



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 10, 2022

Sally Londry
S & D Senior Living Home
1359 S. Colling Rd.
Caro, MI 48723

RE: License #: AM790388202
Investigation #: 2022A0580014
S&D Senior Living Home

Dear Ms. Londry:

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 (906) 226-4171.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan". The signature is written in black ink and is positioned below the word "Sincerely,".

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM790388202
Investigation #:	2022A0580014
Complaint Receipt Date:	12/21/2021
Investigation Initiation Date:	12/22/2021
Report Due Date:	02/19/2022
Licensee Name:	S & D Senior Living Home
Licensee Address:	1359 S. Colling Rd. Caro, MI 48723
Licensee Telephone #:	(989) 286-3711
Administrator:	Sally Londry
Licensee Designee:	Brooke Londry
Name of Facility:	S&D Senior Living Home
Facility Address:	1359 S. Colling Rd. Caro, MI 48723
Facility Telephone #:	(989) 286-3711
Original Issuance Date:	10/18/2018
License Status:	REGULAR
Effective Date:	04/18/2021
Expiration Date:	04/17/2023
Capacity:	10
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
Resident B has to clean her own colostomy bag.	No
Resident B cannot have private phone calls.	No
Resident B is not allowed to have her tablet or phone at times.	Yes
Resident B is not allowed to leave the home and cannot have visitors.	Yes
Staff Mr. Don Arnold shoved Resident A a few months ago.	No
Resident A was left on a toilet for long periods as a form of punishment by Mr. Arnold.	No

III. METHODOLOGY

12/21/2021	Special Investigation Intake 2022A0580014
12/21/2021	APS Referral A complaint opened by APS was received for investigation.
12/22/2021	Special Investigation Initiated - Telephone A call was made to the licensee.
01/10/2022	APS Referral A call was received from Ms. Tiffany Polaski of APS, Tuscola County.
01/11/2022	Inspection Completed On-site An onsite was conducted at S & D Senior Living Home. Contact was made with staff, Mr. Don Arnold.
01/11/2022	Contact - Face to Face An interview was conducted with Resident A.
01/11/2022	Contact - Face to Face Contact was made with the licensee, Ms. Sally Londry.
01/11/2022	Contact - Document Received A copy of the assessment plan for Resident A was reviewed.
01/13/2022	Comment Intake # 184538, denied by APS for investigation was combined with the current investigation.

01/21/2022	Contact – Telephone call made A call was made to the licensee, Ms. Sally Londry.
01/21/2022	Contact – Telephone call made I spoke with staff, Mr. Don Arnold.
01/24/2022	Contact - Document Received A faxed copy of the AFC Assessment Plan for Resident B was received.
01/26/2022	Contact – Telephone call made A contact was made with the administrator, Ms. Brooke Londry.
02/07/2022	Inspection Completed On-site An interview was conducted with Resident B.
02/07/2022	Contact - Face to Face A contact was made with staff, Mr. Don Arnold.
02/07/2022	Contact – Telephone call made Ms. Rhonda Bower, Tuscola County Behavioral Health Case Manager for Resident A.
02/08/2022	Contact – Telephone call made Mr. Ed Wolfe, Public Guardian.
02/10/2022	Contact – Telephone call received I spoke with Ms. Courtney Wright, assigned TCBH case manager for Resident A.
02/10/2022	Exit Conference An exit conference was held with the licensee, Ms. Sally Londry.

ALLEGATION:

Resident B has to clean her own colostomy bag.

INVESTIGATION:

On 01/13/2022, I received a complaint via BCAL Online complaints. This complaint was denied by APS for investigation.

On 01/21/2022, I spoke with the licensee, Ms. Sally Londry regarding the allegations. She indicated that Resident B does have a colostomy bag, however, she does not

require assistance. She adds that Resident B takes care of it on her own. The nurses have shown her how. Resident B has not asked for assistance.

On 01/24/2022, I received a faxed copy of the AFC assessment plan for Resident B. It indicated that Resident B does not require assistance with toileting. It further indicates that verbal prompts are needed to check her bag and drain it if it is ½ full.

01/26/2022, I spoke with direct staff the license administrator, Ms. Brooke Londry. She indicated that she is unable to accommodate a video interview with Resident B.

