



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

SHELLY EDGERTON  
DIRECTOR

August 29, 2018

Melissa Williams  
Beacon Specialized Living Services, Inc.  
Suite 110  
890 N. 10th St.  
Kalamazoo, MI 49009

RE: License #: AS250387844  
Investigation #: 2018A0501039  
Beacon Home at Washburn

Dear Ms. Williams:

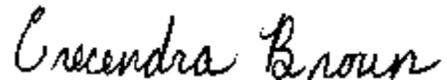
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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**

<b>License #:</b>	AS250387844
<b>Investigation #:</b>	2018A0501039
<b>Complaint Receipt Date:</b>	06/25/2018
<b>Investigation Initiation Date:</b>	06/25/2018
<b>Report Due Date:</b>	08/24/2018
<b>Licensee Name:</b>	Beacon Specialized Living Services, Inc.
<b>Licensee Address:</b>	Suite 110 890 N. 10th St. Kalamazoo, MI 49009
<b>Licensee Telephone #:</b>	(269) 427-8400
<b>Administrator:</b>	Melissa Williams
<b>Licensee Designee:</b>	Melissa Williams
<b>Name of Facility:</b>	Beacon Home at Washburn
<b>Facility Address:</b>	8012 Washburn Rd. Goodrich, MI 48438
<b>Facility Telephone #:</b>	(269) 427-8400
<b>Original Issuance Date:</b>	09/07/2017
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	03/07/2018
<b>Expiration Date:</b>	03/06/2020
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Staff allowed Resident A to eat three cans of frosting, his teeth started hurting and staff were told to make an emergency dental appointment for the morning, but no one made the appointment.	No
Staff are not feeding the residents three meals a day and the home frequently does not have any food.	No
Resident B receives \$1,300 a month and only sees \$57 of it.	No
Residents are going to bed urine soaked.	No
Additional Findings	Yes

**III. METHODOLOGY**

06/25/2018	Special Investigation Intake 2018A0501039
06/25/2018	Special Investigation Initiated - Letter
06/25/2018	APS Referral Genesee County Adult Protective Services Kelly Clark-Huey.
07/12/2018	Inspection Completed On-site Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident A, Resident B, and Home Manager Jennifer Stancroff.
07/19/2018	Contact - Telephone call made Guardian 1.
07/20/2018	Contact - Telephone call made Guardian 2.
07/20/2018	Contact - Document Received Genesee County Adult Protective Services Kelly Clark-Huey.
07/20/2018	Exit Conference Licensee Designee Melissa Williams.
08/02/2018	Exit Conference Licensee Designee Melissa Williams.
08/10/2018	Exit Conference Licensee Designee Melissa Williams.

## **ALLEGATION:**

Staff allowed Resident A to eat three cans of frosting, his teeth started hurting and staff were told to make an emergency dental appointment for the morning, but no one made the appointment.

## **INVESTIGATION:**

On July 12, 2018, I conducted an onsite investigation at Beacon Washburn. Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident A, and Home Manager Jennifer Stancroff were interviewed.

Staff Toni Little stated that Resident A did go to an emergency dental appointment, but she was not sure about the date. Staff Little stated that they did not know that Resident A had ate the frostings and nothing like that had happened before.

Staff Katelyne Dobson stated that Resident A went to the dental on a Monday and she thinks the incident happen on a Saturday. Staff Dobson stated that she did not know when Resident A ate the frosting, but he did eat at least one can of frosting.

Staff Derrick Jones stated that he does not know anything about the allegation.

Resident A stated that he took the frosting from the kitchen cabinet back to his room and ate it. Resident A stated that he ate three cans of frosting and his teeth started hurting. Resident A stated that there were no staff in the kitchen when he took the frosting. Resident A stated that his teeth are feeling better. Resident A stated that he told the staff that his teeth were hurting and he went to the dentist sometime that next week. Resident A said he ate the frosting because he was hungry.

