GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 5, 2025

Connie Clauson
Baruch SLS, Inc.
Suite 203
3196 Kraft Avenue SE
Grand Rapids, MI 49512

RE: License #: AL700398467
Investigation #: 2025A0340016
Seville

Dear Mrs. Clauson:

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
(616) 446-5764

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL700398467
Investigation #:	2025A0340016
Complaint Receipt Date:	01/15/2025
Investigation Initiation Date:	01/15/2025
Report Due Date:	03/16/2025
Licensee Name:	Baruch SLS, Inc.
Licensee Address:	Suite 203 3196 Kraft Avenue SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 285-0573
Administrator:	Rebecca Summerville
Licensee Designee:	Connie Clauson
Name of Facility:	Seville
Facility Address:	16331 Robbins Road Grand Haven, MI 49417
Facility Telephone #:	(616) 847-4242
Original Issuance Date:	03/23/2020
License Status:	REGULAR
Effective Date:	09/24/2024
Expiration Date:	09/23/2026
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Staff recorded and posted video of Resident A and B on their personal social media.	Yes

III. METHODOLOGY

01/15/2025	Special Investigation Intake 2025A0340016
01/15/2025	APS Referral
01/15/2025	Special Investigation Initiated - Telephone Connie Clauson
03/03/2025	Inspection Completed On-site
03/05/2025	Exit Conference Designee Connie Clauson

ALLEGATION: Staff recorded and posted video of Resident A and B on their personal social media.

INVESTIGATION: On January 15, 2024, I received information from Designee Connie Clauson, regarding an incident which occurred at the Seville adult foster care Home. She had become aware that videos of two residents had been recorded by staff and posted on their private social media. Ms. Clauson stated there are releases that are signed for images of residents to be used for Baruch media, but not for situations like this. Staff are also required to sign a document that they cannot take photos or video of residents. Ms. Clauson stated that the staff involved will be fired.

Ms. Clauson sent me the videos that had been posted. It showed Resident A who suffers from dementia, interacting with staff Samara Davis while she was standing with her walker in the middle of the common area. Another video showed Resident B laying back in a chair while being recorded by staff Samara Davis. It was posted on staff Tamiya Towers-Wilson's personal social media.

On March 3, 2025, I conducted an unannounced home inspection. It was obvious that Resident A and B were of limited cognition due to dementia and were unable to be interviewed.

I spoke with staff Shane TenBrink. She confirmed that Resident A and B would not be able to participate in an interview due to their diminished cognition. Ms. TenBrink was aware of the incident of the residents being recorded and confirmed that Ms.

Davis and Ms. Towers-Wilson have been terminated. She also confirmed staff sign agreements when hired that they will not take pictures or video of residents.

APPLICABLE RULE	
R 400.15305	**Resident protection.**
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	The allegation was made that staff Davis and Towers-Wilson recorded and posted video of Residents A and B. Ms. Clauson shared the video that was posted. She also stated the staff will be terminated. Staff TenBrink affirmed that Davis and Towers-Wilson had been terminated.
CONCLUSION:	**VIOLATION ESTABLISHED**

On March 5, 2025, I conducted an exit conference with Designee Connie Clauson. We discussed the incident and the rule violation. I requested a Corrective Action Plan which she agreed to send and had no further questions.

IV. RECOMMENDATION

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

Rebecca Piccard March 5, 2025

Rebecca Piccard Date
Licensing Consultant

Approved By:

Jerry Hendrick March 5, 2025

Jerry Hendrick Date
Area Manager