On 02/07/2022, I conducted an in-person interview with Resident B while in her room, at S & D Senior Living home. Resident B was appropriately dressed, appearing neat and clean. Resident B appeared to be receiving adequate care. Resident B indicated that cleans her own colostomy bag. While she does not require assistance, the staff at her previous placement helped her anyways.

On 02/07/2022, I spoke with Ms. Rhonda Bower, assigned Tuscola County Behavioral Services Case Manager for Resident B. She indicated that while Resident B does clean her colostomy bag herself, she is usure of how well she does.

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	<p>It was alleged that Resident B has to clean her own colostomy bag.</p> <p>Licensee, Ms. Sally Londry indicated that Resident B she does not require assistance with her colostomy bag. The nurses have shown her how.</p> <p>The AFC assessment plan for Resident B indicates that she does not require assistance with toileting. It further indicates that verbal prompts are needed to check her bag and drain it if it is ½ full.</p> <p>Resident B indicated that she cleans her own colostomy bag. While she does not require assistance, the staff at her previous placement helped her anyways.</p>

	<p>Ms. Rhonda Bower assigned Tuscola County Behavioral Services Case Manager for Resident B, indicated that while Resident B does clean her colostomy bag herself, she is unsure of how well she does.</p> <p>Based on the information gathered in the course of this investigation, there is insufficient evidence to support the rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident B cannot have private phone calls.

INVESTIGATION:

On 01/21/2022, I spoke with the licensee, Ms. Sally Londry. She indicated that Resident A has her own phone and is allowed to make calls in private if she chooses to do so.

On 02/07/2022, I conducted an in-person interview with Resident B. She indicated that she is allowed to make calls, privately, in her room, if she chooses to do so.

APPLICABLE RULE	
R 400.14304	Resident rights; licensee responsibilities.
	<p>(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:</p> <p>(e) The right of reasonable access to a telephone for private communications. Similar access shall be granted for long distance collect calls and calls which otherwise are paid for by the resident. A licensee may charge a resident for long distance and toll telephone calls. When pay telephones are provided in group homes, a reasonable amount of change shall be available in the group home to enable residents to make change for calling purposes.</p>

ANALYSIS:	<p>Resident B cannot have private phone calls.</p> <p>Licensee, Ms. Sally Londry, indicated that Resident A has her own phone and is allowed to make calls in private if she chooses to do so.</p> <p>Resident B. indicated that she is allowed to make calls, privately, in her room, if she chooses to do so.</p> <p>Based on the information gathered in the course of this investigation, there is insufficient evidence to support the rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident B is not allowed to have her tablet or phone at times.

INVESTIGATION:

On 01/21/2022, I spoke with the licensee, Ms. Sally Londry. Ms. Londry denied the allegations. She indicated that Resident A walks with a walker. Staff assist her with carrying her tablet from room to room so she won't fall with the tablet. Sometimes the tablet is charging and she has to wait for it to do so, however, she denied that they have kept it from her.

On 01/24/2022, I received a faxed copy of the AFC assessment plan for Resident B. The plan does not indicate that calls need to be limited during the night with her tablet or phone. Resident B does not have a roommate. There are no house rules stating no phone calls during sleeping hours unless it is an emergency.

On 02/07/2022, I conducted an in-person interview with Resident B. She shared that staff, Mr. Don Arnold, has previously taken her tablet, claiming that she was receiving calls. Resident B adds that Ms. Sally Londry and Mr. Don take her phone at night.

On 02/07/2022, I spoke with staff, Mr. Don Arnold. He indicated that they take Resident B's phone from 2am-4am due to phone calls being received during those sleeping hours.

On 02/07/2022, I spoke with Ms. Rhonda Bower, assigned Tuscola County Behavioral Services Case Manager for Resident B. She was unaware that the owners have taken Resident B's belongings.

APPLICABLE RULE	
R 400.14304	Resident rights; licensee responsibilities.
	<p>(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:</p> <p>(j) The right of reasonable access to and use of his or her personal clothing and belongings.</p>
ANALYSIS:	<p>It was alleged that Resident B is not allowed to have her tablet or phone at times.</p> <p>Licensee, Ms. Sally Londry. denied the allegations.</p> <p>Resident B shared that staff, Mr. Don Arnold, has previously taken her tablet, claiming that she was receiving calls. Resident B adds that Ms. Sally Londry and Mr. Don take her phone at night.</p> <p>Staff, Mr. Don Arnold, indicated that they take Resident A's phone from 2am-4am due to phone calls being received during those sleeping hours.</p> <p>The AFC assessment plan for Resident B does not indicate that calls need to be limited during the night with her table or phone. Resident B does not have a roommate. There are no house rules stating no phone calls during sleeping hours unless it is an emergency.</p> <p>Ms. Rhonda Bower assigned Tuscola County Behavioral Services Case Manager for Resident B indicated that she was unaware that the owners have taken Resident B's belongings.</p> <p>Based on the information gathered in the course of this investigation, there is sufficient evidence to support the rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident B is not allowed to leave the home or have visitors.

