



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 3, 2022

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

RE: License #: AM640361441
Investigation #: 2022A0340028
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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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
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 #:	2022A0340028
Complaint Receipt Date:	05/16/2022
Investigation Initiation Date:	05/16/2022
Report Due Date:	07/15/2022
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?
Staff Ella Boutell was overheard calling Resident A a "douchebag".	No
Staff Ella Boutell's boyfriend resides in the home. It is unknown if he is eligible to reside there.	Yes
Additional Findings	Yes

III. METHODOLOGY

05/16/2022	Special Investigation Intake 2022A0340028
05/16/2022	Special Investigation Initiated - Telephone Sarah Nestell
05/23/2022	APS Referral
05/23/2022	Inspection Completed On-site
05/23/2022	Inspection Completed-BCAL Sub. Compliance
05/23/2022	Contact - Document Sent Ryan Boutell; request for staff records
05/25/2022	Contact - Telephone call made Licensee Ryan Boutell
05/26/2022	Contact - Telephone call made Ryan Boutell
05/26/2022	Contact - Telephone call received from Ryan Boutell
05/26/2022	Exit Conference Licensee Ryan Boutell
05/26/2022	Contact - Telephone call made Kassandra Counterman
05/31/2022	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Staff Ella Boutell was heard calling Resident A a “douchebag”.

INVESTIGATION: On May 16, 2022, I received a complaint from the BCAL Online Complaints. It stated that staff Ella Boutell said Resident A was “being a douchebag” while in the presence of Resident A.

On May 16, 2022, I called Sarah Nestell from Newaygo Community Mental Health (CMH). She stated she is the case manager for Resident A. Ms. Nestell stated Resident A previously resided in a special certification home but is now transitioning to independent living. He was placed at Fessenden AFC by his guardian while they look for an independent home.

Ms. Nestell described for me the interaction she witnessed that was described in the complaint. She stated that she was having a phone conversation with Resident A. There has been ongoing friction between Resident A and staff Ella Boutell. Resident A seems to get worked up by the way Ms. Boutell will speak to Resident A. Ms. Nestell stated there was a previous incident where Resident A threw a water bottle so Ms. Nestell suggested Resident A apologize to Ms. Boutell while Ms. Nestell remained on the phone. Resident A went to where Ms. Boutell was in the home so that he could apologize. Ms. Nestell heard Ms. Boutell say that Resident A was “being a douchebag”. Ms. Nestell attempted to address the issue with Licensee Ryan Boutell, who is Ms. Boutell’s father, but she felt it was an unproductive conversation.

On May 23, 2022, I conducted an unannounced home inspection. I spoke with Resident A in the backyard of Fessenden Home. We discussed the incident with him throwing a water bottle. Resident A stated that he has a “short fuse” and some people irritate him more than others. He stated that he is learning how to walk away when he thinks he is going to have a “moment”. I asked Resident A if there was a specific person who “irritated” him more than others. He named another resident and said that “he caused the most problems”. I asked him how his relationship was with the staff members. Resident A stated that he had no problems with staff. I asked Resident A if there are any people in the home who have called him names and he stated that he did not think so. I asked Resident A if he recalled Ms. Boutell ever calling him a name and Resident A said he did not think she had. I asked Resident A if Ms. Boutell had ever called him a “douchebag”, Resident A stated he did not remember that happening.

I then interviewed Ms. Boutell in the front yard of the home. I explained the reason for my visit. She denied that she had called Resident A a “douchebag”. Ms. Boutell gave me an account of Resident A’s behaviors and how he has been a difficult resident and “needs medication”. We discussed her need to communicate with his case manager, for whom she expressed great dislike.

I asked Ms. Boutell why someone would report hearing her call Resident A a “douchebag” if she did not say this. Ms. Boutell did not have an answer to this. We discussed appropriateness and professionalism when working with residents and their support systems.

When I reentered the home, staff Cassandra Counterman had arrived. I informed Ms. Counterman the reason for my visit. I asked Ms. Counterman if she had any knowledge about the alleged name calling of Resident A. She stated she was not at the home during that time.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	<p>(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:</p> <ul style="list-style-type: none"> (f) Subject a resident to any of the following: <ul style="list-style-type: none"> (i) Mental or emotional cruelty. (ii) Verbal abuse. (iii) Derogatory remarks about the resident or members of his or her family. (iv) Threats.
ANALYSIS:	<p>The allegation was made that staff Ella Boutell called Resident A a “douchebag”.</p> <p>Resident A’s case manager Sarah Nestell stated she was on the phone with Resident A when he approached Ms. Boutell and Ms. Nestell heard Ms. Boutell say that Resident A was “being a douchebag”.</p> <p>Resident A stated that he did not remember Ms. Boutell calling him a “douchebag”. He later came to me stating that Ms. Boutell did not call him a name.</p> <p>Ms. Boutell denied calling Resident A a “douchebag”.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Staff Ella’s boyfriend resides in the home, and it is unknown if he is eligible to be there.

INVESTIGATION: On May 16, 2022, it was reported to me that staff Ella Boutell’s boyfriend resides in the home with Ms. Boutell. It is unknown if a background check has been completed on him.

