GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 27, 2022

Christopher Trevathan
AH Holland Subtenant LLC
6755 Telegraph Rd Ste 330
Bloomfield Hills, MI 48301

RE: License #: AL700397724
Investigation #: 2022A0467017
AHSL Holland Lakeshore

Dear Mr. Trevathan:

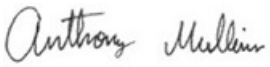
Attached is the Special Investigation Report for the above referenced facility. Due to the violation identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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 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 (616) 356-0183.

Sincerely,



Anthony Mullins, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL700397724
Investigation #:	2022A0467017
Complaint Receipt Date:	01/18/2022
Investigation Initiation Date:	01/18/2022
Report Due Date:	03/19/2022
Licensee Name:	AH Holland Subtenant LLC
Licensee Address:	One SeaGate, Suite 1500 Toledo, OH 43604
Licensee Telephone #:	(248) 203-1800
Administrator:	Christopher Trevathan
Licensee Designee:	Christopher Trevathan
Name of Facility:	AHSL Holland Lakeshore
Facility Address:	11911 James Street Holland, MI 49423
Facility Telephone #:	(616) 393-2174
Original Issuance Date:	03/21/2019
License Status:	REGULAR
Effective Date:	09/21/2021
Expiration Date:	09/20/2023
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED

II. ALLEGATION(S)

	Violation Established?
On 1/15/22, the facility was not in compliance with staffing requirements during waking hours.	Yes

III. METHODOLOGY

01/18/2022	Special Investigation Intake 2022A0467017
01/18/2022	Special Investigation Initiated - Telephone
01/19/2022	Inspection Completed On-site
01/27/2022	Exit conference completed with licensee designee, Chris Trevathan.

ALLEGATION: On 1/15/22, the facility was not in compliance staffing requirements during waking hours.

INVESTIGATION: On 1/18/22, I spoke to the complainant via phone. She stated that she worked by herself on Saturday (1/15/22) from 7:00 pm until 11:00 pm while the facility had 17 residents. The complainant stated that she spoke to Kerrie Flores and Chris Trevathan, Executive Director regarding her concerns and they were minimized. The complainant stated that none of the residents at Lakeshore requires a two-person assist but she is aware of the staff to resident ratio being 1:15 during waking hours, which she was adamant the facility was not in compliance with. The complainant also stated that she worked in the facility by herself on Christmas Day, 2021 as well.

On 1/19/22, I made an unannounced onsite investigation at the facility directly across from Lakeshore to speak with staff that work in this facility as well. While there, I spoke to staff member Lekeysha Powell. Ms. Powell stated that today she started her shift working at Lakeshore. Ms. Powell stated that she was sent to Baypointe because the 3rd shift staff member was mandated last minute and refused to stay. Ms. Powell stated that American House Holland facilities all have staffing shortages. Ms. Powell stated that if I were to review the staff schedule, I would see the staffing issues throughout the facility. Ms. Powell stated that there are currently 17 residents at Lakeshore and she has worked approximately 2-3 hours alone over the last two weeks. Ms. Powell stated she has never worked a full day alone at Lakeshore.

Ms. Powell stated that 2nd and 3rd shift staff members, specifically Angie Mabie has complained about working alone at Lakeshore. Ms. Powell stated that this past Saturday, 1/15/22, Ms. Mabie worked alone at Lakeshore during 2nd shift. Ms. Powell

worked the morning of 1/15/22. Around 2:30 pm, she was asked by management to work 2nd shift as well. Ms. Powell stated that she told management that she was unable to work 2nd shift since she already had plans. Ms. Powell stated that management told Ms. Mabie to work alone.

After speaking to Ms. Powell, I walked across the parking lot to Lakeshore facility and spoke to Mr. Trevathan regarding the allegations. Mr. Trevathan stated that Ms. Mabie called him at 3:00 pm this past Saturday (1/15/22) and complained that she was the only staff member working in the building. Mr. Trevathan stated that there were initially 16 residents at Lakeshore. During his call with Ms. Mabie, she informed him that another resident returned from the hospital, increasing their resident total to 17. Although not ideal, Mr. Trevathan told Ms. Mabie that working in the facility with that number of residents was “doable.” Mr. Trevathan stated that Ms. Mabie told him “if I could turn my keys in or find someone to work, I would quit.” Mr. Trevathan stated that staff member Annette Weenum came over to Lakeshore from Driftwood. Ms. Maybe was at Lakeshore by herself until 3:30 pm and she was sent to driftwood, which does not have residents that require a two-person assist. Mr. Trevathan stated that Ms. Powell was scheduled to work at Lakeshore on Saturday as well, but she refused. Mr. Trevathan stated that under normal circumstances, employees would be terminated for refusing to work their scheduled shift but due to the staffing issues the American House already has, no employees were terminated.

