



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 24, 2023

Jeffrey Hunter
720 Hancock
Saginaw, MI 48602

RE: License #: AF730281796
Investigation #: 2023A0576021
Hope AFC

Dear Mr. Hunter:

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,

A handwritten signature in cursive script that reads "C. Garza".

Christina Garza, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 240-2478

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF730281796
Investigation #:	2023A0576021
Complaint Receipt Date:	01/26/2023
Investigation Initiation Date:	01/30/2023
Report Due Date:	03/27/2023
Licensee Name:	Jeffrey Hunter
Licensee Address:	720 Hancock, Saginaw, MI 48602
Licensee Telephone #:	(989) 928-2720
Administrator:	N/A
Licensee Designee:	N/A
Name of Facility:	Hope AFC
Facility Address:	720 Hancock, Saginaw, MI 48602
Facility Telephone #:	(989) 790-3056
Original Issuance Date:	09/09/2008
License Status:	REGULAR
Effective Date:	08/19/2021
Expiration Date:	08/18/2023
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A reported that his belongings, clothes, and radio are locked up.	Yes
Resident A's allowance is being withheld due to his behavior.	Yes
Additional Findings	Yes

III. METHODOLOGY

01/26/2023	Special Investigation Intake 2023A0576021
01/26/2023	APS Referral
01/30/2023	Special Investigation Initiated - Telephone Interviewed Complainant
02/08/2023	Inspection Completed On-site Interviewed Licensee, Jeff Hunter
03/20/2023	Contact - Telephone call made Interviewed Senior Account Representative A, Guardianship Services
03/21/2023	Contact - Telephone call made Interviewed Danita Rider, Resident A's Case Manager
03/22/2023	Contact - Face to Face Interviewed Resident A
03/24/2023	Contact – Face to Face Interviewed Licensee, Jeff Hunter
03/24/2023	Exit Conference Conducted Exit Conference with Licensee, Jeff Hunter

ALLEGATION:

Resident A reported that his belongings, clothes, and radio are locked up.

INVESTIGATION:

On January 30, 2023, I interviewed the Complainant who reported Resident A no longer lives at Hope AFC and moved on or about February 2, 2023. Resident A disclosed the home staff at Hope AFC locked up his clothes and took his radio. Chris Hunter, wife of Licensee, Jeff Hunter said that Resident A’s brother took his radio. When Complainant sees Resident A, he is dressed appropriately.

On February 8, 2023, I completed an unannounced on-site inspection at Hope AFC and interviewed Licensee, Jeff Hunter regarding the allegations. Mr. Hunter reported Resident A had lots of clothes and they were locked up because he would put them all on or will change every ½ hour. On one occasion, Resident A put on several articles of clothing, went outside, and got heat stroke. Resident A’s radio was locked up as a form of discipline as he ruined wallpaper at the home.

On March 21, 2023, I interviewed Resident A’s Case Manager, Danita Rider from Saginaw County Community Mental Health Authority. Ms. Rider denied being aware of any concerns regarding Resident A’s dress. Resident A is dressed appropriately when she sees him. Ms. Rider was unaware of a time where he dressed in several layers of clothing causing heat stroke. Resident A reported to her that his clothes were locked up at his home.

On March 22, 2023, I interviewed Resident A. Resident A is his own guardian and Guardianship Services is his payee. Regarding the allegations, Jeff Hunter locked up his clothes because he changed too much. Resident A has his radio, and it is at his new home. Resident A reported another resident took his radio and he got it back. Resident A said that the other resident took his radio because Resident A took a dollar from a roommate.

On March 22, 2023, I reviewed Resident A’s Individual Plan of Service (IPOS). Resident A is a 69-year-old male diagnosed with Residual Schizophrenia, Nicotine Dependence, Essential Hypertension, and Hyperlipidemia. The IPOS does not outline any behavior management methods.

