



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

March 1, 2024

JoAnn and Edward Kreh
317 N. 8th St.
Breckenridge, MI 48615

RE: License #: AM290247447
Investigation #: 2024A1029026
Hearts Content

Dear JoAnn and Edward Kreh:

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 (231) 922-5309.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Browning". The script is cursive and fluid.

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
Browningj1@michigan.gov - (989) 444-9614

enclosure

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

I. IDENTIFYING INFORMATION

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|---------------------------------------|--|
| License #: | AM290247447 |
| Investigation #: | 2024A1029026 |
| Complaint Receipt Date: | 01/24/2024 |
| Investigation Initiation Date: | 01/25/2024 |
| Report Due Date: | 03/24/2024 |
| Licensee Name: | JoAnn and Edward Kreh |
| Licensee Address: | 317 N. 8th St., Breckenridge, MI 48615 |
| Licensee Telephone #: | (989) 842-1818 |
| Administrator: | Edward Kreh |
| Licensee Designee: | Edward Kreh |
| Name of Facility: | Hearts Content |
| Facility Address: | 317 N. Eighth Street, Breckenridge, MI 48615 |
| Facility Telephone #: | (989) 842-1818 |
| Original Issuance Date: | 10/22/2003 |
| License Status: | REGULAR |
| Effective Date: | 08/05/2022 |
| Expiration Date: | 08/04/2024 |
| Capacity: | 12 |
| Program Type: | PHYSICALLY HANDICAPPED AGED ALZHEIMERS |

II. ALLEGATION(S)

| | Violation Established? |
|--|-------------------------------|
| Direct care staff members are administering medications to residents without being trained in medication administration. | Yes |
| Licensee designee Edward Kreh does not dispose of medications after a resident no longer requires the medication. | Yes |
| Additional Findings | Yes |

III. METHODOLOGY

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|------------|---|
| 01/24/2024 | Special Investigation Intake 2024A1029026 |
| 01/24/2024 | APS Referral - No concerns of abuse or neglect |
| 01/25/2024 | Inspection completed – on-site - Special Investigation Initiated - Face to Face with Licensee designee Edward Kreh, Shelly Sumner, Sally Ferver at Hearts Content |
| 02/03/2024 | Contact - Document Received - Email from Edward Kreh |
| 02/28/2024 | Contact - Telephone call made to direct care staff members Makayla Brown and Jessa Booker |
| 03/01/2024 | Exit conference with licensee designee, Edward Kreh |

ALLEGATION: Direct care staff members are administering medications to residents without being trained in medication administration.

INVESTIGATION:

On January 24, 2024 complaint was received via the Bureau of Community and Health Systems online complaint system with concerns direct care staff members are not trained to administer medications at Hearts Content.

On January 25, 2024 I completed an unannounced on-site investigation and interviewed licensee designee Edward Kreh at Hearts Content. Mr. Kreh stated he has seven direct care staff members who currently work at Hearts Content. Mr. Kreh stated the only people who have been trained to administer resident medications is Shelly Sumner and himself. Mr. Kreh stated they both administer medications by preparing the medications and then give the resident medications to another direct care staff member to administer to individual resident’s medications. Mr. Kreh stated these direct care staff members delivering and ultimately administering the medications to residents have not been

trained to administer medications. Mr. Kreh stated he has been administering medications this way for a long time this way. Mr. Kreh stated all training is done by Ms. Sumner or himself.

During the on-site investigation, I reviewed the employee records for the seven staff and only found medication administration training in Shelly Sumner's employee record and not the other six employees.

On January 25, 2024 I interviewed direct care staff member Shelly Sumner. Ms. Sumner stated she is working on the training and has started to train Ms. Ferver to administer medications. Ms. Sumner stated only she and Mr. Kreh administer the medications to the residents. Ms. Sumner stated they do this by getting the medications ready and then give them to another direct care staff member who will then pass the medications to the residents however neither Ms. Sumner nor Mr. Kreh do not watch direct care staff members administer the medications to the resident.

