



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

December 3, 2021

JoAnn and Edward Kreh  
317 N. 8th St.  
Breckenridge, MI 48615

RE: License #: AM290247447  
Investigation #: 2022A1029003  
Hearts Content

Dear JoAnn and Edward Kreh:

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 (231) 922-5309.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Browning". The script is cursive and fluid, with the first letter of each word being capitalized and larger than the others.

Jennifer Browning, Licensing Consultant  
Bureau of Community and Health Systems  
[Browningj1@michigan.gov](mailto:Browningj1@michigan.gov)  
989-444-9614

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM290247447
<b>Investigation #:</b>	2022A1029003
<b>Complaint Receipt Date:</b>	10/11/2021
<b>Investigation Initiation Date:</b>	10/12/2021
<b>Report Due Date:</b>	12/10/2021
<b>Licensee Name:</b>	Edward Kreh
<b>Licensee Address:</b>	317 N. 8th St., Breckenridge, MI 48615
<b>Licensee Telephone #:</b>	(989) 842-1818
<b>Administrator:</b>	Edward Kreh
<b>Licensee Designee:</b>	NA
<b>Name of Facility:</b>	Hearts Content
<b>Facility Address:</b>	317 N. Eighth Street, Breckenridge, MI 48615
<b>Facility Telephone #:</b>	(989) 842-1818
<b>Original Issuance Date:</b>	10/22/2003
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	08/05/2020
<b>Expiration Date:</b>	08/04/2022
<b>Capacity:</b>	12
<b>Program Type:</b>	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

ALLEGATION(S)

	<b>Violation Established?</b>
Mr. Kreh does not have sufficient direct care staff members on duty causing a resident to almost receive the wrong medication and Resident A has a rash that was not tended to.	No
A resident did not receive her meal in a timely manner because Mr. Kreh stated that she “did not eat anyway.”	No
There are straps and pieces missing on the Sit-to-Stand lift and the residents are wearing socks while using the lift causing them to slip.	No
Additional Findings	Yes

**II. METHODOLOGY**

10/11/2021	Special Investigation Intake 2022A1029003
10/12/2021	Contact - Telephone call made to Bridget Vermeesch, licensing consultant
10/12/2021	Contact - Telephone call made to complainant - line busy
10/12/2021	Special Investigation Initiated – Telephone to Brooke Seaman, APS, no concerns with the facility.
10/18/2021	Contact - Face to Face with Edward Kreh, Marilyn Valliere, Candace Wale, Resident A, B, C
11/02/2021	Contact - Telephone call made to direct care staff member Makayla Hitsman
11/12/2021	Contact - Telephone call made to Careline - Kaitlyn Moonan
11/12/2021	Contact - Telephone call made to direct care staff member Sally Felver
11/16/2021	Contact - Document Sent Email from Christin Anderson and Katlyn Moonan, Careline Health Group
11/30/2021	Contact - Telephone call made to direct care staff member Andrew Johnson - number has been disconnected.

11/30/2021	Contact - Telephone call made to direct care staff member Shelly Sumner - left a message for her.
11/30/2021	Contact - Telephone call made to direct care staff member Shelly Sumner
11/30/2021	Contact - Telephone call made to direct care staff member Tara Turner - left a message for her.
11/30/2021	Exit Conference with Edward Kreh

**ALLEGATION:**

**Mr. Kreh does not have sufficient direct care staff members on duty causing a resident to almost receive the wrong medication and Resident A has a rash that was not tended to.**

**INVESTIGATION:**

On October 11, 2021, a complaint was received via the BCAL Online Complaint system alleging that Mr. Kreh does not have sufficient direct care staff members on duty causing a resident to almost receive the wrong medication and another to have a rash that was addressed. Several attempts were made to contact Complainant to receive clarification regarding which resident almost received the wrong medication but Complainant was not available.

On October 12, 2021, I interviewed Brooke Seaman, adult services worker. She stated she has been to Hearts Content several times and last visited around four months ago. She stated the licensee, Edward Kreh, is passionate about the residents and their care. She knows that there have been issues finding enough direct care staff but she does not receive a lot of adult protective services referrals for the facility.

On October 18, 2021, I interviewed licensee Edward Kreh at Hearts Content. Mr. Kreh stated that he has recently hired five new employees. He has had issues regarding staffing because he only had one staff member besides himself. Mr. Kreh stated that his wife, JoAnn Kreh will handle the cooking, shopping, and paperwork. He denied that Mrs. Kreh handled any personal care to the residents. Mr. Kreh stated the residents seem much happier now that they have more assistance. Mr. Kreh stated there are currently ten residents residing at Hearts Content. Mr. Kreh stated that he has not trained the direct care staff members to pass medications because he is the only one that passes medications. He denied there was a time that he gave any resident the wrong medication. Mr. Kreh stated all resident medications are sent in blister packs from Alma Family Pharmacy. During the onsite investigation, I also reviewed the resident records and each residents' *Assessment Plan for AFC Residents*.

