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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 12, 2022

Constance Hawthorne Kambly Living Center 1003 North Ave Battle Creek, MI 49017

> RE: License #: AL130006927 Investigation #: 2022A1024026

> > Kambly Living Center East

Dear Ms. Hawthorne:

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 April 25, 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. 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,

Ondrea Johnson, Licensing Consultant Bureau of Community and Health Systems

427 East Alcott

Kalamazoo, MI 49001

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enclosure

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

#### I. IDENTIFYING INFORMATION

License #:	AL130006927
Investigation #:	2022A1024026
Complaint Receipt Date:	03/21/2022
Investigation Initiation Date:	03/22/2022
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Report Due Date:	05/20/2022
Licensee Name:	Kambly Living Center
Licensee Name.	Rambly Living Center
Licensee Address:	1003 North Ave
	Battle Creek, MI 49017
Licensee Telephone #:	(269) 965-5539
	(200) 000 0000
Administrator:	Constance Hawthorne
Licensee Designee:	Constance Hawthorne
Licensee Designee.	Constance Hawthorne
Name of Facility:	Kambly Living Center East
Facility Address:	1003 North Avenue
Facility Address:	Battle Creek, MI 49017
Facility Telephone #:	(269) 965-5539
Original Issuance Date:	02/01/1990
July 100 dans 0 Date:	
License Status:	REGULAR
Effective Date:	01/16/2021
Litective Bate.	01/10/2021
Expiration Date:	01/15/2023
Canacity	15
Capacity:	10
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

# II. ALLEGATION(S)

Violation Established?

Resident A was observed with bruising on the back of her neck	Yes
after a direct care staff member grabbed her neck.	

## III. METHODOLOGY

03/21/2022	Special Investigation Intake 2022A1024026	
03/21/2022	Contact - Document Received-Facility's Incident Report	
03/22/2022	Special Investigation Initiated – Telephone with direct care staff member Anita Viggerous and home manager Constance Hawthorne	
03/28/2022	Contact - Document Received Resident A's <i>Health Care Appraisal</i> and Ms. Wright's <i>Termination Letter</i>	
04/18/2022	Inspection Completed On-site with Residents A, B, C, D, and direct care staff member Mindy Manning	
04/19/2022	Contact - Telephone call made with direct care staff member SaNeekique Wright and Dovie Johnson	
04/19/2022	Exit Conference with licensee designee Connie	
04/19/2022	Inspection Completed-BCAL Sub. Compliance	
04/19/2022	Corrective Action Plan Requested and Due on 5/09/2022	
04/25/2022	Corrective Action Plan Received	
04/25/2022	Corrective Action Plan Approved	
05/13/2022	APS Referral made	

#### **ALLEGATION:**

Resident A was observed with bruising on the back of her neck after a direct care staff member grabbed her neck.

#### **INVESTIGATION:**

On 03/21/2022, I reviewed an incident report which documented Resident A was observed with bruising on the back of her neck. The incident report further stated that on 2/19/2022 Resident A grabbed her neck and stated "hurt Nee" while pointing to her bedroom. The incident report stated Resident A repeated this 3 times at which time staff looked at Resident A's neck and observed bruising.

On 3/22/2022, I conducted interviews with home manager Constance Hawthorne and direct care staff member Anita Viggerous who both stated that Resident A stated to them that direct care staff member SaNeekique Wright, who is called "Nee', by the residents "is mean" while pointing to the back of her neck. Ms. Hawthorne stated although Resident A is cognitively impaired, Resident A does a good job communicating her needs and concerns with direct care staff members through the use of both nonverbal communication and short-worded sentences. Ms. Hawthorne further stated although Resident A could not disclose in detail how Ms. Wright was mean to her, Ms. Hawthorne believes Ms. Wright mistreated Resident A in some way which caused Resident A to have bruises on the back of her neck. Ms. Hawthorne stated Ms. Wright works during the 3<sup>rd</sup> shift when the residents are sleeping however assists with resident personal care needs in the morning such as with bathing and dressing. Ms. Hawthorne believes Ms. Wright was forceful with Resident A while either assisting with bathing her or dressing her. Ms. Hawthorne stated due to her findings Ms. Wright was terminated from employment.

On 3/28/2022, I reviewed Resident A's *Health Care Appraisal*. According to this appraisal, Resident A is diagnosed with Mental Retardation and is fully ambulatory. This appraisal also stated Resident A has no issues with her skin.

