



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 3, 2025

James Pilot  
Bay Human Services, Inc.  
P O Box 741  
Standish, MI 48658

|                  |               |
|------------------|---------------|
| RE: License #:   | AS090084054   |
| Investigation #: | 2025A0123039  |
|                  | Brookwood CLF |

Dear James Pilot:

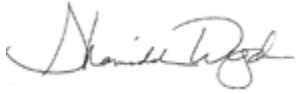
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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,

A handwritten signature in dark ink, appearing to read "Shamidah Wyden". The signature is fluid and cursive, with the first name being more prominent.

Shamidah Wyden, Licensing Consultant  
Bureau of Community and Health Systems  
411 Genesee  
P.O. Box 5070  
Saginaw, MI 48607  
989-395-6853

enclosure

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

**I. IDENTIFYING INFORMATION**

|                                       |  |
|---------------------------------------|--|
| <b>License #:</b>                     | AS090084054  |
| <b>Investigation #:</b>               | 2025A0123039   |
| <b>Complaint Receipt Date:</b>        | 05/28/2025   |
| <b>Investigation Initiation Date:</b> | 06/02/2025   |
| <b>Report Due Date:</b>               | 07/27/2025   |
| <b>Licensee Name:</b>                 | Bay Human Services, Inc.   |
| <b>Licensee Address:</b>              | PO Box 741<br>3463 Deep River Rd<br>Standish, MI 48658             |
| <b>Licensee Telephone #:</b>          | (989) 846-9631   |
| <b>Administrator:</b>                 | Melissa Rood   |
| <b>Licensee Designee:</b>             | James Pilot  |
| <b>Name of Facility:</b>              | Brookwood CLF  |
| <b>Facility Address:</b>              | 909 Murphy St. Bay City, MI 48706                                  |
| <b>Facility Telephone #:</b>          | (989) 686-1999   |
| <b>Original Issuance Date:</b>        | 12/01/1998   |
| <b>License Status:</b>                | REGULAR  |
| <b>Effective Date:</b>                | 05/17/2024   |
| <b>Expiration Date:</b>               | 05/16/2026   |
| <b>Capacity:</b>                      | 6  |
| <b>Program Type:</b>                  | PHYSICALLY HANDICAPPED<br>DEVELOPMENTALLY DISABLED<br>MENTALLY ILL |

## II. ALLEGATION(S)

|   | Violation<br>Established? |
|---|---------------------------|
| On 05/25/2025, staff Bobrianna Wilson left the home during her shift, leaving staff Teresa Sizemore alone with six residents. | Yes                       |

## III. METHODOLOGY

|            |   |
|------------|---|
| 05/28/2025 | Special Investigation Intake<br>2025A0123039  |
| 06/02/2025 | Special Investigation Initiated - Letter  |
| 06/02/2025 | APS Referral<br>APS referral completed.   |
| 06/10/2025 | Inspection Completed On-site<br>I conducted an unannounced on-site at the facility.             |
| 06/16/2025 | Contact - Telephone call made<br>I made an attempted call to staff Teresa Sizemore.             |
| 06/16/2025 | Contact - Telephone call made<br>I interviewed staff Bobrianna Wilson.                          |
| 06/16/2025 | Contact - Telephone call made<br>I interviewed staff Kari Duff.                                 |
| 06/27/2025 | Contact- Telephone call made<br>I interviewed staff Teresa Sizemore.                            |
| 07/01/2025 | Contact- Document Received<br>Requested documentation received from administrator Melissa Rood. |
| 07/03/2025 | Exit Conference<br>I spoke with licensee designee Joe Pilot.                                    |
| 07/03/2025 | Contact- Document Received<br>Received copy of staff schedules from the facility.               |

**ALLEGATION:** On 05/25/2025, staff Bobrianna Wilson left the home during her shift, leaving staff Teresa Sizemore alone with six residents.

**INVESTIGATION:** On 06/10/2025, I conducted an unannounced on-site at the facility. I interviewed staff Shavon Maroni. Staff Maroni stated that she works on second and third shift with Staff Wilson within the last month. When asked if she's observed anything concerning while working with Staff Wilson, she stated that Staff Wilson leaves during her shift and sometimes comes back with food.

During this on-site, I observed all six residents in the facility. Most were in bed asleep during this on-site. They all appeared to be clean and appropriately dressed.

During this on-site, I reviewed *Assessment Plan for AFC Residents* for all six residents. Per Resident A's assessment plan, Resident A requires full assistance with all personal care activities, including toileting, bathing, walking/mobility and uses an ARJO lift and wheelchair. Resident B's assessment plan states Resident B is blind and requires full assistance with all personal care activities, including toileting, bathing, and walking/mobility. Resident B uses a walker and wheelchair with staff assistance. Resident C's assessment plan notes Resident C is more independent and requires some assistance/reminders with a few personal care activities, such as bathing, grooming, and personal hygiene. Resident D's assessment plan states Resident D is blind and requires full assistance from staff with all personal care needs including toileting, bathing, walking/mobility. Resident E's assessment plan states Resident E is also blind. Resident E requires staff assistance with all personal care activities, including toileting, bathing, and walking/mobility. Resident E uses a wheelchair. Resident F's assessment plan notes Resident F has dementia, cannot walk, uses a wheelchair, and requires staff assistance with all personal care activities. Resident F uses an ARJO lift for toileting and bathing.