APPLICABLE RULE	
R 400.1409	Resident rights; licensee responsibility.
	(1) Upon a resident's admission to the home, the licensee shall inform and explain to the resident or the resident's designated representative all of the following resident rights:

	(j) The right of reasonable access to and use of his or her personal clothing and belongings.
ANALYSIS:	<p>It was alleged that Resident A's clothes and radio was locked up. Upon conclusion of investigative interviews, there is a preponderance of evidence to conclude a rule violation.</p> <p>Resident A reported his clothing was locked up due to him changing too much, which was also confirmed by the Licensee, Jeff Hunter. Additionally, Resident A's radio was seized as a form of discipline after Resident A ruined wallpaper at the home, according to Mr. Hunter. Although Resident A may have presented some behavior concerns (i.e., dressing in layers in hot weather, ruining wallpaper), there was no behavior management plan in place to address such issues and allow for the restricting of his personal belongings.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident A's allowance is being withheld due to his behavior.

INVESTIGATION:

On January 30, 2023, I interviewed the Complainant who advised Resident A reported that he has not received his allowance of \$40.00 per month since the pandemic. The Licensee's wife Chris Hunter reported that Resident A has not been receiving his allowance due to his behavior. According to the Complainant, the facility uses Resident A's allowance as a reward for good behavior.

On February 8, 2023, I completed an unannounced on-site inspection at Hope AFC and the allegations were discussed with Licensee, Jeff Hunter. Mr. Hunter reported Resident A's relative, Relative A1 took Resident A up north and Resident A asked for money. Relative A1 became angry and directed Mr. Hunter to stop giving Resident A his money because Resident A "is infatuated with money".

On February 8, 2023, I completed an unannounced on-site inspection at Hope AFC and spoke to Licensee, Jeff Hunter. I requested to see Resident A's records including AFC Assessment Plan and Funds I and II documents. Mr. Hunter reported that he discarded all Resident A's records when he moved out of the home.

Resident A has a payee, Guardianship Services and does not have a guardian. Resident A received \$250.00 per month from his payee, according to Mr. Hunter. Resident A would purchase things for himself such as batteries, protein drinks, snacks, and pizza for himself and his peers at the home. Resident A used to receive \$1.00 per

day to use while at program however Resident A's relatives advised Mr. Hunter not to give Resident A this money. The relatives were concerned Resident A would leave program and cross the street to get to the store. There was concern because Resident A "doesn't look where he is going".

On March 20, 2023, I interviewed the Senior Account Representative A from Guardianship Services. Senior Account Representative A advised that Resident A is receiving \$275.00 per month for his personal needs. While living at Hope AFC, the check for these funds was made out to Licensee, Jeff Hunter who would cash the check and then provide the funds to Resident A. Senior Account Representative A did not know how the funds were provided to Resident A and Mr. Hunter should have kept a funds ledger documenting how the funds were spent. Senior Account Representative A advised that Resident A started receiving \$250.00 per month in May 2022, and this amount increased to \$275.00 per month in September 2022. Senior Account Representative A was unaware of Resident A receiving an allowance of \$40.00.

On March 22, 2023, I interviewed Resident A regarding the allegations. Resident A reported that before the pandemic he used to receive \$40.00 per month from his payee. He would also receive \$1.00 per day however that stopped, and he does not know why. Currently, Resident A receives \$275.00 per month from his payee to buy necessities.

On March 22, 2023, I reviewed Resident A's Individual Plan of Service (IPOS). Resident A is a 69-year-old male diagnosed with Residual Schizophrenia, Nicotine Dependence, Essential Hypertension, and Hyperlipidemia. The IPOS does not outline any behavior management methods.

On March 24, 2023, I interviewed Licensee, Jeff Hunter regarding resident funds for the residents of the home. Mr. Hunter advised there currently 4 residents who reside at the home, Resident B, Resident C, Resident D, and Resident E. Resident D does not have a guardian, has a payee, and Mr. Hunter manages funds for Resident D. Resident D receives \$50.00 per month from his payee and the check arrives in Mr. Hunter's name. Mr. Hunter reported that at this time he cashes the check and provides the cash to Resident D. I reviewed resident records for Resident B, Resident C, Resident D, and Resident E. There did not appear to be any concerns noted with the handling of Resident D's funds.

