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GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

March 12, 2025

Megan Pena Hope Network Behavioral Health Services PO Box 890 3075 Orchard Vista Drive Grand Rapids, MI 49518-0890

> RE: License #: AL410095350 Investigation #: 2025A0340021 Meadows

Dear Mrs. Pena:

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,

Rebecca Piccard, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503

Rebecca Riccard

(616) 446-5764

Enclosure

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

I. IDENTIFYING INFORMATION

| License #: | AL410095350 |
|--------------------------------|---|
| | |
| Investigation #: | 2025A0340021 |
| | |
| Complaint Receipt Date: | 02/10/2025 |
| | |
| Investigation Initiation Date: | 02/10/2025 |
| | |
| Report Due Date: | 04/11/2025 |
| Nopoli 240 2410. | 0 17 17 17 20 20 |
| Licensee Name: | Hope Network Behavioral Health Services |
| Liconoco Italiio. | The position of Bollaviolar Floatian Convides |
| Licensee Address: | PO Box 890, 3075 Orchard Vista Drive |
| Licensee Address. | Grand Rapids, MI 49518-0890 |
| | Grand Napides, IVII 40010-0000 |
| Licensee Telephone #: | (616) 430-7952 |
| Licensee Telephone #. | (010) 430-1332 |
| Administrator: | Megan Pena |
| Administrator. | Megan Fena |
| Licenses Decignes | Mogan Dana |
| Licensee Designee: | Megan Pena |
| Name of Facility | Meadows |
| Name of Facility: | Meadows |
| Facility Address. | 747 N. Canton Drive NIM Malken M. 40544 |
| Facility Address: | 717 N. Center Drive NW, Walker, MI 49544 |
| Facility Talanhana # | (040) 047 0500 |
| Facility Telephone #: | (616) 647-2599 |
| Ovininal Inquence Data: | 05/00/2004 |
| Original Issuance Date: | 05/09/2001 |
| License Status | DECLUAD |
| License Status: | REGULAR |
| Effective Date: | 14/07/0000 |
| Effective Date: | 11/27/2023 |
| Funivation Date: | 44/00/0005 |
| Expiration Date: | 11/26/2025 |
| Opposit | 40 |
| Capacity: | 13 |
| | DEVELOPMENTALLY DIG 15: 55 |
| Program Type: | DEVELOPMENTALLY DISABLED |
| | MENTALLY ILL |

II. ALLEGATION (S)

Violation Established?

| Resident A's funds were missing | Vec |
|----------------------------------|-----|
| Resident A's lunds were missing. | res |

III. METHODOLOGY

| 02/10/2025 | Special Investigation Intake 2025A0340021 |
|------------|--|
| 02/10/2025 | APS Referral received from APS |
| 02/10/2025 | Special Investigation Initiated - Telephone Stephanie Leone |
| 02/10/2025 | Contact - Telephone call made Megan Pena |
| 02/26/2025 | Inspection Completed On-site |
| 02/26/2025 | Contact - Telephone call made Staff Erika Down-Simms |
| 03/11/2025 | Contact - Telephone call made Erika Down Simms |
| 03/11/2025 | Exit Conference Stephanie Leone |
| 03/11/2025 | Inspection Completed-BCAL Sub. Compliance |

ALLEGATION: Resident A's funds were missing.

INVESTIGATION: On February 10, 2025, A complaint was filed with BCHS Online Complaints which was filed by Adult Protective Services (APS) which stated that Resident A's SSI check was cashed, and her money was put in an envelope in a safe and kept in the manager's office. When Resident A requested her money there was supposed to be \$47 in her envelope, but there was only \$3.

On February 10, 2025, I contacted Megan Pena. She was aware of the situation and stated all the missing money has been returned to the residents' funds. Ms. Pena stated a former staff person who is no longer with Hope Network is believed to

have stolen the funds and the police were called to handle the criminal aspects of the situation.

On February 24, 2025, I conducted an unannounced home inspection. Jamie Darling, Operations Manager, was at the home and met with me. She was directly involved in this situation, and provided me her knowledge of what happened.

