

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 17, 2022

Don Adams Moriah Incorporated 3200 E Eisenhower Ann Arbor, MI 48108

> RE: License #: AL810069928 Investigation #: 2022A0575017

> > Eisenhower Center North Hall

Dear Mr. Adams:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On May 12, 2022, you submitted an acceptable written corrective action plan.

It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available, and you need to speak to someone immediately, please contact the local office at (517) 284-9720.

Sincerely,

Jeffrey J. Bozsik, Licensing Consultant Bureau of Community and Health Systems

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(734) 417-4277

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

I. IDENTIFYING INFORMATION

| License #: | AL810069928 |
|--------------------------------|------------------------------|
| Investigation #: | 2022A0575017 |
| gaor. | 2022/1001/001/ |
| Complaint Receipt Date: | 05/12/2022 |
| Investigation Initiation Date: | 05/12/2022 |
| investigation initiation bate. | 00/12/2022 |
| Report Due Date: | 06/11/2022 |
| Licensee Name: | Moriah Incorporated |
| Licensee Name. | Monari incorporated |
| Licensee Address: | 3200 E Eisenhower |
| | Ann Arbor, MI 48108 |
| Licensee Telephone #: | (734) 677-0070 |
| · | |
| Administrator: | Don Adams |
| Licensee Designee: | Don Adams |
| | |
| Name of Facility: | Eisenhower Center North Hall |
| Facility Address: | 3200 E Eisenhower Parkway |
| | Ann Arbor, MI 48108 |
| Facility Telephone #: | (734) 677-0070 |
| Tuenty receptions #. | (104) 011-0010 |
| Original Issuance Date: | 02/09/1996 |
| License Status: | REGULAR |
| License diatus. | KEGGEAK |
| Effective Date: | 05/15/2021 |
| Expiration Date: | 05/14/2023 |
| Expiration Date. | 00/14/2020 |
| Capacity: | 15 |
| Program Type: | PH; DD; MI; TBI |
| Program Type: | רח, טט, IVII, TDI |

II. ALLEGATION(S)

Violation Established?

| Direct care staff Iyannah Isom Brown verbally abused Resident A. | Yes |
|------------------------------------------------------------------|-----|
| | |

III. METHODOLOGY

| 05/12/2022 | Special Investigation Intake 2022A0575017 |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| 05/12/2022 | Special Investigation Initiated - Telephone |
| 05/12/2022 | Contact - Telephone calls made- (a) Resident A's guardian; (b) direct care staff: (1) Iyannah Isom Brown and (2) Patricia Taylor; (c) complainant |
| 05/12/2022 | APS Referral-made by Bay Arenac CMH |
| 05/12/2022 | Inspection Completed On-site |
| 05/12/2022 | Inspection Completed-BCAL Sub. Compliance |
| 05/12/2022 | Corrective Action Plan Requested and Due on 05/13/2022 |
| 05/12/2022 | Corrective Action Plan Received |
| 05/12/2022 | Corrective Action Plan Approved |
| 05/12/2022 | Exit Conference with Don Adams, licensee designee |

ALLEGATION:

Direct care staff lyannah Isom Brown verbally abused Resident A.

INVESTIGATION:

An APS referral was made by the Bay Arenac CMH.

Resident A was not interviewed due to his disability.

On 5/12/22 I interviewed Resident A's guardian/mother, who stated she was satisfied with Resident A's placement and services.

On 5/12/22 I interviewed the complainant and staffs Iyannah Isom Brown and Patricia Taylor. The complainant restated the profanity which she alleged Iyannah Isom Brown used to address Resident A. Patricia Taylor corroborated the complainant's allegations regarding Iyannah Isom Brown's untoward behavior. Iyannah Isom Brown denied verbally abusing Resident A.

I conducted an exit conference with Don Adams, licensee designee. He stated lyannah Isom Brown's employment has been terminated.

| APPLICABLE RU | PPLICABLE RULE | |
|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| R 400.15308 | Resident behavior interventions prohibitions. | |
| | (2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following: (f) Subject a resident to any of the following: (ii) Verbal abuse. | |
| ANALYSIS: | The preponderance of credible evidence is that Iyannah Isom Brown verbally abused Resident A. | |
| CONCLUSION: | VIOLATION ESTABLISHED | |

IV. RECOMMENDATION

An acceptable plan of correction has been received; therefore, I recommend no changes in the status of the license.

Jeffrey J. Bozsik Date: 5/12/22

Licensing Consultant

Approved By:

Ardra Hunter Date: 5/17/22

Area Manager