GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 17, 2024

Connie Clauson
Leisure Living Mgt of Portage
Suite 203
3196 Kraft Ave SE
Grand Rapids, MI 49512

RE: License #: AL390016015
Investigation #: 2024A0578022
Fountain View Ret Vil 0f Port #2

Dear Mrs. Clauson:

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 (517) 284-9727.

Sincerely,

Eli DeLeon, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 251-4091

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL390016015
Investigation #:	2024A0578022
Complaint Receipt Date:	02/27/2024
Investigation Initiation Date:	02/28/2024
Report Due Date:	04/27/2024
Licensee Name:	Leisure Living Mgt of Portage
Licensee Address:	Suite 203 3196 Kraft Ave SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 285-0573
Administrator:	Brandy Aucunas
Licensee Designee:	Connie Clauson
Name of Facility:	Fountain View Ret Vil 0f Port #2
Facility Address:	7818 Kenmure Drive Portage, MI 49024
Facility Telephone #:	(269) 327-9595
Original Issuance Date:	08/01/1995
License Status:	REGULAR
Effective Date:	09/04/2022
Expiration Date:	09/03/2024
Capacity:	20
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Residents are not provided with enough food and the food provided is not edible or of low quality.	No
Residents are not being provided meals as listed on the menu.	Yes
Resident A is not being provided with her special diet.	No
Direct care staff working at this facility are “under the influence” and drink alcohol during their hours of work.	No

III. METHODOLOGY

02/27/2024	Special Investigation Intake 2024A0578022
02/27/2024	APS Referral Completed.
02/28/2024	Special Investigation Initiated – Telephone call with Complainant.
02/28/2024	Contact-Document Reviewed- Photographs provided by Complainant.
03/08/2024	Special Investigation Completed On-site- Interview with administrator Brandy Aucunas. Interview with direct care staff Jessica Kellog. Interview with Resident A.
03/12/2024	Additional Allegations Received.
03/12/2024	Contact-Document Reviewed- Resident A prescription for a mechanical soft diet, dated 12/11/2023 and signed by Sharnae Ellis, RN.
03/12/2024	Contact-Document Reviewed- *Weekly Menu,* 02/23/2024.
03/12/2024	Special Investigation Completed On-site- Interview with administrator Brandy Aucunas.
04/12/2024	Contact-Telephone- Interview with Lisa Hoskins.
04/12/2024	Contact-Telephone- Interview with Roland Maybond.
04/15/2024	Contact-Telephone- Interview with Guardian A1.
04/16/2024	Exit Conference- Message left for licensee designee Connie Clauson.

ALLEGATION:

- **Residents are not provided with enough food and the food provided is not edible or of low quality.**

- **Resident A is not being provided with her special diet.**

INVESTIGATION:

On 02/27/2024, I received this complaint through the BCHS On-line Complaint System. Complainant reported that on 02/23/2024, residents were served dry white rice with a few vegetables and a roll. Complainant added residents were not provided with beverages until requested to do so for two residents. Complainant reported this facility needs to be “shut down” as the quality of food at this facility is poor.

On 02/28/2024, I interviewed Complainant regarding the allegations. Complainant reported having concerns for the meals provided in this facility for over a year. Complainant reported Resident A is on a “blender only” diet and has been provided the same meals in the same consistency as other residents. When asked if any dietary instructions are being followed with Resident A’s food, Complainant reported Resident A’s food is “chopped up” in small bites. Complainant reported Resident A’s “blender only” diet was ordered by a physician and should be in the facility records. Complainant reported that on one occasion, Residents were served chicken wings that were mostly bone and had very little meat. Complainant added that on one occasion, Residents were served with only white rice, which contained vegetables and meat. Complainant reported having pictures of this meal. Complainant added having pictures of Residents being served a meal without something to drink. Complainant reported these residents were not provided with something to drink until a few minutes later when Complainant requested these residents be served a beverage. Complainant denied ever being informed by Resident A or any other resident they were still hungry or did not receive enough food to eat. Complainant acknowledged that Resident A was capable of informing Complainant of this but had not done so. Complainant clarified it was the quality of food that was concerning, as this facility had several different staff that had worked in the kitchen of this facility and did not continue their employment for unknown reasons. Complainant suspected the quality of the meals served at this facility are a result of the facility buying “cheap” food.

