



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 23, 2023

Kimberly Studer  
K And K Quality Care Inc  
351 Bay Mid Line Rd  
Midland, MI 48642

RE: License #: AM090071937  
Investigation #: 2023A0580032  
K and K Quality Care

Dear Ms. Studer:

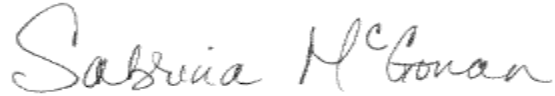
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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.

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 "Sabrina McGowan". The signature is written in black ink and is positioned below the word "Sincerely,".

Sabrina McGowan, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 835-1019

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM090071937
<b>Investigation #:</b>	2023A0580032
<b>Complaint Receipt Date:</b>	04/06/2023
<b>Investigation Initiation Date:</b>	04/10/2023
<b>Report Due Date:</b>	06/05/2023
<b>Licensee Name:</b>	K And K Quality Care Inc
<b>Licensee Address:</b>	351 Bay Mid Line Rd Midland, MI 48642
<b>Licensee Telephone #:</b>	(989) 835-9412
<b>Administrator:</b>	Kimberly Studer
<b>Licensee Designee:</b>	Kimberly Studer
<b>Name of Facility:</b>	K and K Quality Care
<b>Facility Address:</b>	351 Bay Mid Line Road Midland, MI 48642
<b>Facility Telephone #:</b>	(989) 835-9412
<b>Original Issuance Date:</b>	07/14/1996
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	10/06/2021
<b>Expiration Date:</b>	10/05/2023
<b>Capacity:</b>	12
<b>Program Type:</b>	AGED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Resident A has been refusing his medication. Licensee and other staff have been sneaking Resident A medicine in his liquids.	No
Additional Findings	Yes

**III. METHODOLOGY**

04/06/2023	Special Investigation Intake 2023A0580032
04/06/2023	APS Referral This complaint was denied by APS for investigation.
04/10/2023	Special Investigation Initiated - Telephone A call was made to Resident A's case manager, Ms. Heather Shawl.
04/12/2023	Inspection Completed On-site An onsite inspection was conducted. Interview with staff, Ms. Courtney McBride, and Alexis Studer. April 2023 med sheets obtained.
04/12/2023	Contact - Face to Face An interview was conducted with Resident A.
04/17/2023	Contact - Telephone call received Spoke with the licensee, Ms. Kim Studer.
04/20/2023	Contact - Document Received Copy of the AFC Assessment Plan for Resident A.
05/23/2023	Exit Conference An exit conference was held with the licensee designee, Ms. Studer.

## **ALLEGATION:**

Resident A has been refusing his medication. Licensee and other staff have been sneaking Resident A medicine in his liquids.

## **INVESTIGATION:**

On 04/06/2023, I received a complaint via BCAL Online complaints. This complaint was denied by APS for investigation.

On 04/10/2023, I spoke with Ms. Heather Shawl, case manager at Area Agency on Aging, Region 7, assigned to Resident A. She expressed concern that the licensee, Ms. Kim Studer has been liquifying Resident A's medication to get him to comply with taking his medication. She does not know which specific medication.

Ms. Shawl adds that she sympathizes with the licensee, as Resident A has been having some very disruptive behaviors. She adds that Resident A is his own guardian, however, his mental status has declined. She is now in the process of trying to figure out how/who needs to petition the court.

On 04/12/2023, I conducted an unannounced onsite inspection at K and K Quality Care. Contact was made with Ms. Courtney McBride and Ms. Alexis Studer, both identified as staff. Both staff deny any knowledge regarding the allegations.

On 04/12/2023, while onsite I obtained a copy of the April 2023 medication log for Resident A. The log indicates that all of Resident A's medication should be given by mouth.

On 04/12/2023, while onsite I visited with Resident A in his room. Resident A was observed while lying on his bed. Resident A was observed as being appropriately clothed. I also observed that Resident A's right foot appeared to have had a recent operation in which his toes were removed. When asked, Resident A stated that he takes his medicine every day with milk. He appeared to be receiving appropriate care.

Other residents in the facility were observed in lounge chairs, watching TV in the living room area. There were no concerns noted. They appeared to be receiving proper care.

On 04/17/2023, I spoke with the licensee, Ms. Kim Studer. She stated that Resident A was refusing to take his medication from January through March 2023. Once he began having medical issues with his feet, he began receiving antibiotics. He complained that the antibiotics were too big and agreed to allow her to crush them up put it in his milk. Ms. Studer stated that she never stopped crushing his medication afterwards.

On 04/20/2023 I received a copy of the AFC Assessment Plan for Resident A. It states that Resident A's medication will be given as prescribed by the doctor. Staff will assist

with the administration of the medication. This plan was signed by Resident A and the licensee on 08/25/2022.