I reviewed the medication administration record (MAR) for the last three months and Ms. Sumner and Mr. Kreh were the only people who signed indicating a medication was administered.

On January 25, 2024, I interviewed direct care staff member Sally Ferver. Ms. Ferver stated most of the direct care staff members hired have worked in an adult foster care in the past and know what to do already. Ms. Ferver stated she has not had medication administration training but she knows what to do because she was assistant manager of another home for 5 years. Ms. Ferver confirmed she does administer medications but Ms. Sumner or Mr. Kreh will inform her how many are in the cup and to which resident to administer them. Ms. Ferver stated no one watches her give the medications to the residents.

On January 25, 2024, I interviewed Resident A, Resident B, Resident C, and Resident D. None of the residents had any concerns regarding the medications and they were not aware of any times they received the wrong medications. All the residents interviewed confirmed they receive their medications from a variety of direct care staff members, but Resident D stated it is mostly Ms. Sumner who administers her medications. Resident D stated when that does not occur, Ms. Sumner or Mr. Kreh prepares the medications and another direct care staff member brings it to her.

On February 28, 2024, I interviewed direct care staff member Makayla Brown. She has been working there a little over a year and stated she did not receive training to administer medications when she started. Ms. Brown stated Mr. Kreh has been training her to administer medications now. Ms. Brown stated she has been administering medications that he or Ms. Sumner has prepared in the past and then they give the medications to her to administer to the residents.

On February 28, 2024, I interviewed direct care staff member Jessa Booker. She is an employee of Hearts Content and she has been working there since Mid-September

2023. Ms. Booker stated she attended “the basic training” and she feels like they “left her hanging on a lot.” Ms. Booker stated she was not trained on medication administration but she had been passing medications the whole time up until last month. Ms. Booker stated she has still not received the training and she does not know if there is a plan to provide her with this training. Ms. Booker stated she did not prepare the medications but she delivered and administered the medications to each resident.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.14312 | Resident medications. |
| | (4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (a) Be trained in the proper handling and administration of medication. |
| ANALYSIS: | Based on interviews with licensee designee Mr. Kreh, direct care staff members Ms. Sumner, Ms. Felver, Ms. Brown, and Ms. Booker there is evidence direct care staff members were administering medications without being trained to do so. Despite not having the training Mr. Kreh and Ms. Sumner handed the medications they prepared to the other direct care staff members and had them administer the medications to the residents without watching this interaction to ensure it was administered the to the right resident. |
| CONCLUSION: | VIOLATION ESTABLISHED |

ALLEGATION: Licensee designee Edward Kreh does not dispose of medications after a resident no longer requires the medication.

INVESTIGATION:

On January 24, 2024 complaint was received via the Bureau of Community and Health Systems online complaint system with concerns the medications are not disposed of properly once they are no longer needed at Hearts Content.

On January 25, 2024 I completed an unannounced on-site investigation and interviewed licensee designee Edward Kreh at Hearts Content. Mr. Kreh stated he would dispose of the medications when a resident passes away or sometimes he will have the Hospice nurse dispose of them. Mr. Kreh stated there were some medications he has not had a chance to expose. Mr. Kreh showed me his desk drawers which did not include medications however, he opened a locked filing cabinet which had several medications located within. According to the resident registrar, the names listed on those residents’ medications no longer resided at Hearts Content or had since passed away after living at Hearts Content.