On October 18, 2021, I interviewed Marilyn Valliere who works as the beautician at Hearts Content. She comes in and does the resident's hair on a regular basis. Ms. Valliere stated she had no concerns with the staffing and feels the residents are provided good care. Although she does not complete any personal care other than serve as the beautician, she has never observed any of the residents in poor condition indicating they had been neglected. She has had many discussions with the residents while doing their hair and felt they enjoyed living at Hearts Content.

On October 18, 2021, I interviewed direct care staff member, Candace Wale. She stated that she was a new employee that started approximately a week prior. Ms. Wale stated that Mr. Kreh is the only person during third shift but during the day there are always at usually two people working sometimes this is including Mr. Kreh. Ms. Wale stated that there are no residents that have a rash that was not tended to while she worked there for the last week. She stated Resident A has redness currently on her buttocks and they are using a barrier cream regularly. Ms. Wale was the only direct care staff member at the time of the on-site investigation but she felt that she was able to meet the residents needs. She stated there was another direct care staff member that would arrive at 3:30 that would be with her until dinner was done.

On October 18, 2021, I interviewed Resident A at Hearts Content. She stated that she has resided at Hearts Content for over a year and liked it since her family could visit her easily. She stated that she did have a rash on the right side of her buttocks because she is sitting so much. She stated that she likes to sleep in her chair as well. She has a lower vertebra that is deteriorating and it is more comfortable in her chair than the bed. There is a barrier cream, zinc oxide that is used on the rash to use. She feels that it has been clearing up since that is used. Resident A feels that at times the staff are busy, but she does not go without care that she needs.

On October 18, 2021, I interviewed Resident B at Hearts Content. She stated she has resided at Hearts Content since June 2021 and loves it so far. She denies there has been a time that she needed assistance and did not receive it. In the past, there were less direct care staff members working and it was mostly Mr. Kreh working but since he hired more people, it does seem like things are going better.

On October 18, 2021, I interviewed Resident C at Hearts Content. Resident C feels there is enough staff working that everyone gets the care they need. She did not have any concerns regarding the staffing levels at Hearts Content. She voiced concerned about Mr. Kreh because he is the one person on at night and she stated he was up from two to four times per night so he was not able to sleep well.

On November 2, 2021, I interviewed direct care staff member, Makayla Hitsman. She stated she has worked at Hearts Content about a month. She stated when she works there is usually one other person working with her but sometimes she is by herself. She has not observed any resident not receive care as a result of low staffing but it has been easier since Mr. Kreh has hired more direct care staff members.

On November 12, 2021, I received an email from Kaitlyn Moonan, behavioral health care manager at Careline Health Group. She has had concerns with staffing in the past. She stated in the past when she went to the home, sometimes it was only Mr. Kreh and his wife, JoAnn Kreh. She was told that Mr. Kreh was the only person working during the night. Mr. Kreh has told her that he had fallen asleep and was woken up because he fell asleep and a resident's alarm was going off.

On November 12, 2021, I interviewed direct care staff member, Sally Felver. She has worked at Hearts Content for two months. She feels that the staffing has been better and she has never observed a resident to receive inadequate care while employed at Hearts Content. When she works there is at least one other person with her and she feels that is adequate to meet each resident's needs. There are two residents that require the assistance of a Hoyer while being changed but they can both be done by one person. Ms. Felver stated she is able to assist Resident A and Resident C with their personal care alone. When she first started, there were a lot of staff calling in sick however this has improved with the new group of direct care staff member that Mr. Kreh has hired. In the beginning, there were several days that it was just Mr. Kreh and herself working. She has never observed Mr. Kreh accidentally pass medications that were not prescribed to a resident. She has observed Mr. Kreh pass medications several times and he will double check two or three times before he passes the medication.

On November 30, 2021, I called Hearts Content and spoke with direct care staff member, Shelly Sumner. Ms. Sumner has worked at the facility for about a month. She currently works as a direct care staff member doing personal care, cooking, cleaning, and showering. She is not medication trained because she does not pass medications. In the beginning when she started there was not enough direct care staff member but now they have around five or six staff members that work. There is usually three people on during the daytime hours. In the evening it's Mr. Kreh handling anything that needs completed. During her shift, she feels that is adequate to meet all the residents' needs.