I also reviewed Ms. Wright's *Termination Letter*. According to this letter written by licensee designee Constance Hawthorne, Ms. Wright was terminated on 2/21/2022 due to bruises found on Resident A's neck and Resident A stating Ms. Wright is mean.

On 418/2022, I conducted an onsite investigation at the facility with Residents A, B, C and D. I attempted to talk to Resident A however Resident A was not able to be interviewed. Residents B, C, and D all stated that they have never seen any staff member be mean to any resident and all reported feeling safe in the home.

While at the facility, I also interviewed direct care staff member Mindy Manning. Ms. Manning stated she was informed by Resident A that Ms. Wright was mean to her and showed her bruises on her neck. Ms. Manning stated Resident A does not have a history of making false allegations against any direct care staff members and believes that Ms. Wright mistreated Resident A by causing bruises to her neck. Ms. Manning stated she does not work with Ms. Wright because Ms. Wright usually works during the night shift when residents are sleeping.

On 4/19/2022, I conducted an interview with SaNeekique Wright. Ms. Wright stated she believes she was falsely terminated from employment at Kambly AFC because she did not cause any bruising to Resident A. Ms. Wright stated Resident A was observed to have red marks on the back of her neck however Ms. Wright believes Resident A caused the marks herself. Ms. Wright stated Resident A thought that she (Ms. Wright) was mean because Resident A was not able to take a bath in the middle of the night as she requested and had to wait to take a bath in the morning hours when additional staff came on shift. Ms. Wright stated although she did assist Resident A with her personal care the morning of 2/19/2022, she did not mistreat Resident A in any way.

I also conducted an interview with Dovie Johnson. Ms. Johnson stated she alternates with Ms. Wright when providing assistance to Resident A's personal care needs in the morning hours. Ms. Johnson stated she saw bruises on the back of Resident A's neck on the morning of 2/20/2022 and informed her manager. Ms. Johnson stated Resident A is cognitively impaired however is very alert and communicates by using one-worded phrases. Ms. Johnson stated Resident A reported that "Nee is mean" and pointed to her neck therefore Ms. Johnson believes Ms. Wright caused the bruises to the back of Resident A's neck. Ms. Johnson stated she does not believe Resident A would make a false accusation about staff members being mean to her or hurting her.

APPLICABLE R	ULE	
R 400.15308	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:**

Based on my investigation which included interviews with direct care staff members Anita Viggerous, SaNeekique Wright, Dovie Johnson, Mindy Manning, home manager Constance Hawthorne, Residents A, B, C, D, review of incident report, Health Care Appraisal, and Ms. Wright's Termination Letter there is evidence to support the allegation Resident A was observed with bruising on the back of her neck due to staff member SaNeekigue Wright mistreating her. It was also alleged on 2/19/2022 Resident A grabbed her neck and stated "hurt Nee" while pointing to her bedroom. Ms. Viggerous, Ms. Johnson, Ms. Manning, and Ms. Hawthorne all stated that Resident A reported that Ms. Wright is mean while pointing to the back of her neck to show visible bruising. Ms. Viggerous, Ms. Johnson, Ms. Manning and Ms. Hawthorne also all stated that Resident A does a good job communicating with limited phrases and does not have a history of making false complaints. Ms. Hawthorne stated she believes Ms. Wright mistreated Resident A in some way which caused her to have bruises on the back of her neck. Ms. Hawthorne also stated she believes Ms. Wright was forceful with Resident A while either assisting with bathing her or dressing her therefore due to these findings Ms. Wright was terminated from employment. According to termination letter Ms. Wright was terminated for this incident on 2/21/2022 therefore Resident A was mistreated by staff member Ms. Wright. Based on all this information, I found that direct care staff member Ms. Wright mistreated Resident A.

#### **CONCLUSION:**

#### **VIOLATION ESTABLISHED**

On 4/19/2022, I conducted an exit conference with licensee designee Constance Hawthorne. I informed Ms. Hawthorne of my findings and allowed her an opportunity to ask questions or make comments.

On 4/25/2022, I received and approved an acceptable corrective action plan.

### IV. RECOMMENDATION

An acceptable corrective action plan was received and approved; therefore, I recommend the current license status remain unchanged.

Ondres Go	Caend	5/9/2022
Ondrea Johnson Licensing Consultant		Date
Approved By:		
Naun Jimn	05/12/2022	
Dawn N. Timm Area Manager		Date