GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 20, 2021

Paula Gutzman
20271 East Ave. N
Battle Creek, MI 49017

RE: License #: AF130237395
Investigation #: 2021A1024026
Reflection Ranch

Dear Mrs. Gutzman:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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,

Ondrea Johnson

Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems
427 East Alcott
Kalamazoo, MI 49001

enclosure

03/25/2021

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

I. IDENTIFYING INFORMATION

License #:	AF130237395
Investigation #:	2021A1024026
Complaint Receipt Date:	03/24/2021
Investigation Initiation Date:	03/25/2021
Report Due Date:	05/23/2021
Licensee Name:	Paula Gutzman
Licensee Address:	20271 East Ave. N Battle Creek, MI 49017
Licensee Telephone #:	(269) 339-3082
Administrator:	N/A
Licensee Designee:	N/A
Name of Facility:	Reflection Ranch
Facility Address:	20271 East Avenue N Battle Creek, MI 49017
Facility Telephone #:	(269) 339-3082
Original Issuance Date:	10/16/2001
License Status:	REGULAR
Effective Date:	03/25/2020
Expiration Date:	03/24/2022
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A is not being adequately taken care of by the licensee or direct care staff members.	No

III. METHODOLOGY

03/24/2021	Special Investigation Intake 2021A1024026
03/25/2021	Special Investigation Initiated – Letter-email correspondence with APS Specialist Jennifer Stockford
03/30/2021	Contact - Telephone call made with Paula Gutzman and Jim Gutzman
03/30/2021	Contact - Document Received-Resident A's *AFC Care Agreement*, *Assessment Plan for AFC Residents*, *Weight Record, Health Care Appraisal*
04/20/2021	Contact - Telephone call made with Adult Protective Service Specialist Jennifer Stockford
04/20/2021	Contact - Telephone call made with Relative A1
04/20/2021	Contact - Telephone call made with Relative A2
04/20/2021	Contact - Document Received-*Discharge Summary* and *Hospice IDG Comprehensive Assessment and Plan of Care Update Report* from Rachel Adams with Medilodge Nursing Home
04/21/2021	Contact - Telephone call made with nurse Crystal Morrow with Elara Caring Hospice
04/21/2021	Contact - Telephone call made with administrator Kayla Brooks and nursing director Nichole Roy with Heartland Hospice
04/21/2021	Contact - Document Received-*Discharge Summary* from clinical coordinator Doris Watson with Elara Caring Hospice
05/03/2021	Inspection Completed On-site with licensee Paula Gutzman
05/03/2021	Exit Conference with Paula Gutzman

05/07/2021	Contact-Document Received- Letter to request closure of AFC license

ALLEGATION:

Resident A is not being adequately taken care of by the licensee or direct care staff members.

INVESTIGATION:

On 3/24/2021, I received this complaint through the Bureau of Community and Health Systems online complaint system. This complaint alleged Resident A is not being adequately taken care of by the licensee or direct care staff members. This complaint further alleged after Resident A was placed in this AFC home, he could no longer walk and sustained bed sores on his lower back and both hips. This complaint stated Resident A lost 25 pounds since 12/20/20 and is fearful of returning home.

On 3/25/2021, I spoke with Adult Protective Service Specialist (APS) Jennifer Stockford who stated she is also conducting an investigation on this allegation.

On 3/30/2021, I conducted interviews with licensee Paula Gutzman and household member Jim Gutzman regarding this allegation. Ms. Gutzman stated Resident A moved in her adult foster care family home in December of 2020 with assistance from Relative A1 and Relative A2. Ms. Gutzman stated at the time of Resident A's admission, she was informed Resident A could perform his own activities of daily living and was completely ambulatory however needed minimal assistance with bathing and hygiene as Resident A had a history of not wanting to shower. Ms. Gutzman stated she did not believe she was given accurate information regarding Resident A's level of care needs because over a short amount of time, Resident A began to show signs of needing additional assistance with eating, toileting, and mobility as Resident A demonstrated a very poor balance when walking and needed constant reminders to change his briefs. Ms. Gutzman also stated she noticed that she had to prompt Resident A to eat and cut his meals up for him along with needing to check Resident A's briefs daily and prompt Resident A to use the toilet regularly. Ms. Gutzman stated Resident A soiled his briefs with feces and urine regularly and used about 25 briefs in a week. Ms. Gutzman stated she repeatedly had to put in a request to Resident A's family members to purchase more briefs because of his incontinence issue that was not disclosed at the time Resident A was admitted to the facility. Ms. Gutzman stated during the first month of Resident A living in her home he was more active and enjoyed watching television, going out for walks and being out in the community. Ms. Gutzman stated eventually Resident A began to be less active and insisted on staying inside in his bed. Ms. Gutzman also observed Resident A to be more particular about the meals he ate as Resident A wanted to consistently eat snacks like candy and pop. Ms. Gutzman stated she eventually

