



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

September 13, 2024

Leone Swanberg  
5329 McCords  
Alto, MI 49302

RE: License #: AM410008670  
Investigation #: 2024A0583053  
Swanberg AFC - Springwood

Dear Ms. Swanberg:

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 (616) 356-0183.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 333-9702

enclosure

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

**I. IDENTIFYING INFORMATION**

|                                       |  |
|---------------------------------------|--|
| <b>License #:</b>                     | AM410008670  |
| <b>Investigation #:</b>               | 2024A0583053   |
| <b>Complaint Receipt Date:</b>        | 09/04/2024   |
| <b>Investigation Initiation Date:</b> | 09/06/2024   |
| <b>Report Due Date:</b>               | 10/04/2024   |
| <b>Licensee Name:</b>                 | Leone Swanberg   |
| <b>Licensee Address:</b>              | 5329 McCords<br>Alto, MI 49302   |
| <b>Licensee Telephone #:</b>          | (616) 893-6613   |
| <b>Name of Facility:</b>              | Swanberg AFC - Springwood  |
| <b>Facility Address:</b>              | 1158 Springwood Drive SE<br>Kentwood, MI 49508-6055                        |
| <b>Facility Telephone #:</b>          | (616) 532-0356   |
| <b>Original Issuance Date:</b>        | 08/01/1979   |
| <b>License Status:</b>                | REGULAR  |
| <b>Effective Date:</b>                | 10/15/2022   |
| <b>Expiration Date:</b>               | 10/14/2024   |
| <b>Capacity:</b>                      | 12   |
| <b>Program Type:</b>                  | PHYSICALLY HANDICAPPED,<br>DEVELOPMENTALLY DISABLED, MENTALLY<br>ILL, AGED |

## II. ALLEGATION(S)

|   | Violation Established? |
|---|------------------------|
| Residents are left at the facility without staff supervision. | No                     |
| Staff open, read, and keep residents' personal mail.          | No                     |
| Staff do not regularly prepare appropriate meals.             | Yes                    |
| Staff stole 300 dollars and personal items from Resident A.   | No                     |
| Residents are not allowed to launder their clothing.          | No                     |

## III. METHODOLOGY

|            |   |
|------------|---|
| 09/04/2024 | Special Investigation Intake<br>2024A0583053                    |
| 09/06/2024 | Special Investigation Initiated - Letter<br>APS complaint filed |
| 09/06/2024 | APS Referral  |
| 09/06/2024 | Contact - Document Sent   |
| 09/10/2024 | Inspection Completed On-site                                    |
| 09/13/2024 | Exit Conference<br>Licensee Leone Swanberg                      |

**ALLEGATION:** Residents are left at the facility without staff supervision.

**INVESTIGATION:** On 09/04/2024 complaint allegations were received from the BCAL online reporting system. The complaint alleged that, "residents were regularly left home unattended during home outings and at night".

On 09/06/2024 I emailed the complaint allegations to Adult Protective Services Centralized Intake.

On 09/10/2024 I completed an unannounced onsite investigation at the facility and privately interviewed staff Niva James, Joy Umutesi, Resident B, and Resident C. Resident D refused to be interviewed.

Staff Niva James and Joy Umutesi both reported that residents are always properly supervised and are never allowed to be alone at the facility without staff supervision.

Resident B and Resident C both stated that residents are never unsupervised, and staff are always present at the facility. Resident B and Resident C both stated that the reported allegation was false.

On 09/11/2024 I interviewed Resident A via telephone. Resident A stated that she no longer resides at the facility and voluntarily moved out approximately two weeks ago. Resident A stated that she is her own legal decision maker. Resident A stated that she has been left alone at the facility on multiple occasions without staff being present. Resident A explained that she returned from work to the facility and staff were not present on at least two occasions. Resident A stated that she telephoned staff Niva James when Resident A entered the facility and observed that no staff were present. Resident A stated that Ms. James “didn’t care” that no staff were present, and staff did not come to the facility for over an hour. Resident A stated that other residents have been left alone at the facility without staff present. Resident A stated that she could not recall the dates that she and other residents have been left alone at the facility.

On 09/13/2024 I completed an Exit Conference with Licensee Leone Swanberg. Ms. Swanberg stated that she agreed with the special investigation findings.

| <b>APPLICABLE RULE</b> |  |
|------------------------|--|
| <b>R 400.14206</b>     | <b>Staffing requirements.</b>  |
|                        | <b>(1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 12 residents and children who are under the age of 12 years.</b>   |
| <b>ANALYSIS:</b>       | <p>Resident A stated that she has been left alone at the facility on multiple occasions without staff being present.</p> <p>Staff Niva James and Joy Umutesi both reported that residents are always properly supervised, and residents are never allowed to be alone at the facility without staff supervision.</p> <p>Resident B and Resident C both stated that residents are never unsupervised, and staff are always present at the facility. Resident B and Resident C both stated that the reported allegation is false.</p> <p>A preponderance of evidence was not discovered during the Special Investigation to substantiate violation of the applicable rule.</p> |
| <b>CONCLUSION:</b>     | <b>VIOLATION NOT ESTABLISHED</b>   |

**ALLEGATION: Staff open, read, and keep residents' personal mail.**

**INVESTIGATION:** On 09/04/2024 complaint allegations were received from the BCAL online reporting system. The complaint alleged that, "staff tampered with by opening, reading, and keeping residents' personal mail."