On 02/28/2024, I reviewed several photographs provided by Complainant. Photographs provided by Complainant included metadata identifying the time, date, and location of these photographs. Photographs provided by Complainant included metadata that did not document any history of editing to the time, date, or location of these photographs. Photographs provided by Complainant included metadata

identifying these photographs were taken at 12:11PM on 02/23/2024 at this facility. Photographs provided by Complainant documented lunch at this facility on 02/23/2024 consisted of white rice with bits of beef or pork and peas and carrots and corn. Other photographs provided by Complainant were described by Complainant as residents waiting to be provided with something to drink. I noted none of the residents photographed appeared to be in distress.

On 3/08/2024, I completed an unannounced investigation on-site at this facility and interviewed administrator Brandy Aucunas regarding the allegations. Brandy Aucunas reported being aware of the allegations as one individual has made repeated complaints about the meals served at this facility. Brandy Aucunas denied that Resident A is on a “blender only” diet and clarified that Resident A is on a mechanically soft diet. Brandy Aucunas suspected Complainant may not understand the difference between a mechanically soft diet and pureed diet. Brandy Aucunas acknowledged having some changes in kitchen staff but clarified this facility had recently changed to a new menu system that is approved by a dietician. Brandy Aucunas reported this new menu system was implemented on 02/12/2024. Brandy Aucunas reported Hospice is in this facility regularly to examine Resident A and has ordered a mechanically soft diet for Resident A as Resident A does not like pureed foods. Brandy Aucunas reported every resident has access to meal alternatives and snacks at any time of day.

While at the facility, I inspected the kitchen and observed an appropriate supply of fresh, frozen, and canned food. I noted most of the food supply at this facility was packaged and labeled as being provided by a major grocery chain and delivery service. I observed a posted *Menu* with three meals a day signed by a dietician.

I interviewed Resident A regarding the allegations. Resident A acknowledged receiving three meals a day in addition to snacks at this facility. Resident A denied having any concerns for the quality of meals served at this facility and added that she likes when the facility serves Italian food. Resident A denied ever missing a meal for any reason and clarified that snacks are available to her, but rarely asks direct care staff for these snacks. Resident A denied having any additional concerns.

I interviewed direct care staff Jessica Kellog regarding the allegations. Jessica Kellog reported working at this facility for the last four years. Jessica Kellog acknowledged being aware of the allegations. Jessica Kellog reported Resident A is currently on a soft mechanical diet but was previously on a pureed diet. Jessica Kellog reported this change was implemented by the hospice nursing staff who regularly examine Resident A. Jessica Kellog denied Resident A had ever missed a meal for any reason and added that Resident A and any other resident has meal alternatives and snacks available to her if she did not like the meal provided by this facility for any reason.

I interviewed Careline Physician Services RN “Heather” regarding the allegations. Heather reported examining Resident A several times a week in this facility. Heather

denied having any concerns for the level of care provided in this facility and clarified that Resident A has been “thriving” and improving since being at this facility.

On 03/12/2024, I reviewed a Hospice Physician Order for Resident A, dated 12/11/2023, which ordered Resident A begin a mechanical soft diet. This Hospice Physician Order was signed by Sharnae Ellis, RN.

On 03/12/2024, I reviewed *Weekly Menu’s* for this facility and noted that on 02/23/2024, lunch was to consist of chicken with tomato sauce, garlic pasta, brussels sprouts, baked roll and fruit crisp.

On 04/15/2024, I interviewed Guardian A1 regarding the allegations. Guardian A1 reported being the guardian for Resident A for the last four years. Guardian A1 reported being concerned this facility had recently lost several cooking staff, but reported this facility was “getting back on track.” Guardian A1 denied ever having any current concerns about the meals provided to Resident A but expressed an overall concern for the quality of food when the facility was experiencing staffing changes. Guardian A1 reported that if Resident A was not satisfied with the quality of the food or the portions of food served at this facility, Resident A would be capable of informing direct care staff or her guardian directly. Guardian A1 acknowledged that Resident A was on a pureed diet at some point but was now on a general diet as Hospice staff noted Resident A could eat regularly prepared meals for the time being.