Ms. Darling stated that former staff, Erika Down-Simms was covering as the manager of both Alpine Grove and Meadows homes on the Grandview campus. When residents are paid their SSI money, the manager will cash the checks and then hand out the cash directly to the residents. Residents at this home in general do not save any of their \$44 spending money. Ms. Down-Simms had reportedly told Ms. Darling that she had paid all the residents when Ms. Darling was off work on PTO. A few days later Resident A asked for her spending money, which Ms. Darling founds strange since the residents know the day they get their checks and get their money the same day and this was days afterward. Ms. Darling went to the safe and did not find any funds in the safe belonging to Resident A. The Funds 2 form did not have an entry for the SSI payment, deposit, withdrawal, or anything. Ms. Darling asked Ms. Down-Simms about the funds and the Funds 2 entries missing. Ms. Down-Simms reportedly told Ms. Darling that she gave everyone their money and it should be documented. When Ms. Down-Simms was shown the Funds 2 form and that it wasn't documented and when Ms. Darling told her that Resident A asked for her money and stated she did not get it, she wondered what happened. Ms. Down-Simms reportedly again stated she gave everyone their money and if it is not documented and the money is not in the safe, then she did not know what happened.

Ms. Darling stated she called in Kim Brown, the new Administrator/Designee, who wanted to conduct an audit. When Ms. Brown opened the safe there was no money found in the safe. When Ms. Down-Simms was questioned she "abruptly resigned". Ms. Darling then called the Walker Police Department who arrived the same day and took a statement. Hope Network replaced the missing \$44 to Resident A so she had her spending money.

On February 26, 2025, I attempted to contact Ms. Down-Simms and left a message requesting she return my call.

On March 11, 2025, I again attempted to contact Ms. Down-Simms and left a message requesting she return my call.

On March 11, 2025, Ms. Down-Simms returned my call. I identified myself and explained the reason for my call. Ms. Down-Simms remembered who I was from previously meeting me at the Meadows home and agreed to speak with me.

I asked her to tell me what happened with the funds that went missing at Alpine Grove. She stated that she had been covering as Program Manager for not just her home at Meadows, but all four of the homes on the Grandview campus. She stated she had experienced a difficult week and was "overwhelmed". She stated she did take the SSI checks for all residents on campus. She went to the bank, cashed the checks, and then distributed the funds to the residents. Ms. Down-Simms estimated the amount of cash she had in hand was \$2,000.

I asked Ms. Down-Simms to explain the procedure in which she passed out the cash to the residents. She stated that she documented the transaction on the Funds 2 forms so that residents sign-off on the \$44 they were receiving. She clarified that every resident that had cash was given the entire \$44 and the check was being marked as being received, then cashed out, and the resident signed off on the Funds 2 form as having received their \$44 SSI money.

When Ms. Darling asked her about Resident A's money not being given to her, Ms. Down-Simms stated that she told her she did give it and she went to look at the Funds 2 form. They both reviewed the Funds 2 form and it did not have the transaction documented for Resident A. Ms. Down-Simms then thought maybe she documented it on another residents Funds 2 form so she reviewed all forms for every resident but did not find a duplicate entry.

Ms. Down-Simms stated again that she fills out the Funds 2 forms when she hands the money out to each resident because they need to sign-off on it. She stated she must have missed it for Resident A. Ms. Down-Simms then stated she started an audit of the funds. She was trying to find the error but stated that Ms. Darling became "demanding" that she finish. Ms. Darling brought Kim Brown, new Admin/Designee in training, into the office and that is when Ms. Down-Simms began to feel someone was trying to get her in trouble and that she "had a target on my back". She stated "this was a big slap in the face" being accused of taking money from the people she thought she would spend the rest of her career taking care of. Ms. Down-Simms stated she was "devastated" by the insinuation so she quit. Ms. Down-Simms was aware of the criminal investigation but has not spoken to any Detectives at this time.

| APPLICABLE RULE | |
|-----------------|---|
| R 400.15315 | Handling of resident funds and valuables. |
| | (1) Upon a request from a resident or the resident's designated representative, a licensee may accept a resident's funds and valuables to be held in trust with the licensee. |
| ANALYSIS: | The allegation stated that Resident A had funds missing from her account. |

| | Ms. Darling stated Ms. Down-Simms was responsible for cashing the resident SSI checks and then passing out the money to each resident. Resident A's Funds 2 sheet did not have documentation of the transaction. |
|-------------|---|
| | Ms. Down-Simms stated she cashed the checks and passed out the money. She does not have an explanation of why Resident A did not get her money or why her Funds 2 form did not have the documentation to verify she passed it out. |
| | There is a preponderance of evidence to support a rule violation that money was not kept in trust or given to Resident A. |
| CONCLUSION: | VIOLATION ESTABLISHED |

On March 11, 2025, I conducted an exit conference with Designee Stephanie Leone. She was aware of the allegations and understood the need for a Corrective Action Plan (CAP). She agreed to send a CAP and had no further questions.

IV RECOMMENDATION

Upon receipt of an acceptable CAP, I recommend no change to the current license status.

Rebecca Piccard Date Licensing Consultant

Approved By:

March 12, 2025

Jerry Hendrick Date Area Manager