



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

October 5, 2018

Ann Stevens
11437 Henderson Rd
Otisville, MI 48463

RE: License #: AF250288160
Investigation #: 2018A0501044
Ann's AFC Home

Dear Ms. Stevens:

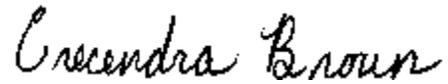
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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 (810) 787-7031.

Sincerely,

A handwritten signature in black ink that reads "Crecendra Brown". The script is cursive and fluid.

Crecendra Brown, Licensing Consultant
Bureau of Community and Health Systems
4809 Clio Road
Flint, MI 48504
(810) 931-0965

enclosure

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

I. IDENTIFYING INFORMATION

| | |
|---------------------------------------|---|
| License #: | AF250288160 |
| Investigation #: | 2018A0501044 |
| Complaint Receipt Date: | 08/15/2018 |
| Investigation Initiation Date: | 08/15/2018 |
| Report Due Date: | 10/14/2018 |
| Licensee Name: | Ann Stevens |
| Licensee Address: | 11437 Henderson Rd Otisville, MI 48463 |
| Licensee Telephone #: | (810) 631-4236 |
| Administrator: | N/A |
| Licensee Designee: | N/A |
| Name of Facility: | Ann's AFC Home |
| Facility Address: | 11437 Henderson Rd Otisville, MI 48463 |
| Facility Telephone #: | (810) 631-4236 |
| Original Issuance Date: | 03/19/2007 |
| License Status: | REGULAR |
| Effective Date: | 10/08/2017 |
| Expiration Date: | 10/07/2019 |
| Capacity: | 6 |
| Program Type: | AGED ALZHEIMERS |

II. ALLEGATION(S)

| | Violation Established? |
|---|-----------------------------------|
| Licensee Ann Stevens is intimidating residents and yelling at them. | Yes |
| Additional Findings | Yes |

III. METHODOLOGY

| | |
|------------|---|
| 08/15/2018 | Special Investigation Intake 2018A0501044 |
| 08/15/2018 | Special Investigation Initiated - Telephone Complainant 1. |
| 08/15/2018 | Contact - Telephone call made Resident A. |
| 08/15/2018 | APS Referral APS referral made to Centralized Intake. |
| 08/20/2018 | APS Referral Received letter reporting that the APS Referral was denied for investigation. |
| 09/05/2018 | Inspection Completed On-site Licensee Ann Stevens, Resident B, Resident C, Resident D, Resident E and Resident F. |
| 09/05/2018 | Exit Conference Licensee Ann Stevens. |

ALLEGATION:

Licensee Ann Stevens is intimidating residents and yelling at them.

INVESTIGATION:

On August 15, 2018, I conducted a phone interview with Complainant 1. Complainant 1 stated that Licensee Ann Stevens is mean to the residents at her home. Complainant 1 stated that Licensee Ann Stevens is very mean to Resident A. Complainant 1 stated that Licensee Stevens has been yelling at Resident A in front of everyone at the home.

On August 15, 2018, I conducted a phone interview with Resident A. Resident A stated that he gave another resident one of his cigarettes and Licensee Ann Stevens started yelling at him. Resident A stated that he did not know he could not give other residents one of his own cigarettes. Resident A stated that Licensee Stevens would yell at him in front of other residents and staff. Resident A stated that Licensee Stevens told him he had to be out of her home by September 10, 2018 and she did put it in writing. Resident A stated that Licensee Stevens would yell at other residents too and would intimidate residents.

On September 5, 2018, I conducted an unannounced onsite investigation at Ann's AFC. Licensee Ann Stevens, Resident B, Resident C, Resident D, Resident E and Resident F were interviewed.

Licensee Ann Stevens stated that the allegation was not true. Licensee Stevens stated that she doesn't intimidate residents and she does not yell at residents. Licensee Stevens stated that Resident A does not live in her licensed AFC, but he lives in her room and board next door. Licensee Stevens stated that Resident A has lived at several AFC homes and is very difficult. Licensee Stevens stated that Resident A was told not to give his cigarettes to other residents.

Resident B was clean and dressed appropriately. Resident B stated that Licensee Stevens does scream and yell sometimes at them. Resident B stated that Licensee Stevens uses profanity sometimes when she is yelling.

Resident C was clean and dressed appropriately. Resident C was scared to talk to me and would not answer any questions at first. Resident C stated that she did not know anything about any screaming or yelling in the home.

Resident D was clean and dressed appropriate. Resident D stated that she loves Licensee Stevens. Resident D stated that Resident A told her that Licensee Stevens was being mean to him. Resident D stated that she could not remember hearing Licensee Stevens screaming or yelling at the other residents.

Resident E was clean and dressed appropriate. Resident E stated that Licensee Stevens does yell at residents sometimes. Resident E stated that Licensee Stevens uses strong language sometimes towards residents to get her point across. Resident E stated she has witnessed Licensee Stevens scream at other residents, but she was not sure if she used profanity.

Resident F was clean and dressed appropriate. Resident F stated that Licensee Ann Stevens does yell at residents sometimes and uses profanity towards residents sometimes in the home. Resident F stated that Licensee Stevens mostly uses profanity towards her own family in front of the residents.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.1412 | Resident behavior management; prohibitions. |
| | <p>(1) A licensee shall not mistreat or permit the mistreatment of a resident by responsible persons or other occupants of the home. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm.</p> <p>(2) A licensee, responsible person, or any person living in the home shall not use any of the following methods of handling a resident for discipline purposes:</p> <p style="padding-left: 40px;">(e) Mental or emotional cruelty, including subjecting a resident to verbal abuse, making derogatory remarks about the resident or members of his or her family or making malicious threats.</p> |
| ANALYSIS: | <p>Complainant 1, Resident A, Resident B, Resident E and Resident F stated that Licensee Ann Stevens yells at residents in the home.</p> <p>Resident B and Resident F stated that Licensee Ann Stevens uses profanity towards residents in the home.</p> |
| CONCLUSION: | VIOLATION ESTABLISHED |

ADDITIONAL FINDINGS:

INVESTIGATION:

On September 5, 2018, I conducted an unannounced onsite investigation at Ann's AFC.