APPLICABLE RULE	
R 400.15313	**Resident nutrition.**
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.
ANALYSIS:	Based upon my investigation, which consisted of interviews with Resident A, direct care staff Jessica Kellog, administrator Brandy Aucunas, and Guardian A1, as well as observations made during an unannounced investigation on-site and a review of pertinent documentation relevant to this investigation, there was not enough evidence to substantiate the allegation that Residents are not provided with enough food, or the food provided to residents at this facility is not edible.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

APPLICABLE RULE	
R 400.15313	**Resident nutrition.**
	(3) Special diets shall be prescribed only by a physician. A resident who has been prescribed a special diet shall be provided such a diet.
ANALYSIS:	Based upon my investigation, which consisted of interviews with direct care staff Jessica Kellog, administrator Brandy Aucunas, and Guardian A1, as well as observations made during an unannounced investigation on-site and a review of pertinent documentation relevant to this investigation, there was not enough evidence to substantiate the allegation that Resident A is not being provided with her special diet as prescribed by a physician.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

APPLICABLE RULE	
R 400.15313	**Resident nutrition.**
	(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.
ANALYSIS:	Based upon my investigation, which consisted of interviews with administrator Brandy Aucunas, as well as observations made during an unannounced investigation on-site and a review of pertinent documentation relevant to this investigation, the meal served to residents for lunch on 02/23/2024 consisted of white rice, beef or pork, peas, carrots, and corn, while the menu posted by this facility documented this meal should have consisted of chicken with tomato sauce, garlic pasta, brussels sprouts, baked roll, and fruit crisp. This change or substitution to the original menu was not documented.
CONCLUSION:	**VIOLATION ESTABLISHED**

ALLEGATION:

Direct care staff working at this facility are “under the influence” and drink alcohol during their hours of work.

INVESTIGATION:

On 03/12/2024, additional allegations were received from an anonymous Complainant. Complainant reported direct care staff Lisa Hoskins and direct care

staff Roland Maybond show up for work “under the influence” and are “drinking” on the job.

On 03/12/2022, I completed an unannounced investigation on-site at this facility and interviewed administrator Brandy Aucunas regarding the allegations. Brandy Aucunas denied the allegations and clarified that she regularly works next to either Lisa Hoskins or Roland Maybond and has never had any concerns regarding either of them being under the influence of any substance and denied ever observing them “drinking” or consuming alcohol during their hours of work. Brandy Aucunas denied having any current performance concerns for Lisa Hoskins or Roland Maybond, and clarified both staff work in the kitchen of the facility and prepare meals and do not provide direct care to residents.

Brandy Aucunas suspected the allegations were made by Lisa Hoskins’ former long-term partner. Brandy Aucunas reported Lisa Hoskins and Rolan Maybond have recently started dating, which has resulted in unfounded complaints being made by Lisa Hoskins’ former long-term partner. Brandy Aucunas reported Lisa Hoskins former long-term partner had shown up at this facility on at least two occasions and she had to threaten to call law enforcement to get Lisa Hoskins former long-term partner to leave.

On 04/12/2024, I interviewed staff Lisa Hoskins regarding the allegations. Lisa Hoskins reported working at this facility for the last eight months. Lisa Hoskins reported serving as the kitchen director for this facility. Lisa Hoskins confirmed that in her role as kitchen director, she does not provide direct care services to residents. Lisa Hoskins denied the allegations, and reported she suspects these allegations were made by her former long-term partner to interfere with her current employment. Lisa Hoskins reported this former long-term partner is attempting to get her fired from this employment and has had to be banned from this facility for visiting unannounced. Lisa Hoskins reported working in these types of facilities for over eight years and has never had any previous complaints or allegations.

On 04/12/2024, I interviewed staff Rolan Maybond regarding the allegations. Roland Maybond denied the allegations and reported this was an attempt to cause problems for him by the former long-term partner of Lisa Hoskins. Rolan Maybond reported similar false allegations were made at his former place of employment which led to his current employment with this facility.

APPLICABLE RULE	
R 400.15206	**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:	Based upon my investigation, which consisted of interviews with administrator Brandy Aucunas, staff Lisa Hoskins and staff Roland Maybond, there was no evidence that Lisa Hoskins and or Roland Maybond were using alcohol while working at this facility or that Lisa Hoskins and or Roland Maybond were under the influence of alcohol while working at this facility. Lisa Hoskins and Roland Maybond work as kitchen staff only at this facility, and do not provide any direct care services to any resident.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable written plan of correction, it is recommended that this license continues on regular status.

04/16/2024

Eli DeLeon Date
Licensing Consultant

Approved By:

04/17/2024

Dawn N. Timm Date
Area Manager