learned Resident A had hospice services while he lived in a nursing home prior to Resident A's admission to her home. This also was not disclosed during Resident A's admission process. Ms. Gutzman stated when she learned that Resident A had hospice in place prior to his admission and that his needs were more advanced than she anticipated, Ms. Gutzman called Elara Caring Hospice to provide additional services for Resident A in the home. Ms. Gutzman stated she called Elara Caring on 1/25/2021 to set up hospice home help services for Resident A and their first visit to the home was 2/25/2021. Ms. Gutzman stated Elara Caring provided wound care, skilled nursing, and bathing. Ms. Gutzman stated the nurse came out about twice a week and provided wound care services of a total of four hours a week. Ms. Gutzman stated by the month of February 2021, Resident A needed total assistance with all activities of daily living and could not sit up on his own.

Ms. Gutzman stated she has not neglected Resident A and since December 2020, Ms. Gutzman has regularly provided meals to Resident A, administered his medications daily and assisted Resident A with bathing and toileting. Ms. Gutzman stated Resident A's relatives did not call or visit with Resident A and have never been involved in Resident A's care. Ms. Gutzman stated they were not satisfied with Resident A living in her home because they wanted Ms. Gutzman to discontinue administering a prescribed medication to Resident A and Ms. Gutzman refused to go against Resident A's physician orders. Ms. Gutzman stated Resident A's family members also chose to have Resident A discontinue with Elara Caring in early March 2021 because they wanted Resident A to participate with Heartland Hospice, which is a service he had in the past. Ms. Gutzman stated she did not agree with this change however allowed for Heartland Hospice to continue to provide home help services to Resident A to replace Elara Caring Hospice. Ms. Gutzman stated on 3/23/2021 Relative A1 visited with Resident A and took him out of the home. Ms. Gutzman stated Resident A was relocated to a nursing home on 3/26/2021. Ms. Gutzman stated although Resident A's level of care needs exceeded her expectations, Ms. Gutzman was able to provide the necessary care to Resident A with assistance from hospice services in the home. Ms. Gutzman believe Resident A was adequately cared for in the home, however his health deteriorated rapidly while living in her home.

Mr. Guzman stated Resident A's relatives were "not friendly people to work with" and they had to be prompted repeatedly to purchase adult briefs for Resident A and wound care treatment. Mr. Gutzman stated Relative A1 was his guardian and she complained all the time however never visited with Resident A. Mr. Gutzman stated Relative A1 tried to persuade Ms. Gutzman to discontinue giving Resident A medication that was prescribed to him by his doctor. Mr. Gutzman stated Relative A1 was very dissatisfied that Ms. Gutzman chose to continue to administer all of his medications that were prescribed. Ms. Gutzman stated on 12/16/2021, Relative A2 came over to give money and pick up a chair that Resident A was no longer able to use. During this time, Relative A2 was not happy because he was asked to wear a mask due to COVID-19 restrictions therefore Relative A2 picked up the chair however never asked to see Resident A to visit with him. Mr. Gutzman stated there

were two different hospice programs that provided services to Resident A while he lived in the home about three times a week. Mr. Gutzman believe Resident A was properly cared for and had the appropriate assistance that he needed from hospice.

