmorey
01/19/2024	Contact - Telephone call received Licensee Laura Hopkins and CMH ORR Sarah Watson
01/30/2024	APS Referral online
01/31/2024	Exit Conference With Laura Hopkins

ALLEGATION: Residents are missing appointments due to a lack of staff.

INVESTIGATION: On 1/16/2024 I was assigned a complaint from the LARA online complaint system.

On 1/17/2024 I conducted an unannounced onsite inspection at the facility. Direct care staff Monique Shepherd stated she was the only staff working today. She stated they typically have two staff during the day on Sunday, Monday, and Tuesday. She stated they have one staff during the day on Wednesday, Thursday, Friday, and Saturday. She stated if the residents have any medical appointments, they try to have them scheduled on Monday and Tuesday when there are two staff. She stated she is not aware of any missed medical appointments. She stated there is an optional group at community mental health on Wednesdays that Resident A and Resident B attend but it was not required. She stated if the residents have any appointments outside of Monday and Tuesday, they bring an extra staff person in for that appointment. I then reviewed the written assessment plans and individual plans of service for all five residents in the home. None of the plans indicated that two staff

are required in the home at all times. Resident A and Resident B's plans did not reference the optional CMH group on Wednesdays.

While at the home on 1/17/2024 I interviewed Residents A, B, C, D and E. All five residents denied that they had missed any medical appointments due to only having one staff in the home. They all stated there was adequate supervision and all of their needs were attended to at all times. Resident A and B both stated they did not have any interest in attending the optional Wednesday group at CMH.

On 1/19/2024 I interviewed Central Michigan Community Mental Health caseworker Melissa Emmorey with recipient rights officer Sarah Watson. Ms. Emmorey stated she is the caseworker for all five residents in the home. She stated there is nothing in any of the resident plans of service that indicate there must be two staff in the home at all times. She stated she is not aware of any residents missing any appointments other than Resident A and B not attending the optional Wednesday wellness management group.

On 1/19/2024 I interviewed the licensee designee Laura Hopkins with recipient rights officer Sarah Watson. Ms. Hopkins stated she schedules her staff in 12 hour shifts from 8 am to 8 pm and 8pm to 8am. She stated she has one person on shift during the overnight hours. She stated she has two staff on Sunday, Monday and Tuesday. She stated she has one person on shift during the day Wednesday, Thursday, Friday and Saturday. She stated there is nothing in the resident plans that require two staff members at all times. She stated she is not aware of any missed appointments due to a lack of staffing. She stated she is in the process of closing another AFC home and will be using those staff at this home to have two staff 24 hours a day.

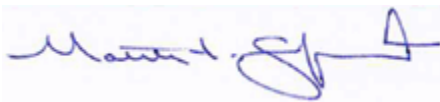
APPLICABLE RULE	
R 400.14206	Staffing requirements.
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.
ANALYSIS:	<p>The complaint alleged that residents are missing appointments due to a lack of staff.</p> <p>Residents A, B, C, D and E all denied missing any appointments due to a lack of staff.</p> <p>Direct care staff Monique Shepherd and licensee designee Laura Hopkins both denied that any of the residents have missed appointments due to a lack of staff.</p>

	<p>CMH caseworker Melissa Emmorey stated none of the residents have missed any appointments except for Resident A and B missing an optional CMH group on Wednesday which is not outlined in their plan of service or written assessment.</p> <p>All five resident written assessment plans and individual plans of service did not indicate that two staff are required at all times. Resident A and B's written assessment plan and individual plan of service does not indicate that the Wednesday CMH group was required for them to attend.</p> <p>There is not a preponderance of evidence that there is not sufficient staff on duty at all times for the supervision, personal care, and protection of residents.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 01/31/2024 I conducted an exit conference with licensee designee Laura Hopkins. Ms. Hopkins concurred with the findings of the investigation.

IV. RECOMMENDATION

I recommend no change in the status of the license.



01/31/2024

Matthew Soderquist
Licensing Consultant

Date

Approved By:



01/31/2024

Jerry Hendrick
Area Manager

Date