INVESTIGATION:

On 01/21/2022, I spoke with the licensee, Ms. Sally Londry. Ms. Londry indicated that no one is allowed in or out of the home due to Covid-19. She indicated that she is under the impression that she has that right due to do so. She stated that the guardian is aware of the and has no problems with the restriction.

On 01/24/2022, I received a faxed copy of the AFC assessment plan for Resident B. It indicated that Resident B does not move independently in the community. It also indicates that she is easily confused, gets lost, and requires verbal prompting to stay with the crowd. For family/friends, there are no listed visitor restrictions and/or other considerations.

On 02/07/2022, I conducted an in-person interview with Resident B. She stated that per the owners, Ms. Sally Londry and Mr. Don Arnold, she is not allowed to leave the facility.

On 02/07/2022, I spoke with Ms. Rhonda Bower, assigned Tuscola County Behavioral Services Case Manager for Resident B. She shared that she is aware that Resident B is not allowed out or to have visitors in the home. To her knowledge, the licensee imposed the restriction due to Covid-19. She shared that the licensee has requested phone call visits only. Ms. Bower indicated that she understands the restriction, which is happening in a lot of AFC homes.

APPLICABLE RULE	
R 400.14304	Resident rights; licensee responsibilities.
	(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights: (k) The right to have contact with relatives and friends and receive visitors in the home at a reasonable time. Exceptions shall be covered in the resident's assessment plan. Special consideration shall be given to visitors coming from out of town or whose hours of employment warrant deviation from usual visiting hours.

ANALYSIS:	<p>Resident B is not allowed to leave the home or have visitors.</p> <p>Licensee, Ms. Sally Londry, indicated that no one is allowed in or out of the home due to Covid-19. She indicated that she is under the impression that she has that right due to do so.</p> <p>The AFC assessment plan for Resident B. It indicated that Resident B does not move independently in the community. It also indicates that she is easily confused, gets lost, and requires verbal prompting to stay with the crowd. For family/friends, there are no listed visitor restrictions and/or other considerations.</p> <p>Resident B stated that per the owners, Ms. Sally Londry and Mr. Don Arnold, she is not allowed to leave the facility or able to have visitors.</p> <p>Ms. Rhonda Bower, assigned Tuscola County Behavioral Services Case Manager for Resident B, indicated that she is aware that Resident B is not allowed out or visitors in the home. To her knowledge, the restriction is due to Covid-19.</p> <p>Based on the information gathered in the course of this investigation, there is sufficient evidence to support the rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Staff Mr. Don Arnold shoved Resident A a few months ago.

INVESTIGATION:

On 12/22/2021, I received a complaint via BCAL Online Complaints. This complaint was opened by APS for investigation.

On 12/22/2021, I spoke with Ms. Sally Londy, licensee. She denied the allegations that Resident A was pushed by Mr. Arnold.

On 01/10/2022, I spoke with Ms. Tiffany Polaski, assigned APS worker in Tuscola County. She shared that she spoke with Resident A on 12/22/2021. Resident A denied being pushed or bruised, however, her stated that Mr. Londry raises his voice at him, grabs his face and asks him “don’t you understand”, when he does something wrong. At the time of her interview, Resident A indicated that he feels safe in the home.

On 01/11/2022, I conducted an onsite investigation at S & D Senior Living Home. Contact was made with staff, Mr. Don Arnold. He denied the allegations that he shoved Resident A. He recalled that he was at the table getting the residents dishes after they'd eaten and he mistakenly bumped into Resident A. Resident A pushed him, then gouged at his face. Mr. Arnold then put his arm up to block Resident A. Mr. Arnold denied that he shoved Resident A. No incident report was completed.