On November 30, 2021, I conducted the exit conference with Edward Kreh. He has tripled the time in employee hours per week because he stated that he had provided personal care for the residents in the past. When the direct care staff member come in at 7:30 a.m. they are able to provide the personal care instead of him. There are two employees in the morning. One will go home in at 11:30 a.m. but there is another direct care staff member that will come in at 3:00 p.m. There are two direct care staff members in addition to him during the day. He feels that he is getting caught up and can focus more on the schedules and training. Mr. Kreh stated the residents appear to be happier as well with more direct care staff members in the room throughout the day.

<b>APPLICABLE RULE</b>	
<b>R 400.14206</b>	<b>Staffing requirements.</b>
	<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>	Based on the interviews with Residents A, B, and C along with the direct care staff members Ms. Wale, Ms. Hitsman, Ms. Felver, and Ms. Sumner along with the review of each resident's Assessment Plan for AFC Residents. I found there to be sufficient staff scheduled to work to meet the needs of residents currently residing in the facility. There has been at least two direct care staff members working per shift which is adequate to meet the needs of residents along with being within the required ratio of residents to direct care staff members. Further, based on interviews with Residents A, B, and C along with the direct care staff members Ms. Wale, Ms. Hitsman, Ms. Felver, and Ms. Sumner no one interviewed reported any concerns regarding medication errors at Hearts Content.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

**A resident did not receive her meal in a timely manner because Mr. Kreh stated that she "did not eat anyway."**

**INVESTIGATION:**

On October 11, 2021, a complaint was received via the BCAL Online Complaints system alleging a resident did not receive a meal timely and that Mr. Kreh stated that she "did not eat anyway." Complainant was unavailable after several attempts so there was no clarification which resident did not eat or the date this occurred.

On October 18, 2021, I interviewed Edward Kreh at Hearts Content. He stated residents at heart content received three meals per day. There is never more than 14 hours that pass between meals. However, some of the residents go to bed very early. The majority of days dinner is started around 4:00 p.m. There have been times in the past that residents have refused to eat a meal, however, they are always offered something to eat. Resident A and Resident D have both refused meals in the past. He denied stating that a resident could not have a meal because she did not eat anyway. Mr. Kreh stated the residents are able to have snacks in between their meals when they express they are hungry and the direct care staff members will provide snacks. I reviewed the food supply for the facility and found it to be adequate.



On October 18, 2021, I interviewed Resident A at Hearts Content who stated she has always been fed regularly at Hearts Content. She stated that she has a lot of dietary needs because she is diabetic and has diverticulosis. She stated she cannot have pasta and when they have pasta, they make her a different meal. She stated the food was good and she had no complaints.

On October 18, 2021, I interviewed Resident B at Hearts Content. Resident B described the food as excellent and always gets more than enough food to eat.

I interviewed direct care staff members, Ms. Sumner, Ms. Wale, Ms. Hitsman, and Ms. Felver. They all stated there has not been a time that more than 14 hours will elapse between meals. The longest gap would be between dinner and breakfast because some of the residents prefer to eat dinner as early as between 4:00 p.m. and 5:00 p.m. Ms. Sumner stated some of the residents get up earlier so they start breakfast early and Resident D will eat as late as 9:30 a.m. because Resident D prefers to sleep in. The direct care staff members are willing to accommodate their varied schedules because they feel not everyone wants to eat at the same time and there are only a couple residents that vary their schedules. Most of the residents will eat their meals and there have been a few times when a resident declines because they already went out with their family. Residents are also given snacks during the day if they are hungry between meals. All direct care staff members denied ever hearing Mr. Kreh say that someone did not need to eat because “they never eat anyways.”

<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>	<p>According to interviews with Resident A and B, it was found that the amount of time that elapsed between the evening and morning meal was not more than 14 hours. Some of the residents prefer to eat at different times for dinner and breakfast and the direct care staff members have accommodated this.</p> <p>Residents are offered a minimum of three regular and nutritious meals daily of proper form, consistency, and temperature. The residents are also offered snacks throughout the day.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

### **ALLEGATION:**

**There are straps and pieces missing on the Sit-to-Stand lift and the residents are wearing socks while using the lift causing them to slip.**

### **INVESTIGATION:**

On October 11, 2021, a complaint was received via the BCAL Online Complaint system alleging there are straps missing on the Sit-to-Stand lift that are missing pieces near the resident's legs and residents are wearing socks using the lift causing them to slip.

