



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 12, 2025

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

RE: License #: AS340089072
Investigation #: 2025A0464020
Westlake IV

Dear Mr. Pelletier:

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 blue ink that reads "Megan Aukerman, MSW". The signature is written in a cursive style.

Megan Aukerman, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 438-3036

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS340089072
Investigation #:	2025A0464020
Complaint Receipt Date:	01/15/2025
Investigation Initiation Date:	01/17/2025
Report Due Date:	03/16/2025
Licensee Name:	Hope Network Behavioral Health Services
Licensee Address:	PO Box 890 3075 Orchard Vista Drive Grand Rapids, MI 49518-0890
Licensee Telephone #:	(616) 430-7952
Administrator:	Andre Pelletier
Licensee Designee:	Andre Pelletier
Name of Facility:	Westlake IV
Facility Address:	11652 Grand River Lowell, MI 49331
Facility Telephone #:	(616) 897-5900
Original Issuance Date:	11/09/1999
License Status:	REGULAR
Effective Date:	09/28/2023
Expiration Date:	09/27/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Staff are not administering Resident A's medications as prescribed.	Yes

III. METHODOLOGY

01/15/2025	Special Investigation Intake 2025A0464020
01/17/2025	Special Investigation Initiated - Telephone Centralized Intake, DHHS
01/17/2025	APS Referral
01/31/2025	Inspection Completed-Onsite Brandi Moore (Program Manager)
03/10/2025	Contact-Document received Facility Records
03/12/2025	Exit Conference Andre Pelletier, Licensee Designee

ALLEGATION: Staff are not administering Resident A's medications as prescribed.

INVESTIGATION: On 01/15/2025, I received a complaint alleging that over the past few months, staff have not been administering Resident A's medications as prescribed. There have been various medication errors. On 01/06/2025, staff did not administer Resident A's clonazepam 2 mg. and on 01/14/2025, staff found Resident A's Docusate 100 mg on the floor.

On 01/17/2025, I contacted the Department of Health and Human Services (DHHS), Centralized Intake to complete an Adult Protective Services (APS) referral per policy.

On 01/31/2025, I completed an onsite inspection at the facility and interviewed program manager, Brandi Moore. Mrs. Moore stated it was reported to her that there was one day when staff, Samantha Thompkins did not administer Resident A her Clonazepam 2mg. Mrs. Moore stated the Montcalm Office of Recipient Rights (ORR) also investigated the allegations. Mrs. Moore stated since the incident, Ms. Thompkins has been retrained on medication administration.

On 03/10/2025, I received and reviewed a copy of Resident A's Medication Administration Record (MAR) for the months of December 2024 and January 2025. The MAR reflected Resident A is prescribed buspirone 10mg, clonazepam 2mg, docusate 100mg, fluticasone nasal spray, folic acid 1mg, guanfacine 1mg, loratadine 1mg, quetiapine 400mg, sertraline 100mg, trazadone 100mg, and Vitamin D. The MAR reflected Resident A did not received her clonazepam 2mg at 2:00 pm on 01/06/2025. All other medications were documented as administered as prescribed.

On 03/10/2025, I received and reviewed a copy of the Montcalm Care Network Office of Recipient Rights (ORR) report completed on 02/25/2025 and signed by ORR worker, Melissa Leach. Ms. Leach interviewed staff, Brooke Wagner. Ms. Wagner admitted to Ms. Leach that on 02/15/2025, she did not administer Resident A's 2:00 pm medications. As a result, Ms. Leach cited the facility for the medication errors.

On 03/12/2025, I completed an exit conference with licensee designee, Andre Pelletier. He was informed of the investigation findings and recommendations. A corrective action plan will be submitted to licensing.

APPLICABLE RULE	
R 400.14312	Resident medication.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
ANALYSIS:	<p>On 01/15/2025, a complaint was received alleging staff were not administering Resident A's medications as prescribed.</p> <p>Program manager, Brandi Moore stated it was reported to her that on 01/06/2025, Resident A did not receive her prescribed clonazepam 2 mg.</p> <p>Resident A's medication administration record (MAR) for January 2025, reflected Resident A was not administered her prescribed clonazepam 2 mg on 01/06/2025.</p> <p>Based on the investigative findings there is sufficient evidence to support a rule violation that Resident A was not administered her medication as prescribed.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend that the licensing status remain unchanged.

Megan Aukerman, MSW

03/12/2025

Megan Aukerman
Licensing Consultant

Date

Approved By:

Jerry Hendrick

03/12/2025

Jerry Hendrick
Area Manager

Date