On 3/30/2021, I reviewed Resident A's *Assessment Plan for AFC Residents* (plan) dated 12/20/2020. According to this plan, Resident A will sometimes refuse his medications and wants to argue when communicating. The plan stated Resident A does not want to drink water or eat fruit and Resident A refuses to take showers and clean his clothes. The plan documented Resident A cannot take stairs or climb and needs total assistance with bathing. The plan also stated Resident A cannot keep his bottom clean and is a fall hazard because he refuses to wear good shoes during the daytime. Additional comments in the plan stated Resident A argues with everyone and does not know reality. Resident A will not tell the truth and Resident A does not want to shower, shave, or brush his teeth. Resident A does not need assistance with toileting, mobility, eating, or hygiene according to his assessment plan.

I reviewed Resident A's *AFC-Resident Care Agreement* (agreement) dated 12/1/2020. According to this agreement, the care and services agreed upon are to be based upon the license's written assessment of the amount of personal care, supervision, and protection required by the resident.

I reviewed Resident A's *Weight Record*. According to this record, Resident A weighed 140 lbs. on 12/1/2021, 1/9/2021 and 2/9/2021. On 3/9/2021, Resident A weighed 135 lbs.

I also reviewed Resident A's *Health Care Appraisal* dated 11/30/202. According to Resident A's appraisal Resident A's weight was 163 lbs and his ideal weight range is between 155 lbs to 180 lbs. The appraisal stated, Resident A has a regular diet and is diagnosed with vascular dementia with behavioral disturbance, diabetes, and hemorrhagic CLA. It should be noted there is no mention of Resident A having any incontinence issues or mobility issues.

On 4/20/2021, I conducted an interview with APS Specialist Jennifer Stockford. Ms. Stockford stated she interviewed Resident A and Resident A expressed no concerns with his living arrangement and the care received by Ms. Gutzman. Ms. Stockford stated Resident A stated to her that he felt safe with Ms. Gutzman and was not afraid to return to Ms. Gutzman's care. Ms. Stockford stated Resident A advised her that he believed Relative A1 and Ms. Gutzman had some disagreements about certain things however Resident A did not share these same concerns as Relative A1. Ms. Stockford stated she observed Resident A to use a walker. Ms. Stockford stated Relative A1 relocated him from Ms. Gutzman's home to a nursing care facility. Ms. Stockford stated she spoke with Relative A1 and her main concern was that Resident A was taking a medication that she did not want him to take while he was living at Reflection Ranch.

On 4/20/2021, I conducted an interview with Relative A1. Relative A1 stated Resident A was discharged from a nursing home prior to his admission to Reflection Ranch because Resident A always complained and no longer wanted to live in a nursing home. Relative A1 stated she was informed by Ms. Gutzman that visitors were allowed as long as she wore a mask and gloves. Relative A1 stated shortly after Resident A moved in the home, Relative A1 was informed that due to new COVID-19 restrictions visitors were not allowed to come inside the home however could conduct window visits with the residents. Relative A1 stated she was not happy with this restriction in place. Relative A1 stated she went to visit with Resident A on his birthday because she wanted to drop off a robe for his birthday. Relative A1 stated she dropped off the robe however was not able visit with Resident A because Ms. Gutzman did not have him at the window prepared to visit. Relative A1 stated she did not ask Ms. Gutzman if she could see Resident A and left after dropping off his robe. Relative A1 stated she never got a chance to visit with Resident A during his stay at Reflection Ranch and did not talk to him. Relative A1 stated she believed Resident A was not adequately cared for while living at Reflection Ranch because at the time of admission in December 2020, Resident A was able to perform all of his activities of daily living independently and when she picked him up on 3/23/2021, Resident A could no longer walk and could no longer perform any activities of daily living on his own. Relative A1 stated when Resident A lived in a nursing home prior to his admission at Reflection Ranch, Resident A was also able to perform his own activities of daily living independently and supervision was only required. Relative A1 stated Resident A was put on medication called Haldol by his physician and once she learned that this medication caused balance issues, she tried to talk to Resident A's physician about discontinuing the medication however the medication was not discontinued by his physician. Relative A1 also stated she asked Ms. Gutzman to discontinue administering the medication to Resident A however Ms. Gutzman informed her that she had to continue to administer the medication until the doctor instructed her not to do so. Relative A1 stated she was not happy that Ms. Gutzman would not stop giving Resident A the medication even if the medication was prescribed to him by his physician. Relative A1 stated in January 2021 Ms. Gutzman called her to inform her that she wanted hospice services in the home for Resident A due to his advance level of care needs. Relative A1 stated she did not agree with the hospice provider preferred by Ms. Gutzman and eventually was able to put Heartland Hospice in the home. Relative A1 stated Ms. Gutzman complained about Heartland Hospice not coming on time and complained about their services to her regularly however Relative A1 believe Heartland Hospice was providing adequate service to Resident A. Relative A1 stated she eventually removed Resident A from the home on 3/26/2021 because his conditions were getting worse while living in the home. Relative A1 stated Resident A continued with Heartland Hospice services until his passing on 4/17/2021.

