

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

May 28, 2024

Corey Husted Brightside Living LLC PO Box 220 Douglas, MI 49406

> RE: License #: AL280410649 Investigation #: 2024A0230023 Brightside Living - West Shore

Dear Mr. Husted:

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 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,

Rhonde Richards

Rhonda Richards, Licensing Consultant Bureau of Community and Health Systems Suite 11 701 S. Elmwood Traverse City, MI 49684 (231) 342-4942

enclosure

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

## I. IDENTIFYING INFORMATION

License #:	AL280410649
Investigation #:	2024A0230023
Complaint Receipt Date:	05/09/2024
Investigation Initiation Date:	05/10/2024
Investigation Initiation Date:	05/10/2024
Report Due Date:	07/08/2024
Licensee Name:	Brightside Living LLC
	600 Dunggrage Circle Dr. Squastuck MI 40452
Licensee Address:	690 Dunegrass Circle Dr., Saugatuck, MI 49453
Licensee Telephone #:	(614) 329-8428
Administrator:	Corey Husted
Licensee Designee:	Corey Husted
Name of Facility:	Brightside Living - West Shore
Facility Address:	2651 Leaf Lane, Grawn, MI 49637
Facility Telephone #:	(614) 329-8428
Original Issuance Date:	03/14/2022
License Status:	REGULAR
Effective Date:	02/28/2023
Expiration Date:	02/27/2025
Capacity:	14
Program Type:	PHYSICALLY HANDICAPPED, MENTALLY ILL,
	DEVELOPMENTALLY DISABLED, AGED

## II. ALLEGATION(S)

#### Violation Established?

	Establisheu?
Staff member Janet Schnieder is drinking alcohol while working at	Yes
the facility on a daily basis.	

## III. METHODOLOGY

05/09/2024	Special Investigation Intake 2024A0230023
05/10/2024	Special Investigation Initiated - On Site Interview facility manager Karen Fodders and staff members Patty Tolar and Christine Smith
05/20/2024	Inspection Completed On-site Interview with staff member Faith Carey, Christine Smith, Karen Fodders, and Janet Schnieder
05/20/2024	Contact - Face to Face Deputy Harold Grand Traverse County Sheriff's Department
05/20/2024	Contact - Telephone call made Licensee Designee Corey Husted
05/23/2024	Exit Conference With Licensee Designee Corey Husted.

# ALLEGATION: Staff member Janet Schnieder is drinking alcohol while working on the facility on a daily basis.

**INVESTIGATION:** On 05/10/2024, I conducted an on-site investigation at the facility and interviewed staff members Karen Fodders, Patty Tolar and Christine Smith. Ms. Fodders and Ms. Smith stated they never smelled alcohol on Ms. Schnieder nor had they observed her behaving in a manner that appeared intoxicated. They stated she had worked at the facility for approximately three weeks.

Ms. Tolar stated that she was new to working at the facility and had not yet worked with Ms. Schnieder to be able to make any statements about her using alcohol at this job. However, she stated she had worked with her previously and was aware that her employment at another job was terminated due to drinking.

On 05/20/2024, I conducted an unannounced on-site inspection at the facility and interviewed staff member Faith Carey regarding the above allegation. Ms. Carey

stated that Ms. Schnieder had worked with her often on the afternoon shift and generally by the end of the night Ms. Schnieder was unable to function and appeared intoxicated. Additionally, she stated she smelled alcohol on Ms. Schnieder every time she worked. She stated Ms. Schneider frequently went out to her vehicle and got in her car but Ms. Carey did not know why.

On 05/20/2024, I interviewed Ms. Schnieder and asked if she had been drinking as I detected an odor of alcohol on her person. She stated she had not been drinking and denied that she had ever used alcohol while at work at the facility. I requested Ms. Schneider accompany me to her car to show me the inside of her vehicle due to the allegation that she is always going to her vehicle during work. She agreed to open her car and show me the inside. Ms. Schnider opened her car and got in front of me so I could not view what was going on. She came out and showed me the glove box. There was no alcohol in the glove box but I observed a shiny gold top underneath her center armrest. I had her lift up the armrest and noted a pint of vodka which was half empty. Ms. Fodders who is the facility manger was present and I requested she take the bottle inside. Ms. Schnieder stated she was surprised that the vodka was in the vehicle and did not know how it got there. Ms. Schnieder went back inside the facility.

After my interview with Ms. Schnieder, I contacted Deputy Harold from the Grand Traverse County Sheriff's Department to come out and administer a Preliminary Breath Test (PBT) to determine whether or not Ms. Schnieder was sober. Deputy Harold administered the test and I observed the number on the breath test was .195 percent. Deputy Harold explained that Ms. Schnieder was more than twice the legal limit for the blood alcohol level of drunk driving. He then explained that she should not be driving home at all nor should she be caring for vulnerable adults.

I went back inside the facility and with Deputy Harold we told the facility manager Karen Fodders and her lead staff member Christine Smith what had happened. A plan was made for Ms. Smith to drive Ms. Schnieder in Ms. Schnieder's car home with Ms. Fodders following them to pick up Ms. Smith and take her back to the facility.

On 05/23/2024, I conducted an exit conference with Licensee Designee Corey Husted and reviewed the findings of the investigation. Mr. Husted stated he understood the serious nature of the incident and Ms. Schnieder's employment has been terminated. Mr. Husted will provide a plan of correction.

APPLICABLE RULE	
R 400.15204	Direct care staff; qualifications and training.
	<ul> <li>(2) Direct care staff shall possess all of the following qualifications:</li> <li>(a) Be suitable to meet the physical, emotional, intellectual,</li> </ul>
	and social needs of each resident.

ANALYSIS:	It was observed by myself and Deputy Harold with the Grand Traverse County Sheriff's Department that Ms. Schnieder was intoxicated while working on shift on 05/20/2024. Her breathalyzer test read .195 percent blood alcohol level which was more than twice the legal limit for driving as stated by Deputy Harold. Ms. Schneider is not suitable to meet the physical, emotional, intellectual, and social needs of the residents in the facility.
CONCLUSION:	VIOLATION ESTABLISHED

# IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the status of this license remain unchanged.

Rhanda Richards

05/28/2024

Rhonda Richards Licensing Consultant

Date

Approved By:

Handly

05/28/2024

Jerry Hendrick Area Manager Date