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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

October 17, 2024

Scott Brown Renaissance Community Homes Inc P.O. Box 749 Adrian, MI 49221

> RE: License #: AS810416767 Investigation #: 2025A0575002

**Grant House** 

### Dear Mr. Brown:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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) 284-9720.

Sincerely,

Jeffrey J. Bozsik, Licensing Consultant

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Bureau of Community and Health Systems

(734) 417-4277

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

# I. IDENTIFYING INFORMATION

License #:	AS810416767
Investigation #:	2025A0575002
Complaint Receipt Date:	10/16/2024
Investigation Initiation Date:	10/16/2024
investigation initiation bate.	10/10/2024
Report Due Date:	11/15/2024
Licensee Name:	Denaissanse Community Hames Inc
Licensee Name:	Renaissance Community Homes Inc
Licensee Address:	1548 W. Maumee St., Suite C
	Adrian, MI 49221
Licensee Telephone #:	(734) 439-0464
Electrice Telephone #.	(104) 400 0404
Administrator:	Scott Brown
Licensee Designee:	Scott Brown
Licensee Designee.	GCOLL BIOWII
Name of Facility:	Grant House
Encility Address:	2500 Grant Dr.
Facility Address:	Ann Arbor, MI 48108
Facility Telephone #:	(734) 975-1514
Original Issuance Date:	11/02/2023
Original Issuants Date:	11/02/2020
License Status:	REGULAR
Effective Date:	05/02/2024
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Expiration Date:	05/01/2026
Canacity	6
Capacity:	U
Program Type:	MENTALLY ILL

# II. ALLEGATION(S)

Violation Established?

Resident A alleges staff Benta Russell refused to help clean/bathe	Yes
her when she had a toileting accident and left her soiled.	

#### III. METHODOLOGY

10/16/2024	Special Investigation Intake-2025A0575002
10/16/2024	APS referral- received
10/16/2024	Special Investigation Initiated - Telephone
10/16/2024	Contact - Telephone calls made-(a) direct care staff Benta Russell and (b) facility assistant manager Dennis Brown
10/16/2024	Inspection Completed On-site-interviews with (a) Resident A and (b) direct care staff Isola Abebe
10/16/2024	Inspection Completed-BCAL Sub. Compliance
10/16/2024	Exit Conference with Scott Brown

#### ALLEGATION:

Resident A alleges staff Benta Russell refused to help clean/bathe her when she had a toileting accident and left her soiled.

#### INVESTIGATION:

An APS referral was received.

On 10/16/2024, I interviewed Resident A. She stated that on the evening of 10/10/2024 she had diarrhea and needed help cleaning herself. She stated that staff Benta Russell refused to help her clean herself or change her brief and left her in soiled clothes overnight. I reviewed Resident A's current AFC assessment and it stated that she needs assistance with toileting/personal care.

On 10/16/2024, I interviewed staff Isola Abebe. She stated when she came to work at midnight, staff Benta Russell said nothing to her about an incident with Resident

A. She stated that around 5:30 a.m. Resident A got up to go to the bathroom and she noticed that she was soiled with feces. She stated that Resident A's bed and wheelchair were both soiled with feces. She stated Resident A's brief was soiled but she could not tell if it had been changed earlier.

On 10/16/2024, I interviewed the facility assistant manager, Dennis Brown. He stated he witnessed nothing and when Resident A informed him of the incident, he just completed the incident report.

On 10/16/2024, I interviewed staff Benta Russell. She stated that around 8:00 p.m. on 10/10/2024, Resident A complained that she didn't feel well. She stated that when she asked Resident A if she needed help, Resident A went into the bathroom, but only washed her hands. She stated that Resident A refused her offer of assisting her with a shower and that Resident A told her she cleaned herself. Finally, she stated that she did not complete an incident report nor did she communicate to the midnight staff, Isola Abebe, about the events that transpired that evening.

On 10/16/2024, I conducted an exit conference with Scott Brown.

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	Given that Resident A's AFC assessment states that she needs assistance with toileting and Resident A was found by the midnight staff to be soiled, and since staff Benta Russell did not complete any documentation or communicate to the midnight staff any information about the incident, then the preponderance of evidence is that staff Benta Russell did not provide personal care as defined in the act and as specified in Resident A's written assessment plan.
CONCLUSION:	VIOLATION ESTABLISHED

# IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, I recommend no change in the license status.

Jeffrey J. Bozsik Licensing Consultant

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Date: 10/16/2024

Approved By:

Ardra Hunter Area Manager Date: 10/17/2024