



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 14, 2022

Carolyn Bruning  
Northeast Michigan CMH Authority  
400 Johnson Street  
Alpena, MI 49707

RE: License #: AS600377762  
Investigation #: 2022A0360013  
Thunder Bay Home

Dear Ms. Bruning:

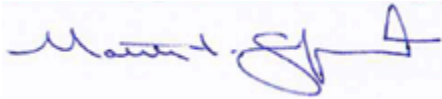
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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 (989) 732-8062.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matthew Soderquist", with a stylized flourish at the end.

Matthew Soderquist, Licensing Consultant  
Bureau of Community and Health Systems  
Ste 3  
931 S Otsego Ave  
Gaylord, MI 49735  
(989) 370-8320

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS600377762
<b>Investigation #:</b>	2022A0360013
<b>Complaint Receipt Date:</b>	01/24/2022
<b>Investigation Initiation Date:</b>	01/24/2022
<b>Report Due Date:</b>	02/23/2022
<b>Licensee Name:</b>	Northeast Michigan CMH Authority
<b>Licensee Address:</b>	400 Johnson Street Alpena, MI 49707
<b>Licensee Telephone #:</b>	(989) 358-7603
<b>Administrator:</b>	Nicole Kaiser
<b>Licensee Designee:</b>	Carolyn Bruning, Designee
<b>Name of Facility:</b>	Thunder Bay Home
<b>Facility Address:</b>	15080 Fairway Court Hillman, MI 49746
<b>Facility Telephone #:</b>	(989) 742-3281
<b>Original Issuance Date:</b>	11/16/2015
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	05/16/2020
<b>Expiration Date:</b>	05/15/2022
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Resident A has \$41 of resident funds missing.	Yes

## III. METHODOLOGY

01/24/2022	Special Investigation Intake 2022A0360013
01/24/2022	Special Investigation Initiated - Letter Recipient Rights Ruth Hewitt
01/27/2022	Inspection Completed On-site Resident A, Home Manager Amy Maynard
01/27/2022	Contact - Face to Face Ruth Hewitt, Amy Maynard, DCS Lora Bunch, Valerie Cordes, Deb Greene, Cindy Gilbert, Jessica Breezee, Jan Behring, Angela Standon, Onna Holland, Chelsey Cumper
02/14/2022	Contact - Telephone call made Representative Payee 1-A
02/14/2022	Exit Conference With licensee designee Carolyn Bruning

**ALLEGATION:** Resident A has \$41 of resident funds missing.

**INVESTIGATION:** On 1/24/2022 I was assigned a complaint from the LARA online complaint system.

On 1/24/2022 I contacted Ruth Hewitt from Northeast Michigan Community Mental Health Office of Recipient Rights. Ms. Hewitt stated she will be assigning a rights complaint and scheduling interviews with staff for 1/27/2022.

On 1/27/2022 I conducted staff interviews with Ms. Hewitt at NEMCMH Hillman office. We interviewed the home supervisor Amy Maynard. Ms. Maynard stated in the past they had two safes that they kept resident funds in. She stated they would keep \$40-50 cash in the combination safe in the office which was accessible by staff and the remaining resident funds in a key locked safe in the office. She stated the combination to the safe with \$40-50 was on a note taped to the side of the safe so all the staff knew the combination. She stated the combination was removed in June 2021 when she took over as the new home manager, but the combination was not changed. She stated herself and direct care staff Deb Green are the only staff who

have access to the keyed safe. She stated she reconciled Resident A's funds on 12/7/2021 and everything balanced out. She stated at the end of November 2021 Resident A had \$198.61. I reviewed the November 2021 resident funds II form for Resident A and there was a balance of \$198.61. Ms. Maynard stated she then went to balance Resident A's funds on 12/15/2021 and noticed there was \$41 missing. She stated Resident A had three online purchases made for her on 12/11/2021 for \$73.97, \$13.65, and \$58.27. Resident A also spent \$25 on a haircut on 12/15/2021 which is the day the funds were discovered missing. I reviewed Resident A's resident funds II form for December 2021 and verified these transactions were documented. Resident A also had a deposit on 12/20/2021 of \$60 which brought her to a balance of \$87.72 at the end of December. Ms. Maynard stated she was not aware of any other purchases or transactions for Resident A between when she reconciled her resident funds on 12/7/2021 and 12/15/2021. She stated she was not aware of any other outstanding receipts or purchases that were unaccounted for. She stated Resident A's resident funds remains \$41 short as of today. She stated she has reconciled all other resident funds and they all balance. She stated Resident A is unable to handle her own money and does not carry any resident funds on her person. She stated she was not aware of any staff borrowing money from Resident A's resident funds.