On October 18, 2021, I interviewed Edward Kreh at Hearts Content. Mr. Kreh stated there are Hoyer lifts that are used for Resident A and Resident C. He denied either device was missing any straps or pieces needed to safely operate the device. He has not observed any residents slipping while using the device. There is a platform which has a ribbed bottom which would prevent slipping. All of the staff have been trained to use the device safely. Mr. Kreh was able to demonstrate with Resident C how the device was used and there were no safety hazards present. The Hoyer lift used for Resident A was also observed and appeared to be in good condition with no pieces missing. Mr. Kreh stated a former employee told him recently that the lift needed repaired but he advised her that it was working correctly.

On October 18, 2021, I interviewed Resident A at Hearts Content. She has a Hoyer lift in her room and the direct care staff members use the lift to assist with her mobility and personal care. Resident A denied the Hoyer lift had any straps missing or felt unsafe at any time. Usually there is one staff assisting her with the Hoyer and all the staff know how to use this to assist her according to Resident A.

On October 18, 2021, I interviewed Resident C at Hearts Content. She stated she has a Sit-to-Stand lift to use to assist her in getting out of the bed. She is able to use this with the assistance of one direct care staff member. She has never fallen while using this or felt that her safety was at risk. There are no pieces or straps missing from her sit and stand lift. Resident C demonstrated how the sit and stand lift works with the assistance of direct care staff member, Sara Plus. She was able to safely get out of bed and back into bed. Resident C feels there is enough staff working that everyone can get the care they need.

I interviewed direct care staff members Ms. Wale, Ms. Hitsman, and Ms. Felver. All three direct care staff members confirmed they were trained to use the assistive devices for Resident A and Resident C. None of them reported any missing straps or pieces from the Hoyer lift or the sit and stand assistive device. Ms. Felver described the two assistive devices to be in "great condition." Ms. Wale stated that when the residents' feet are on the lift, they have strips that are textured so their feet would not slip even if they were wearing socks. None of the direct care staff members interviewed have ever observed a resident falling or becoming at risk during a transfer using an assistive device.

<b>APPLICABLE RULE</b>	
<b>R 400.14305</b>	<b>Resident protection.</b>
	<b>3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.</b>
<b>ANALYSIS:</b>	<p>During the on-site investigation, there were no straps missing on the Sit-to-Stand lift or the Hoyer lift which would cause Resident A or Resident C to be at risk. Mr. Kreh was able to demonstrate the lift being used with Resident C and there were no safety concerns. Resident C denied that there have ever been straps missing from the sit and stand lift.</p> <p>Direct care staff members Ms. Wale, Ms. Hitsman, and Ms. Felver reported they have never observed a resident fall or any safety hazards present during a transfer using an assistive device.</p> <p>There is no indication that Resident A and Resident C were not treated with dignity and that their safety was not attended to at all times.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

On October 18, 2021, I interviewed Edward Kreh at Hearts Content. Mr. Kreh stated that he has not trained the direct care staff members to pass medications because he is the only one that passes medications. He denied there was a time that he gave the resident or wrong medication. All of the medications are sent in blister packs from Alma Family Pharmacy.

On October 18, 2021, I interviewed direct care staff member, Candace Wale. She stated that she was not trained to pass medications because Mr. Kreh passes all the medications. She also stated she has not completed her Cardiopulmonary Resuscitation (CPR) or First Aid training since starting at Hearts Content. Ms. Wale stated she had completed CPR and First Aid training in her previous position and it was still valid. She did not know what month or year that it expired. She has not given a copy of the previous CPR and First Aid training to Mr. Kreh for her employee file because he has not asked her for a copy when she started employment at Hearts Content. On November 30, 2021, I called Hearts Content and spoke with Ms. Wale. She stated she has not yet given a copy of CPR and First Aid training

from her previous position. She has not completed any additional training since the on-site investigation on October 18, 2021.

On November 2, 2021, I interviewed direct care staff member, Makayla Hitsman. Ms. Hitsman stated she did not receive training when she started at Hearts Content besides how to use the assistive devices. She stated she is not trained to dispense medications because only Mr. Kreh passes medications at the facility. Ms. Hitsman stated she did not complete CPR or First Aid training when she started at the facility.

On November 12, 2021, I interviewed direct care staff member, Sally Felver. Ms. Felver stated she was the assistant manager at a different adult foster care home in the past for five years. She has been trained at Hearts Content for the assistive devices but since she had experience in adult foster care homes, there was not much training to be done. However, at Hearts Content she has not completed reporting requirements, resident rights, personal care, supervision, and protection. She stated that she did not complete an updated CPR and First Aid training and her last one expired in 2019 before she started employment at Hearts Content. She has scheduled herself for another training so this can be renewed. Ms. Felver thought she needed all these trainings updated before she began working but believes since Mr. Kreh was so short staffed initially he was in a panic and she began working with him based on her prior experience.

