



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 16, 2021

Bruce Marlowe II  
Neighborhood Living Services Inc  
Apt. 10C  
15801 Providence Dr.  
Southfield, MI 48075

RE: License #: AM820009949  
Investigation #: 2021A0778020  
Norfolk House

Dear Mr. Marlowe II:

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:

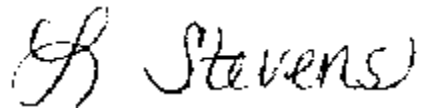
- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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.

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 (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "LaKeitha Stevens". The signature is written in a cursive, flowing style.

LaKeitha Stevens, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 949-3055

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM820009949
<b>Investigation #:</b>	2021A0778020
<b>Complaint Receipt Date:</b>	04/08/2021
<b>Investigation Initiation Date:</b>	04/12/2021
<b>Report Due Date:</b>	06/07/2021
<b>Licensee Name:</b>	Neighborhood Living Services Inc
<b>Licensee Address:</b>	Apt. 10C 15801 Providence Dr. Southfield, MI 48075
<b>Licensee Telephone #:</b>	(313) 886-8446
<b>Administrator:</b>	Bruce Marlowe II
<b>Licensee Designee:</b>	Bruce Marlowe II
<b>Name of Facility:</b>	Norfolk House
<b>Facility Address:</b>	23001 Norfolk Detroit, MI 48219
<b>Facility Telephone #:</b>	(313) 535-0601
<b>Original Issuance Date:</b>	07/09/1983
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	03/30/2020
<b>Expiration Date:</b>	03/29/2022
<b>Capacity:</b>	12
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

	MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED
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**II. ALLEGATION(S)**

	<b>Violation Established?</b>
A Payee Review was conducted and on 4/8/2021 licensee/payee was asked about transfers of funds from residents' accounts. Payee reported the funds were transferred from the residents' accounts to his operating account because he needed funds in his operating account.	Yes
Additional Findings	Yes

**III. METHODOLOGY**

04/08/2021	Special Investigation Intake 2021A0778020
04/12/2021	Special Investigation Initiated - Telephone Telephone call made to the complainant. I left a message to return my call.
04/12/2021	APS Referral APS complaint generated.
04/14/2021	Contact - Telephone call made. Telephone call to the complainant.
04/19/2021	Contact - Telephone call made. Telephone call made to Bruce Marlow, licensee designee.
05/05/2021	Contact - Telephone call made. Telephone call made to Mr. Marlowe.
05/17/2021	Contact - Document Received Received additional documentation.

05/21/2021	Contact - Document Received Received documentation requested.
06/03/2021	Contact - Telephone call made. Telephone call made to complaint regarding specific figures.
06/11/2021	Exit Conference Telephone exit conference with Mr. Marlowe

**ALLEGATION: A Payee Review was conducted and on 4/8/2021 licensee/payee was asked about transfers of funds from residents' accounts. Payee reported the funds were transferred from the residents' accounts to his operating account because he needed funds in his operating account.**

**INVESTIGATION:** Due to COVID-19 Pandemic and onsite inspection was not completed. On 04/12/2021, I made a telephone call to the complainant. I left a detailed message requesting a return call. On 04/14/2021, I received a telephone call from the complainant. She indicated she was limited in the information she could provide due to the Health Insurance Portability and Accountability Act (HIPAA). She indicated monies were taken out of Residents accounts and used for the operational expenses of the facility.

On 04/19/2021, I made a telephone call to Mr. Bruce Marlowe, licensee designee. Mr. Marlowe stated the allegations in this complaint are true. He stated he went through a period in which many residents moved out of the facility and he lost funding with Detroit Wayne. During that time, he stated he transferred monies from the Residents accounts to pay facility bills and staff. He stated he now has 5 residents but was the payee of 2 residents until recently. He is now the payee of 3 residents. According to Mr. Marlowe, the residents in which he is payee share a collective account. Monies transferred were from Resident A and Resident B. When asked why the residents shared an account, Mr. Marlowe indicated the State of Michigan Social Security Administration advised him to link all the residents in which he is payee to one account. I asked Mr. Marlowe how much money was transferred from the residents account and he stated around two-thousand dollars (\$2000.00) or maybe a little more. Mr. Marlowe said he is attempting to replace the money. I requested Funds and Valuables Forms and Banking information for the residents.

On 05/05/2021, I made a telephone call to Mr. Marlowe. I informed him I have not received the requested information.

On 05/17/2021, I received all requested information.

On 06/03/2021, I made a telephone call to the complainant to verify the total amount retrieved from the residents account by Mr. Marlowe. She stated she did not have a total figure.

I reviewed banking information for the Residents ranging from January 2020- April 2021. Per documentation received I calculated a total of five thousand six hundred and sixty-seven dollars (\$5667.00) transferred from their account.

On 06/11/2021, I completed a telephone exit conference with Mr. Marlowe. I informed him this complaint will be substantiated. I also informed him per my calculation he owes the residents a total of \$5667.00., he stated this number maybe accurate. He indicated he has started repaying the residents back the money owed. I informed Mr. Marlowe he would need to provide detailed documentation on the repayment to the residents. In addition, I informed Mr. Marlowe I am requesting a provisional license because of this complaint.

<b>APPLICABLE RULE</b>	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	<b>(2) The care of any resident funds and valuables that have been accepted by a licensee for safekeeping shall be treated by the licensee as a trust obligation.</b>
<b>ANALYSIS:</b>	Mr. Marlowe transferred monies from the Resident's account to meet the operational needs of the facility.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:** Per telephone interview with Mr. Marlowe and review of Resident's bank statements, Mr. Marlowe borrowed/transferred monies from Resident's account to the facility business account.

<b>APPLICABLE RULE</b>	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	<b>(10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.</b>
<b>ANALYSIS:</b>	Mr. Marlowe indicated he transferred/borrowed monies from the Resident's joint account to his business account with an intent to repay them. Monies were transferred to meet the operational needs of the facility.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Contingent upon submission of an acceptable corrective action plan; a six-month provisional license is recommended.

*S Stevens*

06/16/2021

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LaKeitha Stevens  
Licensing Consultant

Date

Approved By:



06/16/2021

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Ardra Hunter  
Area Manager

Date