APPLICABLE RULE	
R 400.1411	Resident behavior management; general requirements.
	(2) Methods of behavior management shall encourage cooperation, self-esteem, self-direction, and independence, and shall be administered in accordance with a resident's written assessment plan.

ANALYSIS:	<p>It was alleged that Resident A's allowance was being withheld due to poor behavior. Upon conclusion of investigative interviews, there is a preponderance of evidence to conclude a rule violation.</p> <p>The Complainant reported that the home used Resident A's allowance as a reward for good behavior. Licensee, Jeff Hunter confirmed that Resident A's allowance was withheld as directed by a relative due to him asking the relative for money. Resident A does not have a guardian and, according to his IPOS, does not have any behavior management methods as it relates to his funds.</p> <p>There is a preponderance of evidence to conclude methods of behavior management for Resident A did not encourage self-esteem, self-direction, independence and was not administered in accordance with his written plan.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On March 24, 2023, I reviewed resident care agreements for Resident C, Resident D, and Resident E. The resident care agreements were last completed in August 2020.

APPLICABLE RULE	
R 400.1407	Handling of resident funds and valuables.
	(6) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency at least annually or more often if necessary.
ANALYSIS:	On March 24, 2023, I reviewed resident care agreements for Resident C, Resident D, and Resident E. The resident care agreements were last completed in August 2020.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On March 24, 2023, I reviewed resident funds transaction forms for Resident C, Resident D, and Resident E. The resident transaction forms were not updated and last completed in August 2022.

APPLICABLE RULE	
R 400.1421	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.
ANALYSIS:	On March 24, 2023, I reviewed resident funds transaction forms for Resident C, Resident D, and Resident E. The resident transaction forms were not updated and last completed in August 2022.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On March 20, 2023, I interviewed Senior Account Representative A from Guardianship Services. Senior Account Representative A advised that Resident A is receiving \$275.00 per month for his personal needs. While living at Hope AFC, the check for these funds was made out to Licensee, Jeff Hunter who would cash the check and then provide the funds to Resident A. Senior Account Representative A did not know how the funds were provided to Resident A and Mr. Hunter should have kept a funds ledger documenting how the funds were spent. Senior Account Representative A advised that Resident A started receiving \$250.00 per month in May 2022, and this amount increased to \$275.00 per month in September 2022.

APPLICABLE RULE	
R 400.1421	Handling of resident funds and valuables.
	(5) Except for trust fund accounts, a licensee shall not accept for safekeeping money and valuables exceeding a value of \$200.00 for any resident in the home. Trust fund accounts between the licensee and the resident are subject to a \$1,500.00 limitation.

ANALYSIS:	Resident A's payee reported that Hope AFC was sent at least \$250 per month since May 2022. Licensee, Jeff Hunter accepted money in excess of \$200.00 per month for Resident A, which is in violation of this rule.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On February 8, 2023, I completed an unannounced on-site inspection at Hope AFC and spoke to Licensee, Jeff Hunter. I requested to see Resident A's records including AFC Assessment Plan and Funds I and II documents. Mr. Hunter reported that he discarded all Resident A's records when he moved out of the home.

APPLICABLE RULE	
R 400.1422	Resident records.
	(2) Resident records shall be kept on file in the home for 2 years after the date of a resident's discharge from a home.
ANALYSIS:	On February 8, 2023, I spoke to Licensee, Jeff Hunter and I requested to see Resident A's records including AFC Assessment Plan and Funds I and II documents. Mr. Hunter reported that he discarded all Resident A's records when he moved out of the home, which is in violation of this rule.
CONCLUSION:	VIOLATION ESTABLISHED

On March 24, 2023, I conducted an Exit Conference with Licensee, Jeff Hunter. I advised Mr. Hunter I would be requesting a corrective action plan with regards to the cited rule violations.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, no change in the license status is recommended.

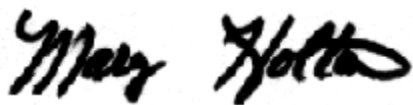


3/24/2023

Christina Garza
Licensing Consultant

Date

Approved By:



3/24/2023

Mary E. Holton
Area Manager

Date