



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 09, 2025

Thurman Taylor
PO Box 888247
Grand Rapids, MI 49588

RE: License #: AF410317511
Investigation #: 2025A0467030
Taylor's Home Care

Dear Mr. Taylor:

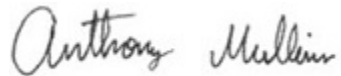
Attached is the Special Investigation Report for the above referenced facility. Due to the violation identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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 dark ink, reading "Anthony Mullins". The signature is written in a cursive style with a large initial 'A'.

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

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF410317511
Investigation #:	2025A0467030
Complaint Receipt Date:	03/11/2025
Investigation Initiation Date:	03/11/2025
Report Due Date:	05/10/2025
Licensee Name:	Thurman Taylor
Licensee Address:	PO Box 888247 Grand Rapids, MI 49588
Licensee Telephone #:	(616) 247-1412
Administrator:	Thurman Taylor
Licensee Designee:	Thurman Taylor
Name of Facility:	Taylor's Home Care
Facility Address:	1505 Morewood Dr. SE Grand Rapids, MI 49508
Facility Telephone #:	(616) 247-1412
Original Issuance Date:	07/27/2012
License Status:	REGULAR
Effective Date:	01/27/2025
Expiration Date:	01/26/2027
Capacity:	4
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Resident A is not compatible with the rest of the residents in the home.	Yes

III. METHODOLOGY

03/11/2025	Special Investigation Intake 2025A0467030
03/11/2025	Special Investigation Initiated - On Site
03/11/2025	Exit conference with licensee designee, Thurman Taylor
03/12/2025	Contact - Document Sent Records request sent to GRPD for Resident A
03/20/2025	Contact – Document received from GRPD
03/31/2025	APS Referral not warranted based on allegations.

ALLEGATION: Resident A is not compatible with the rest of the residents in the home.

INVESTIGATION: On 3/11/25, I received an online complaint through LARA-BCHS complaint system. The complaint alleged that there have been several times that a resident with red hair (name unknown) has been handcuffed and taken away by police. The complaint alleges that police are at the home weekly for behaviors related to this resident. On 3/8/25, the unknown resident with red hair was once again placed in handcuffs by officers from Grand Rapids Police Department (GRPD). An ambulance was also at the home and checked out the resident prior to her being placed back into the police car and taken away. The complaint alleged that police were at the home for a threat with a weapon. The complaint stated that there are three other residents that live in the home, and there is concern for their safety due to ongoing issues with the red-haired resident.

On 3/11/25, I made an unannounced onsite investigation at the home. Upon arrival, staff allowed entry into the home and called the co-owner, Margaret Taylor upstairs to speak with me. I informed Mrs. Taylor that I'm at the home to speak with a resident with red hair. Mrs. Taylor identified the resident as Resident A and introductions were made with her at the dining room table. I attempted to speak with Resident A individually. However, she insisted that Mrs. Taylor remain present at the dining room table with her. It should be noted that co-owner, Thurman Taylor arrived at the home during the interview and was present for part of the conversation.

Resident A confirmed her name and DOB. After informing Resident A that I was at the home due to a complaint I received, she immediately pointed at the house next door and stated, “she fucking called.” I informed Resident A that I am unable to disclose the reporting source, but I would like to talk to her about an incident that occurred on 3/8/25. Resident A stated, “whoever called you guys is fucking retarded.”

Resident A stated, “I snapped a knife and tried to go for someone’s neck.” Resident A stated that the knife she snapped was plastic, and her aggression was directed towards staff member, Anaejah Kirkland. Resident A then stated that she didn’t actually go after Ms. Kirkland. Instead, “I just had it in my hand,” referring to the plastic knife. Resident A stated that this incident stems from her “seeing the devil because I wasn’t taking my Thorazine” medication. Resident A shared that on the day in question, she told Ms. Kirkland that she was going to kill her. Resident A stated that she doesn’t regret her decision because she doesn’t like Ms. Kirkland. Per co-owner Margaret Taylor, Resident A doesn’t like Ms. Kirkland because she feels that she is on her phone a lot and doesn’t give her the attention she is looking for. Resident A then shared that Ms. Kirkland has let her bite herself in the past. During this conversation, Mrs. Taylor attempted to provide context surrounding Resident A’s stressors/triggers, which is that this time of year is around the anniversary of her mother’s death, and Resident A found her deceased as a minor. As a result of Mrs. Taylor trying to provide me with pertinent information, Resident A became visibly upset as she stood up from the table and began putting her hands over her face and head. Resident A requested her PRN Thorazine and Benadryl medication, which were given to her as requested by staff. In an attempt to not retraumatize Resident A, I asked her if she would like her part of the interview to conclude. Resident A requested to remain present for the interview.

Mrs. Taylor stated that at Resident A’s previous home, staff often held her down (restrain) when she escalated, and she would like staff at this home to do the same. I informed Resident A that adult foster care homes are considered the least restrictive environment, and being restrained is not recommended. It should be noted that staff at the home are Mandt trained, which includes physical de-escalation. However, Mr. and Mrs. Thurman prefer to use verbal de-escalation with residents. Mr. and Mrs. Taylor informed me that Resident A has a behavioral plan in place, and Mr. Thurman emailed me a copy of it.

