

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

MARLON I. BROWN, DPA DIRECTOR

December 16, 2024

Jennifer Bhaskaran Alternative Services Inc. Suite 10 32625 W Seven Mile Rd Livonia, MI 48152

> RE: License #: AS250302820 Investigation #: 2025A0569006 Linden Road

Dear Jennifer Bhaskaran:

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) 643-7960.

Sincerely,

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Kent W Gieselman, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (810) 931-1092

enclosure

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

This report contains quoted profanity

I. IDENTIFYING INFORMATION

License #:	AS250302820
License #:	A5250302620
	00054050000
Investigation #:	2025A0569006
Complaint Receipt Date:	11/11/2024
Investigation Initiation Date:	11/12/2024
Report Due Date:	01/10/2025
	01,10,2020
Licensee Name:	Alternative Services Inc.
	Alternative Services Inc.
Licensee Address:	Suite 10
	32625 W Seven Mile Rd
	Livonia, MI 48152
Licensee Telephone #:	(248) 471-4880
•	
Administrator:	Jennifer Bhaskaran
Administrator	
Liconaco Decimaco	Jennifer Bhaskaran
Licensee Designee:	Jennier Bhaskaran
Name of Facility:	Linden Road
Facility Address:	12481 North Linden Rd
	Clio, MI 48420
Facility Telephone #:	(248) 471-4880
Original Issuance Date:	07/31/2009
Original issuance Date.	01/31/2003
Liconce Statue:	
License Status:	REGULAR
Effective Date:	02/11/2024
Expiration Date:	02/10/2026
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

II. ALLEGATION(S)

	Violation
	Established?
Neveah McGlown, staff person, verbally mistreated Resident	Yes
A on 11/11/2024.	

III. METHODOLOGY

11/11/2024	Special Investigation Intake 2025A0569006
11/12/2024	APS Referral complaint from APS.
11/12/2024	Special Investigation Initiated - Letter Email to ORR.
12/16/2024	Inspection Completed On-site
12/16/2024	Inspection Completed-BCAL Sub. Compliance
12/16/2024	Contact- Telephone call made. Contact with Staff McGlown.
12/16/2024	Exit Conference Exit conference with Jennifer Bhaskaran, licensee designee.
12/16/2024	Corrective Action Plan Requested and Due on 01/15/2025

ALLEGATION:

Neveah McGlown, staff person, verbally mistreated Resident A on 11/11/2024.

INVESTIGATION:

This complaint was received from the adult protective services central intake department. The complainant reported that on 11/11/2024 Neveah McGlown, staff person, "snatched the phone" away from Resident A. The complainant reported that Staff McGlown then started yelling at Resident A saying, "fuck you bitch" and calling Resident A derogatory names such as "hoe" and "bitch."

An unannounced inspection of this facility was conducted on 12/16/2024. Resident A was alert and oriented to person, place, and time. Resident A was appropriately dressed and groomed with no visible injuries. Resident A stated that "a few weeks ago" staff McGlown became upset at Resident A. Resident A stated that she could not remember why Staff McGlown became upset. Resident A stated that Staff McGlown started yelling at her and Staff McGlown said, "fuck you bitch" to Resident A. Resident A stated that Staff McGlown stated that Staff McGlown also called Resident A "bitch" and "hoe." Resident A stated that Staff McGlown also threatened to "kick her ass." Resident A stated that Joy Spencer, facility manager, then sent Staff McGlown home. Resident A stated that Staff McGlown A stated that Staff McGlown has not returned to work in this facility since this incident. Resident A stated that she has not been mistreated by any of the other staff working in this facility.

Joy Spencer, facility manager, stated on 12/16/2024 she witnessed the incident on 11/11/2024. Staff Spencer stated that she heard Staff McGlown yelling, so she went to see what was going on. Staff Spencer stated that she observed Staff McGlown yelling at Resident A. Staff Spencer stated that she observed Staff McGlown say, "fuck you bitch" to Resident A, and also called Resident A a "bitch" and "hoe." Staff Spencer stated that she also observed Staff McGlown tell Resident A to "go outside" so that Staff McGlown could "kick her ass." Staff Spencer stated that she confronted staff McGlown telling her to stop and calm down. Staff Spencer stated that Staff McGlown home immediately. Staff Spencer stated that Staff McGlown was then terminated from employment and no longer works at this facility.

Staff McGlown was contacted on 12/16/2024. Staff McGlown stated that she did not wish to make a statement regarding this incident.

An exit conference was conducted with Jennifer Bhaskaran, licensee designee, on 12/16/2024. The findings in this report were reviewed and a corrective action plan was requested. Jennifer Bhaskaran stated that Staff McGlown was terminated from employment following this incident.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	 (2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following: (f) Subject a resident to any of the following: (i) Mental or emotional cruelty. (ii) Verbal abuse. (iii) Derogatory remarks about the resident or members of his or her family. (iv) Threats.
ANALYSIS:	The complainant reported that Staff McGlown verbally mistreated Resident A on 11/11/2024. Resident A and Staff Spencer both confirmed that Staff McGlown did verbally mistreat Resident A and also physically threatened Resident A on 11/11/24. Based on the statements given, it is determined that there has been a violation of this rule.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Kent Liesil

12/16/2024

Kent W Gieselman Licensing Consultant Date

Approved By:

Holto

Mary E. Holton Area Manager

<u>12/16/2024</u> Date