On 09/10/2024 I completed an unannounced onsite investigation at the facility and privately interviewed staff Niva James, Joy Umutesi, Resident B, and Resident C.

Staff Niva James and Joy Umutesi both reported that staff or residents retrieve residents' mail from the mailbox. If a resident retrieves the mail that resident provides the mail to the staff member who is working. The staff member then disperses the mail to the resident it belongs to without opening or reading the mail. Staff Niva James and Joy Umutesi both reported that the allegation is false.

Resident B and Resident C both stated that either a resident or staff member retrieves the mail from the mailbox. If a resident retrieves the mail, the resident gives the mail to the staff member who is working, and the staff member disperses the mail to the resident it belongs to. Resident B and Resident C both stated that staff do not open, read, or keep resident's mail.

On 09/11/2024 I interviewed Resident A via telephone. Resident A stated that on one occasion staff Niva James opened her personal mail and stole Resident A's "check stub". Resident A stated that Ms. James did not give Resident A the check stub back. Resident A stated that she could not recall the approximate date of the incident.

On 09/13/2024 I completed an Exit Conference with Licensee Leone Swanberg. Ms. Swanberg stated that she agreed with the special investigation findings.

| <b>APPLICABLE RULE</b> |   |
|------------------------|---|
| <b>R 400.14304</b>     | <b>Resident rights; licensee responsibilities.</b>  |
|                        | (1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:<br>(d) The right to write, send, and receive uncensored and unopened mail at his or her own expense.<br>(2) A licensee shall respect and safeguard the resident's rights specified in subrule (1) of this rule. |
| <b>ANALYSIS:</b>       | Resident A stated that on one occasion staff Niva James opened her personal mail and stole Resident A's "check stub".   |

|                    |   |
|--------------------|---|
|                    | <p>Resident A stated that Ms. James did not give Resident A the check stub back.</p> <p>Staff Niva James and Joy Umutesi both reported that staff or residents retrieve residents' mail from the mailbox. If a resident retrieves the mail, that resident will provide the mail to the staff member who then disperses the mail to the resident it belongs to without opening or reading the mail.</p> <p>Resident B and Resident C both stated that staff do not open, read, or keep resident's mail.</p> <p>A preponderance of evidence was not discovered during the Special Investigation to substantiate violation of the applicable rule.</p> |
| <b>CONCLUSION:</b> | <b>VIOLATION NOT ESTABLISHED</b>  |

**ALLEGATION: Staff do not regularly prepare appropriate meals.**

**INVESTIGATION:** On 09/04/2024 complaint allegations were received from the BCAL online reporting system. The complaint alleged that, "staff did not regularly prepare appropriate meals".

On 09/10/2024 I completed an unannounced onsite investigation at the facility and privately interviewed staff Niva James, Joy Umutesi, Resident B, and Resident C.

Staff Niva James stated that the facility was characterized as an "independent home". Ms. James stated that some residents, including Resident B, Resident C, and Resident D, receive electronic food benefits and are required to use that money to purchase their own food and subsequently prepare their own dinners. Ms. James stated it is a "goal of certain residents" such as Resident B, Resident C, and Resident D to prepare their own meals and that is accomplished by using their electric food benefits to prepare their own dinners. Ms. James stated that residents that do not receive electronic food benefits are prepared and provided three nutritious meals daily and staff follow the posted menu.

Staff Umutesi stated that she works at the facility from approximately 11:00 AM until 5:00 PM. Ms. Umutesi stated that she does not follow a posted menu and typically provides residents with a sandwich of their choice plus chips, bananas, or an apple.

While onsite I observed that the posted menu was not up to date but does meet approved dietary requirements.

Resident B and Resident C both stated that they purchase their groceries and eat meals that they prepare.

On 09/13/2024 I completed an Exit Conference with Licensee Leone Swanberg via telephone. Ms. Swanberg stated that she had “no idea” that residents were receiving electronic food benefits. Ms. Swanberg confirmed that the facility is not a non-profit organization and stated that some of the residents may have been receiving these benefits prior to being admitted to the facility. Ms. Swanberg stated that some residents prepare their own meals. Ms. Swanberg stated that some residents have “CMH goals” that include preparing their own meals which is the reason why staff do not always provide all residents with three meals daily.