Resident A was asked about other incidents or issues within the home that have led to police involvement. Resident A stated that she has tried to hang herself upstairs with a bed sheet. Police arrived at the home and cut the sheet. Resident A also shared that she was on probation for assault and battery towards her guardian. As of January 2025, Resident A stated that she is off probation. Resident A added that her behaviors are related to trying to get kicked out of the home. I informed Resident A that if she has continued behaviors of this nature, she could very well be discharged from the home, which upset her.

At this time, Mr. and Mrs. Thurman finished the rest of the interview. Mr. and Mrs. Thurman confirmed that Resident A went to jail this past Saturday for the knife incident with staff member, Ms. Kirkland. Somehow, the charges against Resident A were dropped and she was sent to St. Mary's Hospital for a psychological evaluation. While there, hospital staff determined that Resident A's actions were behavioral in nature, and she was discharged back to the home. Mrs. Taylor stated that Resident A and other residents in the home have threatened each other. In addition to threats, Mrs. Taylor stated that all residents have hit each other in the past as well. Mrs. Taylor initially stated that two residents have expressed that they're scared of Resident A. Mrs. Taylor then stated that other residents are not scared of Resident A, contradicting her previous statement. It should be noted that Mr. Thurman also denied other residents fearing Resident A. Mr. Thurman stated that Resident A "feeds off attention". Therefore, he anticipates that there will be issues at the home tonight since she was able to get some attention today.

While at the home I interviewed Resident B privately outside in the driveway. Resident B confirmed her name and DOB. Resident B stated that she has lived at the home since May 2023. Resident B was asked if she's scared of Resident A. Resident B appeared to be hesitant to answer the question, but then stated, "a little, yes" regarding fearing Resident A. Resident B stated that she's scared of what Resident A can do. Resident B stated that Resident A has tried to fight her a few months ago. In addition to be threatened by Resident A, Resident B stated that she has also thrown things at her, breaks things, and goes after staff. Resident B stated that Resident A has tried to fight everyone in the house since she's been there. Resident B referred to Resident A as a "menace" and stated that she would feel safer if Resident A was not in the home. As a result of the ongoing concerns and fear Resident B and other residents have about Resident A, Resident B stated that some of the residents are sleeping with their doors locked and often worry about what Resident A may do to them. Resident B confirmed that police were at the home this past weekend. When asked why, Resident B stated that it was due to drugs on Resident A's person and Resident A going after staff with a knife. Resident B believed the drugs to be meth as this is something she thinks she overheard. Resident B stated that police are at the home often for issues related to Resident A. Resident B stated, "I wish they would find her a new home. She's doing nothing but harm." Resident B was thanked for her time as this interview concluded.

After speaking to Resident B, I spoke to Resident C privately outside in the driveway. Resident C confirmed her name and DOB. Resident C stated that she has lived at the home for five years. Resident C stated "yes" when asked if she is scared of Resident A. Resident C described Resident A as a "bully" that bosses her around. Resident C stated that one day, Resident A ran up on her and stated, "bitch, I'll hurt you in your sleep." In addition to this, Resident C stated that Resident A often raises her voice and yells at her. Resident C stated that Resident A has also threatened other residents in the home by making statements such as, "I'll slit your throat." Resident C confirmed that police were at the home this past weekend due to Resident A having a plastic knife and threatening staff with it. Resident C had no

knowledge of drugs being in Resident A's possession. Resident C stated that she would feel safer if Resident A did not live in the home.

After interviewing Resident B and Resident C, I spoke to Mr. and Mrs. Taylor in the driveway to conduct an exit conference. I informed them that due to ongoing concerns regarding Resident A and other residents being concerned for their safety around her, there will be a citation regarding Resident A not being compatible with the other residents in the home. I encouraged Mr. and Mrs. Taylor to consider serving Resident A with a discharge notice to allow for her case management team and guardian to seek placement elsewhere. However, Mr. Taylor stated that he plans to work with Resident A and doesn't want to fail her.

On 3/12/25, I spoke to the home's co-owner, Thurman Taylor via phone. Mr. Taylor wanted to confirm that Resident B said she was afraid of Resident A, which she did during my onsite investigation, as well as Resident C. Mr. Taylor stated that Resident B and Resident C has never told staff or their guardian that they are scared of Resident A. Mr. Taylor stated that Resident B's guardian, Cheryl Cunningham stated that she knows what to say because she is trying to get out of the home to obtain her own apartment. Mr. Taylor stated, if Resident B is that afraid of Resident A, "why would she go smoke with her yesterday?"

Mr. Taylor stated that if he is being cited for compatibility concerns regarding Resident A, he plans to serve Resident B and Resident C with a discharge notice due to never disclosing concerns for their safety around Resident A. Mr. Taylor stated that Resident B and Resident C had ample opportunity to share their concerns with staff and their guardians and never did. I informed Mr. Taylor that as the licensee, it is his choice to serve any resident with a discharge notice. Mr. Taylor stated that he will not bring any new residents into the home right away. When he does bring in new residents, he will make sure they are willing to communicate and express any safety concerns in real time to avoid a similar situation. Mr. Taylor was thanked for his time as this call concluded.

