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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 28, 2022

Paula Barnes
Central State Community Services, Inc.
Suite 201
2603 W Wackerly Rd
Midland, MI 48640

RE: License #: AS250291671
Investigation #: 2022A0569054
Vassar Road Home

Dear Ms. Barnes:

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 feel free to 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 (517) 643-7960.

Sincerely,

Kent W Gieselman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 931-1092

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250291671
Investigation #:	2022A0569054
Complaint Receipt Date:	08/22/2022
Investigation Initiation Date:	08/22/2022
Report Due Date:	10/21/2022
Licensee Name:	Central State Community Services, Inc.
Licensee Address:	Suite 201 2603 W Wackerly Rd Midland, MI 48640
Licensee Telephone #:	(989) 631-6691
Administrator:	Regina Wheaton
Licensee Designee:	Paula Barnes
Name of Facility:	Vassar Road Home
Facility Address:	3220 Vassar Road Burton, MI 48519
Facility Telephone #:	(810) 742-2745
Original Issuance Date:	09/12/2007
License Status:	REGULAR
Effective Date:	04/22/2022
Expiration Date:	04/21/2024
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

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II. ALLEGATION(S)

	Violation Established?
The residents were left in the facility with no staff on 8/22/22.	Yes

III. METHODOLOGY

08/22/2022	Special Investigation Intake 2022A0569054
08/22/2022	APS Referral Complaint received from APS.
08/22/2022	Special Investigation Initiated - Letter Email to GHS ORR.
08/22/2022	Contact - Telephone call received Contact with Jamilla Cheatom, program manager.
08/23/2022	Contact - Document Received IR received.
09/01/2022	Contact - Telephone call received Contact with Witness 1.
09/28/2022	Inspection Completed On-site
09/28/2022	Inspection Completed-BCAL Sub. Compliance
09/28/2022	Contact - Telephone call made Attempted contact with Mr. Riley. Phone was hung up immediately.
09/28/2022	Contact - Telephone call made Attempted contact with Mr. Howard. Phone number no longer active.
09/28/2022	Exit Conference Exit conference with Paula Barnes, licensee designee.
09/28/2022	Contact - Telephone call made Contact with Ms. Cheatom.

ALLEGATION:

The residents were left in the facility with no staff on 8/22/22.

INVESTIGATION:

This complaint was received from the adult protective services central intake department. The complainant reported that the police were called to this facility on 8/22/22, and found the residents alone, with no staff present in the facility.

Witness 1 stated on 9/1/22 that a neighbor of this facility was sleeping and woke up to their dog barking at about 3:00am on 8/22/22. Witness 1 stated that the neighbor got up and went to the living room and observed a Resident from this facility, naked, and trying to enter the neighbor's home. Witness 1 stated that the neighbor yelled at the resident to leave, but the resident would not leave the neighbor's property. Witness 1 stated that the neighbor then called 911 and the police arrived but would not touch the resident trying to enter the neighbor's home. Witness 1 stated that the resident then started walking back to this facility and the police officer followed the resident. Witness 1 stated that when the police got into the facility with the resident, they found that there were no staff present at the facility.

Jamilla Cheatom, program manager, stated on 8/22/22 that she had been called at home around 4:00am and informed that there were no staff in this facility and the residents had been left alone. Ms. Cheatom stated that she lives near this facility and was able to get to the facility within a few minutes. Ms. Cheatom stated that when she arrived at the facility at about 4:11am, she found a police officer present and the staff assigned to work the third shift had left the facility. Ms. Cheatom stated that she checked Resident A to make sure he was not injured and helped him back to bed. Ms. Cheatom stated that all the other residents were sleeping during the incident. Ms. Cheatom stated that the staff assigned to work the third shift were Raheem Riley and Jalen Howard. Ms. Cheatom stated that the two staff have never been disciplined prior to this incident and have given no reason for leaving the facility during their shift. Ms. Cheatom stated that both staff have been terminated and refused to communicate in any way with herself or other administrators from Central State Inc.

Ms. Cheatom submitted an incident report (IR) on 8/22/22 documenting this incident. The IR documents that Resident A is the resident who left the facility and went to the neighbor's home. The IR documents that Ms. Cheatom was called and informed that the residents were alone in the facility, and that she immediately went to the facility. The IR documents that Ms. Cheatom found a police officer in the kitchen with Resident A when she arrived at 4:11am, and that there were no staff present in the facility. The IR documents that the corrective measures taken by Ms. Cheatom were to ensure Resident A had not been harmed or injured, then she did visual checks on the remaining residents to ensure their safety.

Attempts to contact Raheem Riley and Jalen Howard, staff persons, were made on 9/28/22. Mr. Riley's phone was answered and immediately terminated the phone call. Mr. Howards phone number is no longer in service.

An unannounced inspection of this facility was conducted on 9/28/22. All the residents were observed to be appropriately dressed and groomed with no injuries. None of the verbal residents were awake to observe this incident and could not give a statement regarding the incident. Resident A is non-verbal and could not give a statement regarding this incident.

An exit conference was conducted on 9/28/22 with Paula Barnes, licensee designee. The findings in this report were reviewed. Ms. Barnes was informed that a corrective action plan would be required.

APPLICABLE RULE	
R 400.14206	**Staffing requirements.**
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.
ANALYSIS:	The complainant reported that the residents of this facility were left with no staff supervision on 8/22/22. Witness 1 and Ms. Cheatom confirmed this with their statements. Ms. Cheatom stated that when she arrived at the facility at 4:11am on 8/22/22, Mr. Riley and Mr. Howard had left the facility and left the residents unsupervised. Based on the statements given and documentation reviewed, it is determined that there has been a violation of this rule.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

I recommend that the status of this license remain unchanged with the receipt of an acceptable corrective action plan.

9/28/22

Kent W Gieselman Date
Licensing Consultant

Approved By:

9/28/22

Mary E. Holton Date
Area Manager