<b>APPLICABLE RULE</b>	
<b>R 400.14304</b>	<b>Resident rights; licensee responsibilities.</b>
	<p><b>(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:</b></p> <p><b>(n) The right to request and receive assistance from the responsible agency in relocating to another living situation.</b></p>
<b>ANALYSIS:</b>	<p>It was alleged that Resident A has been refusing his medication. Licensee and other staff have been sneaking Resident A medicine in his liquids.</p> <p>Ms. Heather Shawl, case manager assigned to Resident A, expressed concern that the licensee, Ms. Kim Studer has been liquifying Resident A's medication to get him to comply with taking his medication.</p> <p>Staff, Ms. Courtney McBride, and Ms. Alexis Studer, both deny any knowledge regarding the allegations.</p> <p>Resident A stated that he takes his medicine every day with milk.</p> <p>Licensee, Ms. Kim Studer, stated that Resident A agreed to allow her to crush his antibiotic medication in his milk.</p> <p>The April 2023 medication log for Resident A states that Resident A's medication should be given by mouth.</p> <p>The AFC Assessment Plan for Resident A states that Resident A's medication will be given as prescribed by the doctor. Staff will assist with the administration of the medication. This plan was signed by Resident A and the licensee on 08/25/2022.</p> <p>Based on the interviews conducted with the case manager for Resident A, Ms. Heather Shawl, staff members, Ms. Courtney</p>

	McBride and Ms. Alexis Studer, licensee designee, Ms. Kim Studer, Resident A, and a review of Resident A's medication log and AFC assessment plan, there is not enough evidence to support the rule violation.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

On 04/17/2023, Ms. Studer reported that Resident A was hospitalized 03/28/2023-04/05/2023. No incident report was completed.

<b>APPLICABLE RULE</b>	
<b>R 400.14311</b>	<b>Investigation and reporting of incidents, accidents, illnesses, absences, and death.</b>
	<b>(1) A licensee shall make a reasonable attempt to contact the resident's designated representative and responsible agency by telephone and shall follow the attempt with a written report to the resident's designated representative, responsible agency, and the adult foster care licensing division within 48 hours of any of the following:</b> <b>(c) Incidents that involve any of the following:</b> <b>(i) Displays of serious hostility.</b> <b>(ii) Hospitalization.</b> <b>(iii) Attempts at self-inflicted harm or harm to others.</b> <b>(iv) Instances of destruction to property.</b>
<b>ANALYSIS:</b>	Licensee, Ms. Studer reported that Resident A was hospitalized from 03/28/2023-04/05/2023. No written incident report was submitted. Based on this information there is sufficient evidence to support the rule violation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 04/12/2023, while onsite I obtained a copy of the April 2023 medication log for Resident A. The log indicates that Resident A did not receive his medication 4/1-4/5 due to being in the hospital. The log reflects that he was given his medication as prescribed the evening of 04/06/2023 when he returned to the facility. The medication log indicated that on 04/12/2023, that Resident A had been given his 8pm medications

of Colace, 100mg, Catapres 0.1mg, Requip 0.5mg, Risperdal, 0.5mg, Remeron, 15mg, Lofibra 160mg, Zocor, 10mg, by staff K.S., identified as Ms. Kim Studer. It should be noted that my visit to the AFC occurred at 2:30pm in the afternoon.

On 04/17/2023, Ms. Studer admits that she was not working that evening and entered her initials on Resident A's medication log prior to his taking the medication.

<b>APPLICABLE RULE</b>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<p><b>(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:</b></p> <p><b>(b) Complete an individual medication log that contains all of the following information:</b></p> <ul style="list-style-type: none"> <li><b>(i) The medication.</b></li> <li><b>(ii) The dosage.</b></li> <li><b>(iii) Label instructions for use.</b></li> <li><b>(iv) Time to be administered.</b></li> <li><b>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</b></li> <li><b>(vi) A resident's refusal to accept prescribed medication or procedures.</b></li> </ul>
<b>ANALYSIS:</b>	<p>While onsite at 2:30pm, Resident A's April 2023 medication log reflected that he had been given his evening medication, consisting of Colace, 100mg, Catapres 0.1mg, Requip 0.5mg, Risperdal, 0.5mg, Remeron, 15mg, Lofibra 160mg, Zocor, 10mg, by staff K.S.</p> <p>Licensee, Ms. Kim Studer admits that she was not working that evening and entered her initials on Resident A's medication log prior to his taking the medication.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 04/17/2023, Ms. Studer reported that Resident A was refusing to take his medication from January through March 2023. She stated she did not contact the physician for instructions when Resident A refused his medication.



<b>APPLICABLE RULE</b>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<b>(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (f) Contact the appropriate health care professional if a medication error occurs or when a resident refuses prescribed medication or procedures and follow and record the instructions given.</b>
<b>ANALYSIS:</b>	Licensee, Ms. Kim Studer reported that Resident A was refusing to take his medication from January through March 2023, however, she reports that she did not contact the appropriate health care professional when this occurred.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 05/23/2023, an exit conference was held with the licensee designee, Ms. Kim Studer. Ms. Studer was informed of the findings of this investigation.

#### IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no changes to the status of the license are recommended.

 May 23, 2023

\_\_\_\_\_  
Sabrina McGowan Date  
Licensing Consultant

Approved By:

 May 23, 2023

\_\_\_\_\_  
Mary E. Holton Date  
Area Manager