Home Manager Jennifer Stancroff stated that Resident A was taken to see the dentist on Monday, June 25, 2018. Home Manager Jennifer Stancroff stated that on Thursday, June 21, 2018 Resident A told staff he had ate three cans of frosting and his teeth were hurting. Home Manager Stancroff stated that Resident A was not taken to the dentist Friday because he said his mouth was fine, but then he said it hurt again on Saturday. Home Manager Stancroff stated that Resident A has access to the kitchen and that is how he was able to get the frosting to eat.

Home Manager Jennifer Stancroff stated that the dentist office was contacted Monday and Resident A was taken to the dentist office that Monday. Home Manager Stancroff provided me with documentation that Resident A was prescribed Colgate Sensitive toothpaste and had no further documentation. Resident A's health care appraisal does not list any special diet instructions. Resident A's assessment plan states that he has a special diet and it also states that he is on a regular diet.

On July 20, 2018, I conducted a phone interview with Guardian 2. Guardian 2 is Resident A's guardian. Guardian 2 stated that she didn't know anything about the allegation. Guardian 2 stated that no one at the home or from the corporation has contacted her about Resident A eating frosting at all or about him having to go to the dentist. Guardian 2 stated that she didn't understand how Resident A was able to get the cans of frosting and the home knows he is not supposed to have sugar because of his behavior problems. Guardian 2 stated that Resident A has gained a lot of weight since he has been placed in that home, but she is unable to take care of him in her home. I reviewed Resident A's weight record. Resident A's recorded weight in November 2017 was 149 pounds and his recorded weight in July 2018 190 pounds.

On July 20, 2018, I received an email from Genesee County Adult Protective Services Kelly Clark-Huey. Ms. Huey reported that she would not be substantiating anything against the home.

<b>APPLICABLE RULE</b>	
<b>R 400.14310</b>	<b>Resident health care.</b>
	<b>(4) In case of an accident or sudden adverse change in a resident's physical condition or adjustment, a group home shall obtain needed care immediately.</b>
<b>ANALYSIS:</b>	Resident A, Staff Katelyne Dobson and Home Manager Jennifer Stancroff stated that Resident A did eat some cans of frosting. Home Manager Jennifer Stancroff stated that on Thursday, June 21, 2018 Resident A told staff he had ate three cans of frosting and his teeth were hurting, but he was not taken to the dentist until Monday, June 25, 2018.  Home Manager Jennifer Stancroff stated that the dentist office was contacted on Monday and Resident A was taken to the dentist on that Monday. Resident A was prescribed Colgate Sensitive toothpaste.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

Staff are not feeding the residents three meals a day and the home frequently does not have any food.

## **INVESTIGATION:**

On July 12, 2018, I conducted an onsite investigation at Beacon Washburn. Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident A, Resident B, and Home Manager Jennifer Stancroff were interviewed.

Staff Toni Little stated that the allegation was not true. Staff Little stated that all residents are fed three meals a day. Staff Little showed me the refrigerators, freezers and cabinets. I observed plenty of food in the refrigerator, freezers and the cabinets.

Staff Katelyne Dobson stated that the allegation was not true. Staff Dobson stated that the residents are fed three meals a day and more if they want it. Staff Dobson stated that there is plenty of food in the home.

Staff Derrick Jones stated that the allegation was not true. Staff Jones stated that the residents are fed three meals a day and more if they request it. Staff Jones stated that the home always has food.

Resident A stated that the allegation was not true. Resident A stated that they get plenty to eat and he usually eats more than three times a day. Resident A stated that he has never went hungry in the home.

Resident B stated that the allegation was not true. Resident B stated that they eat every day and he doesn't remember a day the home didn't have food. Resident B stated that he would like to have more kosher options.

Home Manager Jennifer Stancroff stated that the allegation was not true. Home Manager Stancroff stated that the residents receive three meals a day and more if they request it. Home Manager Stancroff stated that the home always has food for the residents.

On July 19, 2018, I conducted a phone interview with Guardian 1. Guardian 1 is Resident B' guardian. Guardian 1 stated that he has never heard the allegation before. Guardian 1 stated that the home always has food when he has went to the home. Guardian 1 stated that Resident B has never reported he is not being fed. I reviewed Resident B's weight record. Resident A's recorded weight in December 2017 was 210 and his recorded weight in July 2018 is 249.