Mr. Trevathan provided me with Lakeshore’s schedule and staff timecard. On Saturday, 1/15/22, Powell was scheduled to work at Lakeshore from 7:30 am to 3:00 pm, which she did. The schedule does not show that Ms. Powell was scheduled to work 2nd shift on 1/15/22 as originally stated by Mr. Trevathan. Ms. Mabie was scheduled to work from 2:30 pm to 11:00 pm and staff member Debbi Johnson was scheduled to work from 4:00 pm to 10:30 pm, which they did.

On 1/21/22, I spoke to staff member Debbi Johnson via phone. Ms. Johnson confirmed that she did in fact work this past Saturday, 1/15/22 from 4:00 pm to 10:30 pm. Ms. Johnson stated that she worked at Lakeshore with Ms. Mabie until 7:30 pm, which is when she was sent to Driftwood to finish the remainder of her shift. Ms. Johnson confirmed that Ms. Mabie worked alone at Lakeshore for the rest of the shift. Ms. Johnson stated that there were approximately 13 residents at Lakeshore on Saturday. Despite being scheduled to work her full shift at Lakeshore, Ms. Johnson stated that approximately once or twice per month, she’s pulled from her assigned facility to work at another one. This includes the times that she is left at Lakeshore while other staff are pulled to work at other facilities.

Ms. Johnson stated that she works on-call, maybe 4 to 5 times per month. Ms. Johnson stated that she knows it gets “hectic” and her colleagues complain about being short-staffed. Ms. Johnson stated that she has only had to work by herself for a couple hours and this has happened once or twice. Ms. Johnson did not have any additional information to provide and the interview concluded.

On 1/24/22, I received an email from Mr. Trevathan that included the resident register for Lakeshore on 1/15/22. The register confirmed that Lakeshore had a total of 17 residents this past Saturday, confirming that the facility was not in compliance with the staff-to-resident ratio during waking hours from approximately 7:30 pm to 10:00 pm.

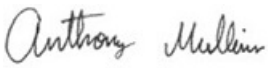
The email also contained the resident register for Christmas Day, 2021. On 12/25/21, the facility had a total of 15 residents. Due to the facility not having residents that require a two-person assist, one staff member was sufficient on this day.

On 01/27/22, I conducted an exit conference with licensee designee, Mr. Trevathan. He was informed of the investigative findings and aware that a corrective action plan is required within 15 days of receipt of this report. Mr. Trevathan and all of management are actively working to address the staffing issues within American House.

APPLICABLE RULE	
R 400.15206	**Staffing requirements.**
	(1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 15 residents during waking hours or less than 1 direct care staff member to 20 residents during normal sleeping hours.
ANALYSIS:	Ms. Johnson confirmed that she was originally scheduled to work at Lakeshore from 4:00 pm to 10:30 pm on 1/15/22. Ms. Johnson stated that she was sent to another facility at 7:30 pm, leaving Ms. Mabie to work alone the remainder of her shift at Lakeshore. Ms. Powell also stated that Ms. Mabie worked alone at Lakeshore on 1/15/22 while the facility had 17 residents. Although the staff member timecards indicate that they worked their full shift at their scheduled facility, all staff members interviewed confirmed that they can be pulled to a different facility during their shift. I reviewed the facility's register, confirming that there were 17 residents on 1/15/22. Therefore, confirming that Ms. Mabie worked alone with 17 residents during waking hours from 7:30 pm to 10:00 pm. Therefore, a preponderance of evidence does exist to support the allegation.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

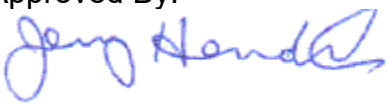
Upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



01/27/2022

Anthony Mullins — Date
Licensing Consultant

Approved By:



01/27/2022

Jerry Hendrick — Date
Area Manager