On 06/16/2025, I interviewed staff Bobrianna Wilson via phone. Staff Wilson stated that on 05/25/2025, she worked a double shift. At about 1:27 am, she saw that Taco Bell was still open, so she left to get something to eat. Home manager Kari Duff text her about 8:00 am later that morning, about not being at the facility. Staff Wilson stated that she told Staff Duff where she went as Staff Duff told Staff Wilson that she rode by the facility around 1:40 am and did not see Staff Wilson's car. Staff Wilson stated there were six residents in the facility, and it slipped her mind that all six residents were present. She stated that she was told this is why she was in trouble and received a written write-up.

On 06/16/2025, I interviewed home manager Kari Duff. Staff Duff stated that she received a phone call from staff Teresa Sizemore at 2:30 am that staff Bobrianna Wilson had left the facility and was not back yet. Staff Duff stated that Staff Wilson returned while she was on the phone with Staff Sizemore. Staff Duff stated that she later reached out to Staff Wilson who told her she left the facility to go and get some Taco Bell. Staff Duff stated that Staff Wilson received a written write-up. Staff Duff stated that she has not heard anything about Staff Wilson leaving the facility since

this incident, and Staff Wilson told Staff Duff it would not happen again. She stated that Staff Sizemore stated that it happened previously when there were five residents in the home. She stated that the staff in the home have all worked there long enough to know when to report concerning behaviors. She stated that there is a lot of “*he said she said*” going on. She stated that she did not actually drive by the facility, only told Staff Wilson this as to avoid conflict between Staff Wilson and co-workers. She stated that she told Staff Wilson to come to work prepared. She denied knowing how long Staff Wilson was gone. She stated that there are three blind residents, one resident who is fully immobile, and another resident who is on hospice, in a wheelchair, and cannot walk.

On 06/27/2025, I interviewed staff Teresa Sizemore via phone. Staff Sizemore stated that she was working third shift with staff Bobrianna Wilson but cannot remember the date. Staff Sizemore stated that Staff Wilson had worked the prior shift and left at 11:00 pm. Staff Wilson came back to the facility at 1:00 am to pass medications and left again. Staff Sizemore stated that Staff Wilson returned to the home while she was on the phone with Staff Duff around 2:30 am. Staff Sizemore stated that all six residents were in the facility when Staff Wilson left the facility.

On 07/01/2025, I received a copy of Bay Human Services Employee’s *Acknowledgement of Having Received and Reviewed the Bay Human Services, Inc. Personnel Manual* signed by staff Bobrianna Wilson on 01/05/2023. The email includes an excerpt of the policy titled *Work Schedules*, which notes the following:

*“Employees are expected to report to work on time and be prepared to start work at the regularly scheduled work time. Employees are also expected to remain at work through your scheduled workday except for authorized leaves. It is important for employees to notify their supervisor as soon as possible before their scheduled work time when they may be late or absent from work. In all cases where the employee may be absent or tardy, they must provide the supervisor with an explanation.”*

On 07/03/2025, I obtained copies of the facility’s staff schedules for May and June 2025. The staff schedules reflect that there are at least two staff that work per shift for each shift. There are two staff that are scheduled to work from 11:00 pm to 7:00 am daily. On 05/25/2025, staff Bobrianna Wilson was scheduled to work from 3:00 pm to 7:00 am, and staff Teresa Sizemore was scheduled to work from 11:pm to 7:00 am. Staff Alycia Hartwig is on the schedule that day from 7:00 am to 3:00 pm, and staff Shavon Maroni worked from 7:00 am to 11:00 pm.

| APPLICABLE RULE |                        |
|-----------------|------------------------|
| R 400.14206     | Staffing requirements. |

|                    |  |
|--------------------|--|
|                    | <b>(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.</b>  |
| <b>ANALYSIS:</b>   | <p>On 06/10/2025, I conducted an unannounced on-site at the facility. I interviewed staff Shavon Maroni. Staff Maroni stated that she has witnessed staff Bobrianna Wilson leave during her shift.</p> <p>During this on-site, I observed all six residents in the facility. Most were in bed asleep during this on-site. <i>Assessment Plans for AFC Residents</i> were reviewed during the on-site. Five of the six residents' assessment plans indicate that they require staff assistance with all personal care activities, including toileting, bathing, and walking/mobility.</p> <p>On 06/16/2025, I interviewed staff Bobrianna Wilson. Staff Wilson confirmed that she left her shift on 05/25/2025 to go to Taco Bell. She stated that it slipped her mind that the home was at full capacity. She stated that she received written disciplinary action.</p> <p>On 06/16/2025, I interviewed home manager Kari Duff who stated she was informed that Staff Wilson left her shift, and that when she spoke to Staff Wilson, Staff Wilson admitted to doing so.</p> <p>On 06/27/2025, I interviewed staff Teresa Sizemore. Staff Sizemore stated that she witnessed Staff Wilson leave the home twice on 05/25/2025 during third shift.</p> <p>There is a preponderance of evidence to substantiate a rule violation.</p> |
| <b>CONCLUSION:</b> | <b>VIOLATION ESTABLISHED</b>   |

On 07/03/2025, I conducted an exit conference with licensee designee Joe Pilot. I informed Joe Pilot of the findings and conclusion.

#### IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, I recommend continuation of the AFC small group home license (capacity 3-6).




07/03/2025

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Shamidah Wyden  
Licensing Consultant

Date

Approved By:



07/03/2025

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Mary E. Holton  
Area Manager

Date