| <b>APPLICABLE RULE</b> |  |
|------------------------|--|
| <b>R 400.14313</b>     | <b>Resident nutrition.</b>   |
|                        | <b>(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.</b>   |
| <b>ANALYSIS:</b>       | <p>Staff Niva James stated that some residents, including Resident B, Resident C, and Resident D, receive electronic food benefits and are required to use that money to purchase their own food and prepare their own dinners.</p> <p>Resident B and Resident C stated that they purchase their groceries and eat meals that they prepare.</p> <p>A preponderance of evidence was discovered during the Special Investigation to substantiate a violation of the applicable rule. Residents of the facility are using Electronic Food Benefits to purchase their own food and prepare their own meals. Residents are not being provided three nutritious meals daily.</p> |
| <b>CONCLUSION:</b>     | <b>VIOLATION ESTABLISHED</b>   |

**ALLEGATION: Staff stole 300 dollars and personal items from Resident A.**

**INVESTIGATION:** On 09/04/2024 complaint allegations were received from the BCAL online reporting system. The complaint alleged that, “staff kept and did not return” Resident A’s “personal funds in the amount of \$300” and Resident A’s “belongings were stolen and missing”.

On 09/10/2024 I completed an unannounced onsite investigation at the facility and privately interviewed staff Niva James and Joy Umutesi. Ms. James and Ms. Umutesi both stated that they have never stolen Resident A’s money or personal items. Ms. James and Ms. Umutesi both reported that Resident A voluntarily moved out of the facility and took her personal items with her.



On 09/11/2024 I interviewed Resident A via telephone. Resident A stated that she paid staff Niva James “300 dollars” for rent prior to voluntarily moving out of the facility approximately two weeks ago. Resident A denied that staff stole her money or personal items.

On 09/13/2024 I completed an Exit Conference with Licensee Leone Swanberg. Ms. Swanberg stated that she agreed with the special investigation findings.

| <b>APPLICABLE RULE</b> |  |
|------------------------|--|
| <b>R 400.14315</b>     | <b>Handling of resident funds and valuables.</b>   |
|                        | <b>(10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.</b>  |
| <b>ANALYSIS:</b>       | <p>Staff Niva James and Joy Umutesi both stated that they have never stolen Resident A’s money or personal items. Ms. James and Ms. Umutesi both reported that Resident A voluntarily moved out of the facility and took her personal items with her.</p> <p>Resident A stated that she paid staff Niva James \$300 for rent prior to voluntarily moving out of the facility approximately two weeks ago. Resident A denied that staff stole her money or personal items.</p> <p>A preponderance of evidence was not discovered during the Special Investigation to substantiate violation of the applicable rule.</p> |
| <b>CONCLUSION:</b>     | <b>VIOLATION NOT ESTABLISHED</b>   |

**ALLEGATION: Residents are not allowed to launder their clothing.**

**INVESTIGATION:** On 09/04/2024 complaint allegations were received from the BCAL online reporting system. I observed that the complaint alleged that “residents were not allowed to use the laundry facilities”.

On 09/10/2024 I completed an unannounced onsite investigation at the facility and privately interviewed staff Niva James, Joy Umutesi, Resident B, and Resident C. Staff Niva James and Joy Umutesi both reported that resident are allowed access to the facility’s washing machine and dryer for the purposes of laundering their clothing.

Ms. James and Ms. Umutessi both stated that some residents do not possess the abilities to launder their own clothing therefore staff launder their clothing for them.

Resident B and Resident C both stated that they launder their clothing without staff assistance. Resident B and Resident C both stated that certain resident do not possess the ability to launder their clothing therefore staff complete the task for them.

On 09/11/2024 I interviewed Resident A via telephone. Resident A stated that she was allowed access to the facility's washing machine and dryer and laundered her own clothing. Resident A stated that she was not restricted from use of the machines.

On 09/13/2024 I completed an Exit Conference with Licensee Leone Swanberg. Ms. Swanberg stated that she agreed with the special investigation findings.

| <b>APPLICABLE RULE</b> |   |
|------------------------|---|
| <b>R 400.14404</b>     | <b>Laundry,</b>   |
|                        | <b>A home shall make adequate provision for the laundering of a resident's personal laundry.</b>  |
| <b>ANALYSIS:</b>       | <p>Staff Niva James and Joy Umutesi both reported that residents are allowed access to the facility's washing machine and dryer for the purposes of laundering their clothing. Ms. James and Ms. Umutessi both stated that some residents do not possess the ability to launder their own clothing therefore staff launder their clothing for them.</p> <p>Resident B and Resident C both stated they launder their clothing without staff assistance. Resident B and Resident C both stated that certain resident do not possess the ability to launder their clothing therefore staff complete the task for them.</p> <p>Resident A stated that she was allowed access to the facility's washing machine and dryer and laundered her own clothing. Resident A stated that she was not restricted from use of the machines.</p> <p>A preponderance of evidence was not discovered during the Special Investigation to substantiate violation of the applicable rule.</p> |
| <b>CONCLUSION:</b>     | <b>VIOLATION NOT ESTABLISHED</b>  |

#### IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action Plan, I recommend no change to the license.



09/13/2024

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Toya Zylstra  
Licensing Consultant

Date

Approved By:



09/13/2024

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Jerry Hendrick  
Area Manager

Date