On 4/20/2021, I conducted an interview with Relative A2. Relative A2 stated in 2018 Resident A had a stroke and was placed at a nursing home. Relative A2 stated he was eventually diagnosed with vascular dementia and started refusing to take his medications. Relative A2 stated Resident A eventually became more agitated with

being in a nursing home and wanted to leave. Relative A2 stated the nursing home social worker suggested that Resident A be discharged because he was so unhappy living in the nursing home. Relative A1 stated in December 2020 Resident A was admitted to Reflection Ranch at which time he was able to walk without assistance and perform his own personal care needs. Relative A2 stated upon admission Ms. Gutzman advised that due to the CDC guidelines the residents in her home were only able to have window visits with visitors and she was not allowed to have visitors come inside the home. Relative A2 stated he spoke with Resident A on the phone on his birthday since he did not want to conduct a window visit with Resident A. Relative A2 stated in February 2021 he was notified by his sister that Resident A was participating in hospice services and Elara Caring Hospice was the provider. Relative A2 stated his sister preferred Heartland Hospice to be the provider therefore the hospice provider was changed from Elara Caring to Heartland in March 2021. Relative A2 stated he became concerned when Resident A was taken to see his VA doctor on 3/25/2021 and he was observed in a wheelchair and had ulcers on him. Relative A2 stated he believe Resident A was not adequately cared for because Resident A was ambulatory and in a better condition at the time of his admission at Reflection Ranch. Relative A2 also stated Resident A lost about 30 lbs. while he lived in the home therefore Relative A2 believe Resident A was neglected.

On 4/20/2021, I reviewed Resident A's *Discharge Summary* dated 11/27/2021 from Rachel Adams with Medilodge Nursing Home. According to this summary, Resident A was admitted to Medilodge of Westwood nursing home on 12/13/2018. Resident A was diagnosed with the following: essential hypertension, major depressive disorder, mood disorder due to known physiological condition with manic features, hyperlipidemia, unspecified sequelae of unspecified cerebrovascular disease, vascular dementia with behavioral disturbance, and encounter for screening for other viral diseases. According to this summary, Resident A did not need assistance with dressing, bathing, feeding, toileting, and mobility. Resident A was discharged on 12/1/2020.

I also reviewed *Hospice IDG Comprehensive Assessment and Plan of Care Update Report* (report) dated 7/29/2020. According to this report, Resident A began hospice care on 7/5/2019 and was discharged on 7/24/2020. According to this report, Resident A was diagnosed with hemiplegia following cerebral infarction affecting unspecified side, vascular dementia, cerebrovascular disease, adult failure to thrive, Type II diabetes mellitus without complications, encounter for palliative care and tobacco use.

On 4/21/2021, I conducted an interview with nurse Crystal Marrow from Elara Caring Hospice. Ms. Marrow stated she provided nursing services for Resident A for about two weeks set up by Ms. Gutzman in the month of February and March. Ms. Marrow stated she came out to the home twice a week and assisted with wound care needs and dressing changes. Ms. Marrow stated Resident A also had a bath aide to assist with bathing twice a week. Ms. Marrow stated Resident A needed assistance with transferring and used a wheelchair for mobility. Ms. Marrow stated she had no

concerns for Ms. Gutzman and the care she provided to Resident A. Ms. Marrow further stated Resident A was eventually discharged from their service due to the family's request of wanting to change providers.