On 3/12/25, I sent a request to Grand Rapids Police Department (GRPD) requesting police reports for Resident A from 10/1/24 through 3/11/25.

On 3/17/25, I spoke to Cheryl Cunningham, guardian for Resident B. Ms. Cunningham stated that for almost two years, Resident B has been at Taylor's Home adult foster care home. Ms. Cunningham stated that sometime last week, someone came to the home and spoke to Resident B and she disclosed that she was afraid to live there. Ms. Cunningham stated that she had a meeting with Resident B and she shared that "the man that came and talked to her was pushing her to say things." Ms. Cunningham stated that Resident B is cognitively impaired and when people like Resident B say things, it is not always true. Ms. Cunningham stated that she could not have picked a better AFC home for Resident B than this home and that her placement has been "amazing" for her. Ms. Cunningham stated that she can't say enough good things about Mr. and Mrs. Taylor. In fact, Ms.

Cunningham compared Resident B's previous AFC to Taylor's Home AFC and stated that, "she went from Motel 6 to the Ritz-Carlton." Ms. Cunningham stated that Mr. and Mrs. Taylor are caring and loving. She also added that Resident B was upset that her "words got switched" during her interview with a man at the home last week. Ms. Cunningham stated that Resident B is not afraid to live at the home and she has never disclosed this to her "and we talk all the time." Ms. Cunningham also added that with Resident B's mental illness, "she thinks things are happening that aren't actually happening." Ms. Cunningham stated that Resident B shared that she felt "intimidated to say things." Ms. Cunningham stated that Resident B wanted her to call someone to share her concerns because she was so upset.

I informed Ms. Cunningham that I was the man at the home that interviewed Resident B last week and I never take the approach of forcing her or anyone to say anything that they don't feel comfortable saying. I informed Ms. Cunningham that I reassure residents that it is okay to be honest with me and during the interview, Resident B stated that she is scared of Resident A due to issues between them. I also informed Ms. Cunningham that despite Resident B telling her that she is not scared of Resident A, it does not change the outcome of my investigation as she and another resident expressed similar concerns. Ms. Cunningham shared that Resident B is likely using this as motivation to discharge from the home and obtain her own place. Ms. Cunningham believes this to be true because Resident B sees her dad every Sunday and she never told him about this incident. However, she did say to her dad, "now maybe I can get my own apartment."

Ms. Cunningham stated that Mr. Taylor informed her that he's looking into discharging Resident B. Ms. Cunningham stated that Mr. Taylor stated if Resident B doesn't feel safe in the home, she should live somewhere else. Ms. Cunningham shared that Resident B then stated that she didn't mean to say she didn't feel safe at the home. Ms. Cunningham stated that Resident B believes that "if she tells you things, you'll help her get out of the AFC." Ms. Cunningham stated that she is very involved with Resident B and again she has never once said she feared Resident A or has been threatened by her. I informed Ms. Cunningham that Resident B is not the resident of concern. However, if Mr. and Mrs. Taylor decide to discharge her, that will be their choice.

Ms. Cunningham was asked if she is aware that police have been out to the home on several occasions regarding Resident A, and she stated no. Ms. Cunningham now knows that the police involvement includes threats made to staff and other concerns, which puts Resident B and others at risk of harm. Ms. Cunningham stated that "if there's an issue with a resident and other people complain about her, why is that resident not removed?" I informed Ms. Cunningham that as the licensee of the home, Mr. and Mrs. Taylor can choose to discharge whoever they want. Ms. Cunningham stated that at this time, Resident B does not have a discharge notice, but she wanted to provide me with the additional information noted above. Ms. Cunningham was thanked for her time as this interview concluded.

On 3/20/25, staff from GRPD records unit responded and provided me with one report that did not occur during the requested time frame. That report will be summarized in SIR #2025A0467031. Records requested during the identified time were denied and they provided a letter on how to appeal their response.

APPLICABLE RULE	
R 400.1407	Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.
	(2) A licensee shall not accept or retain a resident for care unless and until a resident assessment plan is made and it is determined that the resident is suitable pursuant to the following provisions: (a) The amount of personal care, supervision, and protection required by the resident is available in the home. (b) The kinds of services and skills required of the home to meet the resident's needs are available in the home. (c) The resident appears to be compatible with other residents and members of the household.
ANALYSIS:	Resident A confirmed that she tried to attack staff with a knife on 3/8/25 and she didn't regret her decision. In addition to this, Mr. and Mrs. Taylor confirmed that police have been to the home on several occasions regarding Resident A, including Resident A trying to hang herself. In addition to threatening staff, Resident B and Resident C both expressed fear of Resident A due to her ongoing threats and aggression. Based on the interviews conducted, there is a preponderance of evidence to support this applicable licensing rule as Resident A is not compatible with other residents in the home.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no changes to the current license status.

Anthony Mullin

04/09/2025

Anthony Mullins
Licensing Consultant

Date

Approved By:



04/09/2025

Jerry Hendrick
Area Manager

Date