On January 25, 2024 I interviewed direct care staff member Shelly Sumner. Ms. Sumner stated she has helped to dispose of medications in the past but if they are in small batches the local police department will take them and they will dispose of them or sometimes they will put them in coffee grounds and dispose of them in that way. Ms. Sumner stated there are medications in the office for residents who have passed away or no longer reside at the facility. Ms. Sumner stated she has no idea why these have not been disposed. Ms. Sumner stated all current medications are in the medication cart. Ms. Sumner stated sometimes if an extra prescription comes in for someone, she will lock it in the filing cabinet in order to not overload the medication cart. Ms. Sumner stated there is another black file cabinet in the office that has medications from people who have passed away. In the filing cabinet I found the following residents' medications:

- Resident E had Acetaminophen which were dated which were dated from August 2023, Nystatin from March 2022 (with directions to discard after March 2, 2023),
- Resident F passed away November 18, 2023 however there was Acetaminophen dated from May 2023.
- Resident G had since moved to a relative's home but there was Oxycodone from April 17, 2023 in the file cabinet. Ms. Sumner stated she did not know why it was not sent to the relative's home when he moved.
- Resident H had Divalproex, Lisinopril, Metformin, and Sertraline dated from June 2023.

On January 25, 2024, I interviewed direct care staff member Sally Ferver. Ms. Ferver stated she does not go into the old medications and does not know where they are kept but she would assume once someone passes they are disposed.

On February 28, 2024, I interviewed direct care staff member Jessa Booker. Ms. Booker stated Resident F passed away in November 2023, however, she went into the refrigerator in Mr. Kreh's office to get another resident's insulin and Resident F's morphine was still there. Ms. Booker stated she did not recall the date she observed this but it was at least two months after Resident F had passed. Ms. Booker stated she does not go into the other drawer so she does not know if there are other medications that are stored in the office. Ms. Booker stated the morphine in the refrigerator caught her attention because it was a narcotic.

On February 28, 2024, I interviewed direct care staff member Makayla Brown. Ms. Brown stated she does not know what happens to medications when they are no longer needed. Ms. Brown does not know if the medications are disposed of when someone passes. Ms. Brown stated she has never observed medications from another resident but most of the time Mr. Kreh or Ms. Sumner is setting the medications so she does not go into the medication cabinet.

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| APPLICABLE RULE | |
| R 400.14312 | Resident medications. |
| | (7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist. |
| ANALYSIS: | Based on interviews with licensee designee Edward Kreh and direct care staff members Ms. Kreh, Ms. Booker, and Ms. Brown there is evidence showing the medications are not being disposed timely after the medication is no longer required. During the on-site investigation, I observed several blister packs of medications for residents who had either moved out of Hearts Content or were deceased after living at Hearts Content. |
| CONCLUSION: | VIOLATION ESTABLISHED |

ADDITIONAL FINDING:

INVESTIGATION:

On January 25, 2024 I interviewed direct care staff member Shelly Sumner and licensee designee Edward Kreh at Hearts Content. Ms. Sumner stated she completed trainings through CMH. Ms. Sumner stated Ms. Felver also completed some CMH trainings in the past. Ms. Sumner stated she is trying to come up with a system to ensure that trainings are not only completed but documented in their employee record. Ms. Sumner stated sometimes Mr. Kreh and herself go over trainings with the direct care staff member like fire safety, communicable diseases, and resident rights however they do not get documented in the employee records. Ms. Sumner stated all of the direct care staff members had CPR / First Aid except for Ms. Kato who was their newest direct care staff member but she did not realize some of them were expired.

During the on-site investigation, I reviewed the employee records for the seven direct care staff members working at Hearts Content and found the following information in their employee records:

1. Shelly Sumner: She was hired October 28, 2021 and had completed First Aid and CPR however it expired December 20, 2023. She did complete training for medication administration.
2. Sally Felver: I reviewed her employee record and found no record of trainings. Ms. Felver had completed First Aid and CPR but it expired December 2021.
3. Trishelle Sumner: Ms. Sumner had completed First Aid and CPR which was valid until November 2024. There were no other trainings in her employee record.
4. Makayla Brown: Ms. Brown had completed First Aid and CPR which was valid until April 5, 2025. She did not have any other trainings in her employee record.
5. Ashlynn Kato: Hire date November 16, 2023 – I reviewed her employee record and found no record of trainings.