On July 20, 2018, I conducted a phone interview with Guardian 2. Guardian 2 is Resident A's guardian. Guardian 2 stated that Resident A gets plenty to eat in the home and has gained a lot of weight. I reviewed Resident A's weight record. Resident A's recorded weight in November 2017 was 149 pounds and his recorded weight in July 2018 190 pounds.

<b>APPLICABLE RULE</b>	
<b>R 400.14313</b>	<b>Resident nutrition.</b>
	<b>(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.</b>
<b>ANALYSIS:</b>	Guardian 1, Guardian2, Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident A, Resident B, and Home Manager Jennifer Stancroff stated that the residents receive 3 meals a day and they get plenty to eat.  I observed plenty of food in the refrigerator, freezers and the cabinets.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

Resident B receives \$1,300 a month and only sees \$57 of it.

**INVESTIGATION:**

On July 12, 2018, I conducted an onsite investigation at Beacon Washburn. Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident B, and Home Manager Jennifer Stancroff were interviewed.

Staff Toni Little stated that the allegation was not true. Staff Little stated that Resident B's guardian pays his room and board. Staff Little stated that Resident B's guardian sends him \$60 a month spending money. I reviewed Resident B's Funds Part II forms and Guardian 1 sends him a check for \$60 every month.

Staff Katelyne Dobson stated that she doesn't know anything about any of the residents' funds.

Staff Derrick Jones stated that he doesn't know anything about the allegation.

Resident B stated that he only receives \$60 a month and his guardian is not telling him where the rest of the money is going. Resident B stated that he does not like his guardian and that his guardian treats him like a terrorist.

I reviewed Resident B's Funds Part II forms. Every month, Resident B receives \$60 from his guardian. Resident B signs every month that he received the \$60. Resident

B's Funds Part II forms did not show the monthly payments for this adult foster care services.

Home Manager Jennifer Stancroff stated that Resident B's guardian sends a \$60 check every month for him. Home Manager Stancroff stated that they have no control over Resident B's money and everything is sent to the corporation office before any funds is sent to the home.

On July 19, 2018, I conducted a phone interview with Guardian 1. Guardian 1 is Resident B' guardian. Guardian 1 stated that Resident B is sent \$60 a month for spending money and the rest of his money goes towards his care, which is over \$1,300.00 a month. Guardian 1 stated that he does not get paid to be Resident B's guardian. Guardian 1 stated that Resident B can be very difficult and he has been in a lot of placements because he threatens to kill and rape people or children. Guardian 1 stated that he was Resident A's fourth guardian and Resident B had already been in 12 placements in a short time frame. Guardian 1 stated that Resident B wants the guardianship terminated and he wants to live independently, but the courts keep denying his requests.

<b>APPLICABLE RULE</b>	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	<b>(5) All resident funds, which includes bank accounts, shall be kept separate and apart from all funds and monies of the licensee. Interest and dividends earned on resident funds shall be credited to the resident. Payments for care for the current month may be used by the licensee for operating expenses.</b> <b>(7) A resident shall have access to and use of personal funds that belong to him or her in reasonable amounts, including immediate access to not less than \$20.00 of his or her personal funds. A resident shall receive up to his or her full amount of personal funds at a time designated by the resident, but not more than 5 days after the request for the funds. Exceptions to this requirement shall be subject to the provisions of the resident's assessment plan and the plan of services.</b>

<b>ANALYSIS:</b>	<p>Resident B, Staff Toni Little, Home Manager Jennifer Stancroff and Guardian 1 stated that Resident B receives \$60 a month from Guardian 1.</p> <p>Resident B's Funds Part II forms show that he receives \$60 a month from Guardian 1.</p> <p>Guardian 1 stated that the rest of Resident A's money goes towards his care and Guardian 1 is not paid anything.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

Residents are going to bed urine soaked

**INVESTIGATION:**

On July 12, 2018, I conducted an onsite investigation at Beacon Washburn. Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident A, Resident B, and Home Manager Jennifer Stancroff were interviewed.