On November 30, 2021, I called Hearts Content and spoke with direct care staff member, Shelly Sumner. Similar to Ms. Felver, she has been working in adult foster care homes prior to starting at Hearts Content. Ms. Sumner described her initial training as a tour of the home and learning where everything was located. She received prior training on the Hoyer lifts at her previous position. She has completed CPR / First Aid training in the past but the certification has been expired since February 2021. Mr. Kreh has not told her that she needs to update her CPR / First Aid but she is willing to do so. She has not completed reporting requirements, resident rights, personal care, supervision, and protection. Ms. Sumner stated that she did complete a safety and fire prevention and prevention and containment of communicable diseases.

On November 30, 2021, I conducted the exit conference with Edward Kreh. Mr. Kreh stated that he has trained them in fire safety, emergencies, and the personal care. He is going to schedule the new staff for CPR and First Aid. Mr. Kreh is going to work on getting an agenda and sign-up sheet so they can sign off on their training as it takes place with the dates.

<b>APPLICABLE RULE</b>	
<b>R 400.14204</b>	<b>Direct care staff; qualifications and training.</b>
	<p><b>(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:</b></p> <ul style="list-style-type: none"> <li><b>(a) Reporting requirements.</b></li> <li><b>(b) First aid.</b></li> <li><b>(c) Cardiopulmonary resuscitation.</b></li> <li><b>(d) Personal care, supervision, and protection.</b></li> <li><b>(e) Resident rights.</b></li> <li><b>(f) Safety and fire prevention.</b></li> <li><b>(g) Prevention and containment of communicable diseases.</b></li> </ul>
<b>ANALYSIS:</b>	<p>During the onsite investigation, Mr. Kreh could not produce training records for review of any of the direct care staff members showing that they were competent to perform the job duties.</p> <p>Mr. Kreh stated that he had trained them but did not have documents. Many of the staff were within the first thirty days of employment, but there were no training records for Ms. Felver who began her employment at Hearts Content on September 24, 2021. On November 30, 2021, Candace Wale denied that she had completed any additional training since starting her employment at Hearts Content.</p> <p>Mr. Kreh has not made attempts for the direct care staff member to receive CPR and First Aid training initially or for Ms. Wale, Ms. Sumner, and Ms. Felver to renew their certification.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On October 18, 2021, I interviewed Edward Kreh at Hearts Content. Mr. Kreh did not have a schedule to show for the week of the investigation or the month prior. He did not have a schedule completed for the upcoming week. He said that he will notify the direct care staff member when they need to come in and since they had so few direct care staff members, he did not need a schedule.

I interviewed direct care staff members Ms. Hitsman, Ms. Felver, and Ms. Sumner. They all stated that initially there was not a formal schedule but that Mr. Kreh would

just call and tell them when they were scheduled to report to work. Ms. Felver stated that most of the schedules are the same each week so she knew when to come in. Now that he has more direct care staff members they all reported there is a schedule.

During the exit conference on November 30, 2021, Mr. Kreh stated he has been completing a schedule each week and placing it on the refrigerator now that he has more direct care staff members.

<b>APPLICABLE RULE</b>	
<b>R 400.14208</b>	<b>Direct care staff and employee records.</b>
	<p><b>(3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information:</b></p> <ul style="list-style-type: none"> <li><b>(a) Names of all staff on duty and those volunteers who are under the direction of the licensee.</b></li> <li><b>(b) Job titles.</b></li> <li><b>(c) Hours or shifts worked.</b></li> <li><b>(d) Date of schedule.</b></li> <li><b>(e) Any scheduling changes.</b></li> </ul>
<b>ANALYSIS:</b>	<p>Mr. Kreh did not have a daily schedule of advanced work assignments available for review during the on-site investigation. Mr. Kreh stated because his staffing levels were so low, he simply notified direct care staff members when they were working.</p> <p>During the exit interview on November 30, 2021, Mr. Kreh stated that he has started to maintain a daily schedule of advance work assignments now that he had more direct care staff member that were consistently working.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**III. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, I recommend no change in the license status.

*Jennifer Browning*

12/01/2021

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Jennifer Browning  
Licensing Consultant

Date

Approved By:

*Dawn Timm*

12/03/2021

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Dawn N. Timm  
Area Manager

Date