6. Tara Turner: Hire date October 26, 2023 – Ms. Turner had completed her First Aid and CPR but it expired December 20, 2023.
7. Jessa Booker: Hire date September 2023 – I reviewed her employee record and found no record of trainings.

On January 25, 2024, I interviewed direct care staff member Sally Ferver. Ms. Ferver stated most of the direct care staff members hired have worked in an adult foster care in the past and know what to do already. Ms. Ferver stated she knows her First Aid and CPR is expired but she has gone through the Resident Rights training with Ms. Sumner and has reviewed Fire Safety. Ms. Ferver stated they don't have staff meetings where they go through training items. Ms. Ferver did not recall having other trainings.

On February 28, 2024, I interviewed direct care staff member Makayla Brown. Ms. Brown stated when she started over a year ago they had her come in for a couple of weeks to shadow other employees and she filled out paperwork and completed some trainings before she was allowed to work on her own. Ms. Brown stated she did have CPR and First Aid training when she started. Ms. Brown stated she received a booklet to receive training on Resident Rights and communicable diseases when she started. Ms. Brown stated they review the safety and fire procedures a couple times per month and they do fire drills monthly along with a book they can reference regarding fire safety.

On February 28, 2024, I interviewed direct care staff member Jessa Booker who has been employed at Hearts Content since Mid-September 2023. Ms. Booker stated she attended "the basic training" and she feels like they "left her hanging on a lot." Ms. Booker stated in the last month she has learned a lot she did not know because she was trained on the fire emergency procedures. Ms. Booker stated she did receive training from Ms. Sumner regarding resident rights and personal care. Ms. Booker stated in the last month she received a training for safety and fire prevention, emergency procedures, and confidentiality.

This is a repeat violation from SIR # 2022A1029003 dated October 12, 2021 because direct care staff members were not fully trained. A Corrective Action Plan was completed by Mr. Kreh on December 16, 2021. Rule 400.14204 (3) was also cited as an additional finding in that investigation as well. Mr. Kreh stated in his exit conference on November 30, 2021 that he had trained the direct care staff members in fire safety, emergencies, and personal care, however there was no documentation of this training. Mr. Kreh also stated he was going to work on getting an agenda and sign up sheet so he can better document who attends what training.

| APPLICABLE RULE | |
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| R 400.14204 | Direct care staff; qualifications and training. |
| | (3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before |

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| | <p>performing assigned tasks, which shall include being competent in all of the following areas:</p> <ul style="list-style-type: none"> (a) Reporting requirements. (b) First aid. (c) Cardiopulmonary resuscitation. (d) Personal care, supervision, and protection. (e) Resident rights. (f) Safety and fire prevention. (g) Prevention and containment of communicable diseases. |
| ANALYSIS: | <p>Based on interviews with licensee designee Edward Kreh and direct care staff members Ms. Kreh, Ms. Booker, and Ms. Brown there is evidence showing the direct care staff members are not being trained in all the required licensing trainings. Despite Ms. Sumner and Mr. Kreh stating they are working on a better system for training, there was no documentation in the employee records showing completed trainings. Several of the direct care staff members did have First Aid and CPR training but three of them were expired. Ms. Booker and Ms. Brown both stated they were trained regarding Fire Safety, Resident Rights, and Prevention of communicable diseases when they started, however, there is no documentation of these trainings.</p> |
| CONCLUSION: | <p>REPEAT VIOLATION ESTABLISHED [SIR # 2022A1029003 DATED 10/12/2021. CAP COMPLETED.]</p> |

IV. RECOMMENDATION

Upon receipt of an approved corrective action plan, I recommend no change in the license status.

Jennifer Browning

Jennifer Browning
Licensing Consultant

03/01/2024

Date

Approved By:

Dawn Timm

03/01/2024

Dawn N. Timm
Area Manager

Date