On 01/11/2022, I conducted an in-person interview with Resident A in his room. He indicated that Mr. Arnold did shove him. He stated that he has a temper. He does not know why Mr. Arnold pushed him. He indicated that there were no witnesses to the alleged incident. He had no marks or bruises.

On 02/08/2022, I conducted an interview with Resident B in her room. She did not observe Mr. Arnold shove Resident A as alleged. She denied that Mr. Arnold has been mean or aggressive towards her.

On 01/11/2022, I spoke with Ms. Sally Londy, licensee. I informed Ms. Londry that a follow-up call would be made for an exit conference.

On 02/10/2022, I spoke with Ms. Courtney Wright, assigned TCBH case manager for Resident A. Ms. Wright shared that she has been the assigned case manager for Resident A since June of 2021. She last visited with Resident A in the AFC home on 01/13/2022. She indicated that Resident A did not express, nor has he ever expressed that he was being abused in the home, or that he felt unsafe. Ms. Wright has no concerns with the AFC home.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.

ANALYSIS:	<p>It was alleged that staff, Mr. Don Arnold shoved Resident A.</p> <p>Staff, Mr. Don Arnold, denied the allegations that he shoved Resident A.</p> <p>Resident A indicated that Mr. Arnold did shove him because he has a temper. He indicated that there were no witnesses to the alleged incident.</p> <p>Resident B indicated that did not observe Mr. Arnold shove Resident A as alleged. She denied that Mr. Arnold has been mean or aggressive towards her.</p> <p>Tuscola County APS worker, Ms. Tiffany Polaski, shared that in her interview with Resident A, he denied being pushed or bruised.</p> <p>Ms. Courtney Wright, assigned TCBH case manager for Resident A, indicated that Resident A has not expressed that he was being abused in the home, or that he felt unsafe. Ms. Wright has no concerns with the AFC home.</p> <p>Based on the information gathered in the course of this investigation, there is insufficient evidence to support the rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A was left on a toilet for long periods as a form of punishment by Mr. Arnold.

INVESTIGATION:

On 01/11/2022, I spoke with direct staff, Mr. Don Arnold. He denied the allegations. He indicated that Resident A does not require assistance with toileting. There are no time restrictions on his restroom use.

On 01/11/202, I spoke with Resident A in his room. Resident A indicated that takes himself to the bathroom and doesn't need help. He denied the allegations. Resident A was appropriately dressed, appearing neat and clean. Resident A appeared to be receiving adequate care.

On 01/11/2022, I reviewed a copy of the AFC assessment plan for Resident A. The plan indicates that Resident A requires assistance with toileting. It states that Resident

A will not change his depends and will leave them on for days. Resident A also wets and defecates himself. Requires verbal prompts.

On 01/27/2022, I received a copy of the APS Special Investigation Report from Ms. Tiffany Polaski of APS in Tuscola County, denying the physical abuse and/or neglect allegations.

On 02/10/2022, I spoke with Ms. Courtney Wright, assigned TCBH case manager for Resident A. Ms. Wright indicated that Resident A is able to ambulate independently and does not require assistance with toileting. She indicated that he wears briefs and does have some accidents, however, he is able to change and clean himself.

On 02/10/2022, an exit conference was held with the licensee, Ms. Sally Londry. Ms. Londry was informed of the licensing rule violations found. A corrective action plan was requested within 15 days.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.
ANALYSIS:	<p>It was alleged that Resident A was left on a toilet for long periods as a form of punishment by Mr. Arnold.</p> <p>Direct staff, Mr. Don Arnold, denied the allegations. He indicated that Resident A does not require assistance with toileting. There are no time restrictions on his restroom use.</p> <p>Resident A denied the allegations, indicating that takes himself to the bathroom and doesn't need help.</p>

	<p>The AFC assessment plan for Resident A indicates that Resident A requires assistance with toileting by reminding him to change his depends as he will leave them on for days. Resident A also wets and defecates himself.</p> <p>The APS Special Investigation Report from Ms. Tiffany Polaski denied the physical abuse and/or neglect allegations.</p> <p>Ms. Courtney Wright, assigned TCBH case manager for Resident A, indicated that Resident A is able to ambulate independently and does not require assistance with toileting.</p> <p>Based on the information gathered in the course of this investigation, there is insufficient evidence to support the rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no changes to the status of the license is recommended.




February 10, 2022

Sabrina McGowan
Licensing Consultant

Date

Approved By:



February 10, 2022

Mary E Holton
Area Manager

Date