On 4/21/2021, I conducted interviews with administrator Kayla Brooks and nursing director Nichole Roy from Heartland Hospice. According to both Mr. Brooks and Ms. Roy, Resident A was provided with hospice care services in his adult foster care placement setting on 3/13/2021 set up by Relative A1. Resident A received nursing care services 3 times a week and a bath aide twice a week. Resident A also received wound care in the home. Mr. Brooks stated Relative A1 expressed concerns with the care provided to Resident A by Ms. Gutzman on 3/23/2021 therefore Resident A was relocated to Advantage Living Nursing home on 3/23/2021 where his hospice care services continued until Resident A passed away on 4/17/2021. Mr. Brooks stated Relative A1 reported to them on 3/23/2021 that she was concerned for Resident A's care because Resident A reported to her, while at a doctor's visit, that he was afraid to return back to Ms. Gutzman's home. Mr. Brooks and Ms. Roy stated no reports of concerns regarding care were brought to their attention from the nurse and bath aide that provided services in the home.

On 4/21/2021, I reviewed Resident A's *Discharge Summary* from clinical coordinator Doris Watson with Elara Caring Hospice. According to this summary, Resident A participated with hospice services with Elara Caring from 2/23/2021 to 3/11/2021. As of 2/23/2021, Resident A had additional diagnosis of anxiety disorder, full incontinence of feces, and pressure ulcer of sacral region stage 3. Resident A was discharged per family request.

On 5/3/2021, I conducted an onsite investigation at the facility and interviewed licensee designee Paula Gutzman. Ms. Gutzman stated she has been presented with an offer from a seller who would like to purchase her home and since Ms. Gutzman no longer has residents in care, she is going to close her adult foster care license.

On 5/7/2021, I reviewed closure of license letter written by Ms. Gutzman. According to the letter dated 5/6/2021, Ms. Gutzman would like to close her family adult foster care license.

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.**
	(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the

	licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.
ANALYSIS:	Based on my investigation which included interviews with licensee Paula Gutzman, household member Jim Gutzman, Relative A1, Relative A2, APS Specialist Jennifer Stockford, nurse Crystal Morrow, administrator Kayla Brooks and nursing director Nichole Roy, review of Resident A's *Assessment Plan for AFC Residents, AFC-Resident Care Agreement, Weight Record, Health Care Appraisal, Hospice IDG Comprehensive Assessment and Plan of Care Update Report,* there is no evidence to support the allegation Resident A is not being adequately taken care of by the licensee or any direct care staff members. Ms. Gutzman stated at the time of admission, she was provided with inaccurate information of Resident A's level of care needs which led to Ms. Gutzman setting up additional services in the home to assist with Resident A's personal care needs. According to Relative A1 and Relative A2, Resident A was able to independently perform all of his personal care needs at the time of admission at Refection Ranch in December 2020 but by March 2021 Resident A was observed to need total assistance with all of his activities of daily needs. According to previous hospice assessment, Resident A participated in hospice care while residing in a nursing home with a diagnosis of adult failure to thrive 5 months prior to his admission at Reflection Ranch. Mr. Brooks and Ms. Roy stated Heartland provided hospice services to Resident A from 3/13/2021 to 4/17/2021 and there were no reports of having any concerns for the care Resident A received from Ms. Gutzman. Elara Caring also reported having no concerns for the care provided by Ms. Gutzman. Ms. Gutzman stated although Resident A personal care needs exceeded her expectations, she was still able to provide adequate care to Resident A with hospice home help in place and by providing meals, administering medications, and assisting with bathing and toileting needs. The care agreement stated the care and services agreed upon are to be based upon the license's written assessment of the amount of personal care, supervision, and protection required by the resident therefore Resident A was adequately cared for by Ms. Gutzman.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

On 5/3/2021, I conducted an exit conference with licensee Ms. Gutzman. I informed Ms. Gutzman of my findings and allowed her an opportunity to ask questions or make comments.

IV. RECOMMENDATION

I recommend closure of this license per the licensee's request.

Ondrea Johnson_ 5/12/2021

Ondrea Johnson Date
Licensing Consultant

Approved By:

Dawn Timm 05/20/2021

_____

Dawn N. Timm Date
Area Manager