



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 29, 2022

Ryan Boutell
Fessenden Adult Foster Care, LLC
4904 Onsikamme St.
Montague, MI 49437

RE: License #: AM640361441
Investigation #: 2022A0340019
Fessenden Adult Foster Care

Dear Mr. Boutell:

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 (616) 356-0183.

Sincerely,



Rebecca Piccard, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 446-5764

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM640361441
Investigation #:	2022A0340019
Complaint Receipt Date:	03/11/2022
Investigation Initiation Date:	03/11/2022
Report Due Date:	05/10/2022
Licensee Name:	Fessenden Adult Foster Care, LLC
Licensee Address:	4904 Onsikamme St. Montague, MI 49437
Licensee Telephone #:	(123) 167-0947
Administrator:	Ryan Boutell
Licensee Designee:	Ryan Boutell
Name of Facility:	Fessenden Adult Foster Care
Facility Address:	412 Hart Street Hart, MI 49420
Facility Telephone #:	(231) 670-9475
Original Issuance Date:	08/01/2014
License Status:	REGULAR
Effective Date:	02/01/2021
Expiration Date:	01/31/2023
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
On 3/10/22 Resident A's brief was dried to his pants with feces.	Yes

III. METHODOLOGY

03/11/2022	Special Investigation Intake 2022A0340019
03/11/2022	APS Referral
03/11/2022	Special Investigation Initiated - Telephone Ryan Boutell
03/14/2022	Inspection Completed On-site
03/14/2022	Exit Conference Ryan Boutell

ALLEGATION: On 3/10/22 Resident A's brief was dried to his pants with feces.

INVESTIGATION: On March 11, 2022, I received a complaint from the Adult Protective Services (APS), stating on 03/10/22 Resident A's brief was dried to his pants with bowel movement. It appeared to have been there for a while. It is unknown how long he was in the brief. Resident A reportedly had a little redness but no skin breakdown or sores. This is not the first time this has happened. The complaint was rejected for investigation by APS.

On March 11, 2022, I contacted Licensee Designee Ryan Boutell. I informed him of the allegations. Mr. Boutell stated the allegation is true and that Resident A chooses to use briefs and not clean himself. Mr. Boutell indicated a 30-day discharge notice will be given to Resident A because this level of care is not provided by staff at the Fessenden Home. I requested a copy of Resident A's Assessment Plan.

On March 14, 2022, I conducted an unannounced home inspection. Staff Ella Boutell was working at the time of inspection. I asked her about Resident A. She confirmed the allegation is true and that Resident A chooses to use briefs and even when she prompts him to shower or clean himself after soiling his brief, Resident A refuses.

I reviewed Resident A's Assessment Plan. It was not signed by Licensee Ryan Boutell, but only by PACE Case Manager Raquel Peters on 7/7/21. Under "Toileting" it was marked "yes" that Resident A requires assistance with toileting,

however, there were not any additional instructions or comments to specify Resident A's needs.

I interviewed Resident A in his room. I witnessed a large pile of boxed briefs sitting at the foot of Resident A's bed. I informed Resident A of the reason for my visit and need to speak with him. Resident A was cooperative and willing to speak with me. Resident A stated he had lived at the Fessenden home since approximately 2015. He stated he had no idea why someone would call in a concern about him. I asked Resident A to tell me about the help he receives at the home. He told me that someone from PACE helps him shower once per week, although Resident A stated he does not need assistance with this. I asked Resident A if he needed assistance with toileting or help with his briefs. Resident A said he does not need help. I informed Resident A that there was concern he was not changing his brief as often as needed. Resident A denied this was true. I advised Resident A to be mindful of his state of being and if he needs to change his brief to do so in a timely manner.

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:	Mr. Boutell and Ms. Boutell both acknowledged that on 2/10/2022 Resident A was wearing a brief that was dried to his pants with feces. However, both stated Resident A is able to change his own brief. Mr. Boutell stated that staff do not provide this level of care at Fessenden Home. Resident A's Assessment Plan, signed by Resident A's case manager, indicated a need to assist him with toileting.
CONCLUSION:	VIOLATION ESTABLISHED

On March 14, 2022, I conducted an exit conference with Licensee Ryan Boutell. I informed him of the Assessment Plan and indication of need for assistance with toileting for Resident A. I told Mr. Boutell this does substantiate a rule violation regardless of whether or not Resident A wants assistance because he does need it. I requested a Corrective Action Plan, which Mr. Boutell agreed to send.

IV. RECOMMENDATION

Upon receiving an acceptable Corrective Action Plan, I recommend no change to the current license status.

 March 29, 2022

Rebecca Piccard Date
Licensing Consultant

Approved By:

 March 29, 2022

Jerry Hendrick Date
Area Manager