We then interviewed all direct care staff who worked any shifts between 12/7/2021 and 12/15/2021. We interviewed direct care Lora Bunch. Ms. Bunch stated she is Resident A's advocate through CMH which means that she helps Resident A with needed purchases. She stated she purchased several items online for Resident A through Amazon.com. She stated the advocates use their own personal Amazon accounts and purchase needed items for the residents and then provide the receipts and are reimbursed for the purchases through the resident funds. She stated she purchased several items for Resident A on 12/11/2021 which she submitted receipts and was reimbursed through Resident A's resident funds. She stated that all staff had the combination to the resident funds safe. She stated she was unaware of who may have taken the funds or where they went. She stated she was not aware of any staff asking to borrow any resident funds.

We then interviewed direct care staff Valerie Cordes. Ms. Cordes stated she was not aware of the safe combination and has not accessed the resident funds. She stated she was aware that the safe combination was posted in the past, but she stated she does not know since it was taken down. She stated she was not aware of who may have taken Resident A's funds and does not suspect any other staff.

We then interviewed direct care staff Deb Greene. Ms. Greene stated she helps with all resident funds and has a key to the locked safe. She stated she has never been very good with the combination safe and has always had to have the manager or other staff open it for her. She stated she was not aware of any unaccounted purchases for Resident A but was aware that she was missing \$41. She denied taking the money and didn't know who may have taken it.

We then interviewed direct care staff Cindy Gilbert. Ms. Gilbert stated she was aware of the safe combination but has not accessed it for over a year. She stated she has no idea of who would have taken Resident A's funds.

We then interviewed direct care staff Jessica Breezee. Ms. Breezee stated she was aware of Resident A's missing funds but does not know where it could've gone. She stated she has never had anything come up missing from her purse and didn't suspect any staff of taking the money. She stated there was a previous staff person who has asked to borrow money from her but she did not have access to the home between 12/7/2021 and 12/15/2021. She stated she has not witnessed anyone access the safe during her shifts.

We then interviewed direct care staff Jan Behring. Ms. Behring stated she has not accessed any of the resident funds. She stated she did not know the combination to the safe. She stated she works the midnight shift and has no reason to access the funds. She stated she is not aware of any other staff accessing the resident funds during her shifts.

We then interviewed direct care staff Angela Standon. Ms. Standon stated she was not aware of any missing resident funds. She stated she knows the combination to the safe but has not had to access it since October 2021.

We then interviewed direct care staff Onna Holland. Ms. Holland stated she works midnights. She stated she heard about some missing funds but didn't hear which resident was missing money. She stated she hasn't been in the safe for over a year. She stated the combination used to be posted but it was taken down in June 2021. She stated she has not done any purchases for any residents requiring a reimbursement from resident funds. She denied taking the money.

We then interviewed direct care staff Chelsey Cumper. Ms. Cumper stated the combination to the safe used to be posted but was removed and she thought the combination was changed. She stated she hasn't accessed the safe in months. She stated she primarily works midnights so there is no need for her to access resident funds. She denied taking any money and stated in the past they have had two staff present when accessing resident funds and both sign off on what is going in and out.

On 1/27/2022 I conducted an onsite inspection at the facility. Resident A was unable to be interviewed due to limited verbal skills. I observed Resident A sitting in the living room in a chair. The home manager Amy Maynard provided me with Resident A's January 2022 resident funds II form. Resident A should have had a balance of \$147.72. Ms. Maynard counted out Resident A's cash and she only had \$106.72 therefore missing \$41.

On 2/14/2021 I contacted Resident A's payee, Representative Payee 1-A. Representative Payee 1-A stated she had not been notified by CMH that Resident A

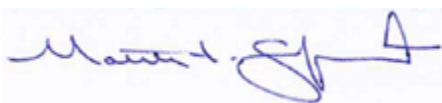
was missing \$41 from her resident funds. She stated she would be in contact with CMH.

<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>	<p>The complaint alleged Resident A has \$41 of resident funds missing.</p> <p>Resident A's resident funds was reconciled on 12/7/2021 and then again on 12/15/2021. On 12/15/2021 it was discovered that there was \$41 missing from Resident A's resident funds.</p> <p>All direct care staff who worked between 12/7/2021 and 12/15/2021 were interviewed. All the staff denied knowing where the missing resident funds were.</p> <p>Resident A's January 2022 resident funds II form indicates that she should have \$147.72. She only had \$106.72 in cash and no other receipts or expenses pending.</p> <p>There is a preponderance of evidence that Resident A is missing \$41.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 02/14/2022 I conducted an exit conference with licensee designee Carolyn Bruning. Ms. Bruning concurred with the findings of the investigation.

#### **IV. RECOMMENDATION**

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



02/14/2022

Matthew Soderquist  
Licensing Consultant

Date

Approved By:



02/14/2022

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Jerry Hendrick  
Area Manager

Date