On May 16, 2022, I contacted Sarah Nestell from CMH. It was brought to Ms. Nestell’s attention that Ms. Boutell’s boyfriend was living in the home, and she was concerned that a background check was not completed for him.

On May 23, 2022, during a home inspection, staff Ms. Boutell confirmed she resides in the home with her boyfriend, Edward Cubbit.

On May 23, 2022, I requested from Licensee Ryan Boutell the Eligibility letter for all staff and household members. As of this date I have not received the requested documents.

On May 26, 2022, I spoke with Mr. Boutell. I asked him if Edward Cubbit has an eligibility letter and Mr. Boutell acknowledged he does not.

APPLICABLE RULE	
R 400.14201	Qualifications of administrator, direct care staff, licensee, and members of the household; provision of names of employee, volunteer, or member of the household on parole or probation or convicted of felony; food service staff.
	(10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.
ANALYSIS:	Concern was expressed that household member Edward Cubbit has not been cleared with a background check to reside in the home. Mr. Boutell confirmed that Mr. Cubbit has not had a background check completed to confirm eligibility to reside in the home.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Staff Ella Boutell's boyfriend resides in the home with her, and it is unknown if he is eligible to be there.

INVESTIGATION: On May 16, 2022, I received a complaint which stated that staff Ella Boutell's boyfriend also resides in the home with her. It is unknown if he has had a Health Clearance.

On May 23, 2022, during a home inspection, staff Ms. Boutell confirmed she resides in the home with her boyfriend, Edward Cubbit.

On May 23, 2022, I requested from Licensee Ryan Boutell the medical clearance for all staff and household members. As of this date I have not received the requested documents.

On May 26, 2022, I spoke with Mr. Boutell. I asked him if Ms. Boutell's boyfriend, named Edward Cubbit, has a medical clearance and Mr. Boutell stated he has not.

APPLICABLE RULE	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.
ANALYSIS:	<p>The allegation was made that household member Edward Cubbit may not have a medical clearance allowing him to reside in the home.</p> <p>Ms. Boutell confirmed she resides in the home with her boyfriend Mr. Cubbit.</p> <p>Mr. Boutell confirmed Mr. Cubbit has not had a medical clearance.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Staff Ella's boyfriend resides in the home. It is unknown if he is eligible to be there.

INVESTIGATION: On May 16, 2022, I received a complaint which stated that staff Ella Boutell's boyfriend also lives in the home with her. It is unknown if he has had a TB test.

On May 23, 2022, during a home inspection, staff Ms. Boutell confirmed she resides in the home with her boyfriend, Edward Cubbit.

On May 23, 2022, I requested from Licensee Ryan Boutell the TB test results for all staff and household members. As of this date I have not received the requested documents.

On May 26, 2022, I spoke with Mr. Boutell. I asked him if Ms. Boutell's boyfriend, named Edward Cubbit, has a TB test and Mr. Boutell stated he has not.

APPLICABLE RULE	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.
ANALYSIS:	<p>A complaint was filed with concerns regarding the ability for Edward Cubbit to reside in the AFC home.</p> <p>Ms. Boutell admitted that Mr. Cubbit resides in the home with her.</p> <p>Mr. Boutell admitted that Mr. Cubbit does not have a TB test completed.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: While speaking with Resident A in the back yard of the home, I saw the back side of the home and there was a large chunk of roof missing from the back of the home. Photos were taken of the roof.

On May 26, 2022, I spoke with Mr. Boutell. When I asked him about the damaged roof, he stated that "last fall" a tree fell on it. When I asked why it had not been fixed yet Mr. Boutell stated he had not been able to get it fixed yet.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

ANALYSIS:	The roof of Fessenden AFC home is in disrepair and has been so for more than 6 months.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION: While speaking with Resident A in the back yard of the home, I saw that the staircase from the back door was in disrepair and falling apart, boards on the handrails were unattached to the base. Photos were taken of the staircase.

On May 26, 2022, I spoke with Mr. Boutell regarding the condition of the back staircase at Fessenden Home. I informed him of the condition of the stairs and Mr. Boutell stated he had just been to the home and did not realize they were in disrepair. I informed him they were falling apart and that I had taken photos.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(8) Stairways shall have sturdy and securely fastened handrails. The handrails shall be not less than 30, nor more than 34, inches above the upper surface of the tread. All exterior and interior stairways and ramps shall have handrails on the open sides. All porches and decks that are 8 inches or more above grade shall also have handrails on the open sides.
ANALYSIS:	The staircase at the back door of Fessenden are falling apart and Mr. Boutell has been informed of their condition.
CONCLUSION:	VIOLATION ESTABLISHED

On May 26, 2022, I conducted an exit conference. I discussed the allegations and concerns I had at Fessenden Home. I informed him of the need for a Corrective Action Plan (CAP) which Mr. Boutell agreed to send.

IV. RECOMMENDATION

Upon receipt of an approved corrective action plan, I recommend no change to the current license status.

Rebecca Piccard

June 3, 2022

Rebecca Piccard

Date

Licensing Consultant

Approved By:



June 3, 2022

Jerry Hendrick
Area Manager

Date