



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 13, 2023

James and Berniece Brown
108 West E Street
Iron Mountain, MI 49801

RE: License #: AF220368292
Investigation #: 2023A0234009
Safe Haven

Dear James and Berniece Brown:

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:

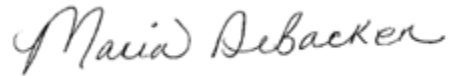
- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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.

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 "Maria DeBacker".

Maria DeBacker, Licensing Consultant
Bureau of Community and Health Systems
305 Ludington St
Escanaba, MI 49829
(906) 280-8531

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF220368292
Investigation #:	2023A0234009
Complaint Receipt Date:	02/23/2023
Investigation Initiation Date:	02/24/2023
Report Due Date:	04/24/2023
Licensee Name:	James and Berniece Brown
Licensee Address:	108 West E Street Iron Mountain, MI 49801
Licensee Telephone #:	(906) 774-1449
Administrator:	N/A
Licensee Designee:	NA
Name of Facility:	Safe Haven
Facility Address:	108 West E Street Iron Mountain, MI 49801
Facility Telephone #:	(906) 774-1449
Original Issuance Date:	02/05/2015
License Status:	REGULAR
Effective Date:	08/05/2021
Expiration Date:	08/04/2023
Capacity:	6

Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED
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II. ALLEGATION(S)

	Violation Established?
Caregiver "Candy" yells at the residents, screams, pounds her fist on tables, slam doors and talks to the residents in a condescending way.	Yes
Additional Findings	Yes

III. METHODOLOGY

02/23/2023	Special Investigation Intake 2023A0234009
02/24/2023	APS Referral
02/24/2023	Special Investigation Initiated - Telephone Call from Christina Bohen APS. They had a denied referral for a similar issue a few months ago.
03/08/2023	Inspection Completed On-site
03/08/2023	Inspection Complete BCAL Sub Non-Compliance
03/08/2023	Contact - Telephone call received. Telephone call from licensee. Calling to discuss allegations from North Carolina.
04/5/2023	Exit Conference Exit conference conducted with Bernice Brown

ALLEGATION: Caregiver "Candy" yells at the residents, screams, pounds her fist on tables, slam doors and talks to the residents in a condescending way.

INVESTIGATION: On 3/8/23, an onsite inspection was conducted. Several residents were interviewed and stated that the live in caregiver Candy Tesch does loose her temper, raise her voice, and slam doors. Residents say they are not afraid of Ms. Tesch but do not like when she gets angry and wish she would stop.

On 3/08/23, after interviewing the residents and hearing that they do not like the way she treats them at times Ms. Tesch admitted that she at times she does loose her temper, raise her voice, and slam doors. She stated she get frustrated because she cares about them and when they are not doing things that are in their best interest she gets upset. Candy Tesch states that she knows she is required to use appropriate behavior management techniques.

I conducted an Exit Conference on 4/5/2023 with Berniece Brown. She stated that she has spoke to Ms. Tesch about the allegations and is aware that Ms. Tesch is required to follow proper behavior management techniques.

APPLICABLE RULE	
R 400.1411	Resident behavior management; general requirements.
	Resident behavior management; general requirements. (1) A licensee shall ensure that methods of behavior management are positive and relevant to the needs of the resident. (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:	The caregiver admits that she has on occasion failed to use proper behavior management techniques.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS: Licensees James and Berniece Brown do not live in the facility.

INVESTIGATION: Upon arrival on 3/8/2023 while on investigation for a complaint I was informed that the licensee does not live in the home and lives in North Carolina by Candy Tesch. All residents confirmed that James and Bernice Brown live in North Carolina.

Special Investigation Report #2022A0221001, dated 12/22/2021 cited violation to MCL 400.703(5) due to James and Berniece Brown not residing at this family adult foster care home as required. On 12/30/2021, Mr. and Mrs. Brown submitted a corrective action plan stating that they have applied for a small group home license which was verified and approved.

I confirmed in the LARA computer system that Mr. and Mrs. Brown's adult foster care group home application was closed by the Central Office Licensing Unit on 10/03/2022 due to lack of response. Mr. and Mrs. Brown failed to provide required documentation to move the adult foster care group home application forward.

On 3/8/2023, Licensee Bernice Brown called and stated that she does not know why her small group home application was not approved. She stated that she never heard from anyone that they needed further information. While speaking on the phone she was able to find an email that stated that she needed to send further information and background checks. She stated that she did not see that email and was unaware that she would need to do further background checks as she was already a licensee. She stated that she would apply right away for a small group home license. It has been confirmed that Mrs. Brown applied for a small group license on 3/10/2023 with a pending license number #AS220415857.

I conducted an Exit conference with Bernice Brown on 4/5/2023. Mrs. Brown stated that she is aware that this is a repeat violation. She was informed that a provisional license would be issued until the small group license is opened.

APPLICABLE RULE	
MCL 400.703	Definitions: A.
	(5) "Adult foster care family home" means a private residence with the approved capacity to receive at least 3 but not more than 6 adults to be provided with foster care. The adult foster care family home licensee must be a member of the household and an occupant of the residence.

ANALYSIS:	Licensees James and Berniece Brown are currently residing in North Carolina and not residing at the adult foster care family home facility as required. The Browns failed to provide the Adult Foster Care Licensing Unit with required documents and their AFC small group home application was closed on 10/03/22.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED SIR #2022A0221001 dated 12/22/2021.

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, a provisional license is recommended.

Maria DeBacker

4/13/2023

Maria DeBacker
Licensing Consultant

Date

Approved By:

Mary Holton

4/13/2023

Mary E Holton
Area Manager

Date