Staff Toni Little stated that the allegation was not true. Staff Little stated that none of the residents wear an adult diaper and they all go to bathroom independently. Staff Little stated that they make sure all the resident has clean clothing and clean bedding. I observed no urine smell in the home.

Staff Katelyne Dobson stated that the allegation was not true. Staff Dobson stated that she has never witness any of the residents in urine-soaked clothing. Staff Dobson stated that they make sure everyone stays appropriate with their hygiene.

Staff Derrick Jones stated that the allegation was not true. Staff Jones stated that he has never seen any residents urine soaked.

Resident A stated that he has never been soaked in urine. Resident A stated that he goes to the bathroom on his own. Resident A stated that he hasn't seen anyone else in urine soaked clothing.

Resident B stated that he doesn't wet himself. Resident B stated that there was no one currently in the home that wetted themselves. Resident B stated that staff checks to make sure they stay clean.

Home Manager Jennifer Stancroff stated that the allegation was not true. Home Manager Stancroff stated that no residents are being left urine soaked in their beds.

Home Manager Stancroff stated that all the residents in the home can go to the bathroom on their own.

On July 19, 2018, I conducted a phone interview with Guardian 1. Guardian 1 is Resident B' guardian. Guardian 1 stated that he has never witnessed that happening in the home and he doesn't believe it is true.

On July 20, 2018, I conducted a phone interview with Guardian 2. Guardian 2 is Resident A's guardian. Guardian 2 stated that Resident A is fully ambulatory and he takes care of his own hygiene with verbal direction. Guardian 2 stated that Resident A has never had a problem with urinating on himself or going to the restroom.

<b>APPLICABLE RULE</b>	
<b>R 400.14314</b>	<b>Resident hygiene.</b>
	<p><b>(1) A licensee shall afford a resident the opportunity, and instructions when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.</b></p> <p><b>(4) A licensee shall afford a resident opportunities, and instruction when necessary, to dress as fashion, fit, cleanliness, and season warrant.</b></p> <p><b>(5) A licensee shall afford a resident with opportunities, and instructions when necessary, to routinely launder clothing. Clean clothing shall be available at all times.</b></p>
<b>ANALYSIS:</b>	Guardian 1, Guardian 2, Staff Toni Little, Staff Katelyne Dobson, Staff Derrick Jones, Resident A, Resident B, and Home Manager Jennifer Stancroff stated that the allegation was not true and no one is going to bed urine soaked.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

On July 12, 2018, I conducted an onsite investigation at Beacon Washburn. Staff Toni Little, Staff Katelyne Dobson and Home Manager Jennifer Stancroff were interviewed.

I asked to review Resident A's assessment plan and a completed assessment plan was not on file in the home. The home is using an assessment plan that appears to be created in Microsoft Word and has not been approved by Licensing. The assessment plan does not cover everything that needs to be addressed from the State of Michigan assessment plan and it does not have any signatures or dates on it.

<b>APPLICABLE RULE</b>	
<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	<p><b>(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions:</b></p> <p><b>(a) The amount of personal care, supervision, and protection that is required by the resident is available in the home.</b></p> <p><b>(b) The kinds of services, skills, and physical accommodations that are required of the home to meet the resident's needs are available in the home.</b></p> <p><b>(c) The resident appears to be compatible with other residents and members of the household.</b></p> <p><b>(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.</b></p>
<b>ANALYSIS:</b>	Resident A does not have a completed assessment plan on file in the home.
<b>CONCLUSION:</b>	<b>REPEAT VIOLATION ESTABLISHED Renewal Inspection Report dated February 21, 2018.</b>

On July 20, 2018, I attempted to conduct a phone exit conference with Licensee Designee Melissa Williams. I left a voice message for her to call me back.

On August 2, 2018, Licensee Melissa Williams left me a voice message stating she received my message and I could call her back about the exit conference.

