GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 20, 2022

Gretchen Fisher
Indian Trails Inc
O-1859 Lake Michigan Dr
Grand Rapids, MI 49534

RE: License #: AC700200613
Investigation #: 2022C0434018
Indian Trails AFC

Dear Ms. Fisher:

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 8/24/22, 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 Grand Rapids licensing unit at (616) 356-0100.

Sincerely,

James VandenHeuvel

James P. VandenHeuvel, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 901-3730

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AC700200613
Investigation #:	2022C0434018
Complaint Receipt Date:	08/01/2022
Investigation Initiation Date:	08/02/2022
Report Due Date:	09/30/2022
Licensee Name:	Indian Trails Inc
Licensee Address:	O-1859 Lake Michigan Dr Grand Rapids, MI 49534
Licensee Telephone #:	(616) 677-5251
Administrator:	Gretchen Fischer
Name of Facility:	Indian Trails AFC
Facility Address:	0-1859 Lake Michigan Dr Grand Rapids, MI 49534
Facility Telephone #:	(616) 677-5251
Original Issuance Date:	06/01/1953
License Status:	REGULAR
Effective Date:	07/29/2021
Expiration Date:	07/29/2023
Capacity:	100
Program Type:	ADULT CAMP

II. ALLEGATION(S)

	Violation Established?
The camp operator did not notify the department of a camper death.	Yes

III. METHODOLOGY

08/01/2022	Special Investigation Intake 2022C0434018
08/02/2022	Special Investigation Initiated - Letter
08/02/2022	Contact - Document Received
08/02/2022	Contact - Document Received
08/16/2022	Contact - Document Sent
08/16/2022	Contact - Document Received received Police report- #2022-0606158.
08/23/2022	Inspection Completed-BCAL Sub. Compliance
08/23/2022	Corrective Action Plan Requested and Due on 09/07/2022
08/24/2022	Corrective Action Plan Received
08/24/2022	Corrective Action Plan Approved
09/20/2022	Exit Conference with Gretchen Fisher by Telephone

ALLEGATION:

The camp operator did not notify the department of a camper death.

INVESTIGATION:

On 7/28/22, During an onsite inspection the camp director, Gretchen Fisher revealed an adult foster care camper had died at the facility earlier in the summer. She stated the camper had been placed on hospice prior to the summer camp season and had expressed interest in attending camp again in 2022. Ms. Fisher stated Camper A and family member(s), along with camp staff were aware of physical condition of the

camper prior to entering camp. She stated Camper A had a wonderful first day at camp but began to decline shortly thereafter and died the following day at the camp facility.

Ms. Fisher stated family members and health care staff were present with Camper A when he passed away. She stated the Ottawa County Sheriff's Department responded to the scene and created an incident report.

I toured the cabin area where Camper A had died. The cabin was a dorm building with single bed, dressers, and large ADA compliant bathroom. Ms. Fisher stated Camper A had been staying in Cabin Seneca but was moved to Cabin Heron on 6/5/22. Camper A was supervised the camp nurse and the camp director.

On 07/29/22, I received the Incident Report form (BCAL-4605) by email from Ms. Fisher. The report read in part *"Camper that was on hospice passed away due to esophogeal cancer."*

A case note attached to the incident report read in part:

> *"As day progressed, camper continued to decline. No longer able to wake, change of status, lethargic, drowsy, agonal respirations present. Camper moved to Huron cabin for privacy. Per camp director, camper's family, this RN, camper can pass away at camp. At. 9:26 pm, camper passed away. Family present at bedside, police, coroner, and funeral home in contact."*

The incident report also included a medication log, vitals, admission papers for hospice, and a Do-Not-Resuscitate Order for Camper A dated and signed by a patient advocate on 4/30/22.

On 8/2/22, I reviewed the cabin roster for week one. The cabin roster revealed Camper A was assigned to the cabin of Seneca and was listed as one of eight campers within the cabin. The cabin roster identified four staff assigned for the eight campers.

Ms. Fisher provided additional information by email writing "After the first morning when we could tell the camper was declining, we moved him into the cabin Huron. His counselors had little to no interaction with him after that. Just the nurse, myself, lead staff, and his family and friends."

I reviewed Camper A's health form. The health form was completed on 3/3/22.

On 8/16/22, I reviewed the Ottawa County Sheriff's Office report # 22-06060158. The report included interviews, scene investigation notes, and disposition. The responding officer Deputy Miller responded to the scene on 6/6/22 and wrote Life EMS and Wright/Tallmadge Twp Fire Department was on scene. Responding EMS reported the time of death of 2249 hours. Deputy Miller wrote "Camp Director

(Gretchen Fischer) and camp nurse (Jennifer Vandyken) advised, Camper A had been at camp since yesterday, and it was his wish to be at the camp when he passed away." The report read Camper A's mother had been on scene through the day. Vandyken/Fischer advised Camper A was noted to have died at 2126 hours while Vandyken, Fisher, and Camper A's mother were on scene with him. The report was identified as "Death Investigation" and the disposition was "Administrative Closure."

APPLICABLE RULE	
R 400.11127	**Camper health requirements.**
	(9) A camp shall submit a written report, on forms furnished by the department, to the department if a camper dies or if a camper has an accident or illness that result in an overnight stay in a hospital or clinic or being sent home. A camp shall submit the report within 48 hours of the death, injury, or illness.
ANALYSIS:	Through interviews and review of records it was determined the camp operator did not notify the department of a camper death as required by administrative rule.
CONCLUSION:	**VIOLATION ESTABLISHED**

On 09/20/22, I conducted an exit conference with Ms. Fischer. We discussed the findings and the submitted corrective action plan. Ms. Fischer understood the findings of the report.

IV. RECOMMENDATION

The camp submitted an acceptable written corrective action plan on 8/24/22. I recommend no change in the license status.

James VandenHeuvel 9/20/22

James P. VandenHeuvel Date
Licensing Consultant

Approved By:

Russell Misiak 9/20/22

Russell B. Misiak Date
Area Manager