I reviewed all the resident records in the home. Resident E did not have an assessment plan on file in the home. Licensee Ann Stevens stated that the assessment plan was completed, but she did not know where it was.

| APPLICABLE RULE | |
|------------------------|--|
| R 400.1407 | Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal. |
| | (3) In situations where a resident is referred for admission, the resident assessment plan shall be conducted in conjunction with the resident or the resident's designated representative, the responsible agency, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home. |
| ANALYSIS: | Resident E's assessment plan was missing from her resident file in the home. |
| CONCLUSION: | VIOLATION ESTABLISHED |

INVESTIGATION:

On September 5, 2018, I conducted an unannounced onsite investigation at Ann's AFC.

I observed no toilet paper in the bathroom or under the sink in the bathroom.

Resident B stated that they have to buy their own toilet paper. Resident B stated that Licensee Stevens does not provide them with toilet paper. Resident B stated that everyone keeps their toilet paper in their room.

Resident C stated that everyone has their own toilet paper. Resident C stated that no toilet paper is kept in the bathroom.

Resident D stated that her toilet paper is in her room. Resident D stated that they have to buy their own toilet paper. Resident D stated that there is never any toilet paper in the bathroom.

Resident E stated that she buys her own toilet paper. Resident E stated that Licensee Stevens said they were using too much toilet paper, so they have to buy their own. Resident E stated that Licensee Stevens does not buy toilet paper for the residents.

Resident F stated that Licensee Stevens will not buy toilet paper because she thinks they use too much toilet paper. Resident F stated that they have to bring their own toilet paper into the bathroom. Resident F stated that everyone has been buying their toilet paper since she has been living in the home.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.1408 | Resident care; licensee responsibilities. |
| | (1) A licensee shall provide basic self-care and habilitation training in accordance with the resident's written assessment plan. |
| ANALYSIS: | Resident B, Resident C, Resident D, Resident E and Resident F stated that Licensee Ann Stevens is not providing them with toilet paper for their basic self-care. |
| CONCLUSION: | VIOLATION ESTABLISHED |

INVESTIGATION:

On September 5, 2018, I conducted an unannounced onsite investigation at Ann's AFC.

All the residents were observed working hard in the kitchen cleaning, washing dishes, and taking out the trash.

Resident B stated that the residents are made to do chores by Licensee Stevens. Resident B stated that doing chores everyday is not a choice. Resident B stated that they must clean the kitchen, wash dishes, take out trash, dust, vacuum and keep their rooms clean. Resident B's assessment plan states that she keeps her bedroom clean, fills water glasses and sets the table for meals.

Resident C stated that they have to do chores every day. Resident C stated that Licensee Stevens told them they have to do the chores. Resident C's assessment plan states that she will assist with dishes, laundry and feeding cats.

Resident D stated that Licensee Stevens has them do chores every day. Resident D stated that they dust, vacuum, wash dishes, and keep their rooms clean. Resident D stated that they must help Licensee Stevens out. Resident D's assessment plan states that she helps out around the house, vacuuming, and unloading the dish washer.

Resident E stated that the all have chores they must do every week. Resident E stated that she must make sure her room is clean, dust, bed must be made every day, and

clean clothes must be put away in the drawers. Resident E's assessment plan was missing from her resident file.

Resident F stated that chores are assigned to them by Licensee Stevens. Resident F stated that the residents always have to wash the dishes and put up the dishes. Resident F stated that Licensee Stevens never washes the dishes. Resident F stated that they have to wash dishes, put away the dishes, take out the trash, dust, and vacuum. Resident F stated that they are not asked what they want to do, but there are told what they are going to do. Resident F's assessment plan does not describe or list any chores she participates in the household.

| APPLICABLE RULE | |
|------------------------|---|
| R 400.1409 | Resident rights; licensee responsibilities. |
| | <p>(1) Upon a resident's admission to the home, the licensee shall inform and explain to the resident or the resident's designated representative all of the following resident rights:</p> <p>(h) The right to participate in the activities of social, religious, and community groups at his or her own discretion.</p> <p>(o) The right to be treated with consideration and respect, with due recognition of personal dignity, individuality, and the need for privacy.</p> |
| ANALYSIS: | <p>Resident B, Resident C, Resident D, Resident E and Resident F stated that Licensee Ann Stevens is making them do chores at the home on a daily or weekly basis.</p> <p>On September 5, 2018, all the residents were observed working hard in the kitchen cleaning, washing dishes, and taking out the trash.</p> |
| CONCLUSION: | VIOLATION ESTABLISHED |

On September 5, 2018, I conducted an exit conference with Licensee Ann Stevens at Ann's AFC. I informed Licensee Stevens that a corrective action plan would be requested for the violations. Licensee Stevens stated that she would be completing the corrective action plan.

IV. RECOMMENDATION

Upon the receipt of an acceptable and approved corrective action plan, no change to the license status is recommended.

Crecendra Brown

October 5, 2018

Crecendra Brown
Licensing Consultant

Date

Approved By:

Mary Holton

October 5, 2018

Mary E Holton
Area Manager

Date