



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 28, 2023

Patti Holland
801 W Geneva Dr.
Dewitt, MI 48820

RE: License #: AS330341802
Investigation #: 2023A1033045
Lansing Adult Foster Care

Dear Patti Holland:

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) 284-9730.

Sincerely,

A handwritten signature in black ink that reads "Jana Lipps". The signature is written in a cursive style with a large initial 'J' and 'L'.

Jana Lipps, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
 BUREAU OF COMMUNITY AND HEALTH SYSTEMS
 SPECIAL INVESTIGATION REPORT
 THIS REPORT CONTAINS QUOTED PROFANITY**

I. IDENTIFYING INFORMATION

License #:	AS330341802
Investigation #:	2023A1033045
Complaint Receipt Date:	05/11/2023
Investigation Initiation Date:	05/11/2023
Report Due Date:	07/10/2023
Licensee Name:	Patti Holland
Licensee Address:	801 W Geneva Dr. Dewitt, MI 48820
Licensee Telephone #:	(517) 669-8457
Administrator:	Patti Holland
Licensee Designee:	N/A
Name of Facility:	Lansing Adult Foster Care
Facility Address:	3600 Simken Drive Lansing, MI 48910
Facility Telephone #:	(517) 203-5249
Original Issuance Date:	01/10/2014
License Status:	REGULAR
Effective Date:	07/08/2022
Expiration Date:	07/07/2024
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A reported that direct care staff/home manager, Chastidy Johnston has transported him under the influence of “drugs” like “coke” to his mother’s home in northern Michigan.	No
Additional Findings	Yes

III. METHODOLOGY

05/11/2023	Special Investigation Intake 2023A1033045
05/11/2023	Special Investigation Initiated – Telephone call made Attempt to interview Complainant. Voicemail message left.
05/15/2023	APS Referral- Currently an open APS case, Adult Services Worker, Gene Mellen, is assigned.
05/15/2023	Contact - Telephone call received- Interview with Tri County Office on Aging, Nurse Case Manager, Antigoni Tzumakas, via telephone.
05/15/2023	Contact - Telephone call made- Attempt to interview Guardian A1, voicemail message left.
05/15/2023	Contact - Telephone call received- Interview with Guardian A1, via telephone.
05/16/2023	Inspection Completed On-site- Interviews with Resident A, Resident B, direct care staff, Crystal Martinez. Review of resident records for Resident A & B.
05/16/2023	Contact - Face to Face- Interview with direct care staff/home manager, Chastidy Johnston.
05/16/2023	Contact - Face to Face- Interview with licensee designee, Patti Holland.
05/22/2023	Contact - Document Received- Requested funds documents received from direct care staff/home manager, Chastidy Johnston, via email.
06/15/2023	Inspection Completed-BCAL Sub. Compliance

06/15/2023	Exit Conference- Conducted via email, due to failed telephone attempt.

ALLEGATION:

Resident A reported that direct care staff/home manager, Chastidy Johnston has transported him under the influence of “drugs” like “coke” to his mother’s home in northern Michigan.

INVESTIGATION:

On 5/11/23 I received an online complaint regarding the Lansing Adult Foster Care (the facility). The complaint alleged that Resident A made a verbal complaint that direct care staff/Home Manager, Chastidy Johnston, had previously transported him in her vehicle, under the influence of illegal drugs. On 5/15/23 I interviewed the Complainant who reported Resident A had made these statements to his Tri County Office on Aging Case Manager, Antigoni Tzumakas, and that Ms. Tzumakas has further information regarding this allegation.

On 5/15/23 I interviewed Ms. Tzumakas, via telephone. She reported she met with Resident A and Guardian A1, in person for an annual assessment meeting on 5/9/23. Ms. Tzumakas reported Resident A has expressive aphasia which can make it difficult for him to express his thoughts verbally. She further reported Resident A has a traumatic brain injury due to a medical event, which is why he resides at the facility. Ms. Tzumakas reported that during the meeting with Resident A, on 5/9/23, Resident A made statements such as “Chas” “coke” “drugs” “every night”, when discussing Ms. Johnston. She reported Resident A’s mother lives in the Upper Peninsula and Ms. Johnston has driven Resident A to his mother for visits. Ms. Tzumakas reported she took her concerns regarding Resident A’s statements to Licensee, Patti Holland. She reported Ms. Holland noted Ms. Johnston has had accusations of a similar nature from others, but they have not been able to prove that Ms. Johnston has been using drugs. Ms. Tzumakas reported she is aware of a previous claim that Ms. Johnston was using illegal drugs and she was given a random drug test and passed this test.

On 5/15/23 I interviewed Guardian A1, via telephone. Guardian A1 reported she had been present for the meeting with Resident A and Ms. Tzumakas on 5/9/23. Guardian A1 reported Resident A has limited speech and can usually just speak one or two words at a time. She reported that during this meeting he indicated that he felt Ms. Johnston was on drugs and he did not want her providing his transportation any longer. Guardian A1 reported that the last time Ms. Johnston provided transportation for Resident A was over the winter months when she took him to see his mother. Guardian A1 reported that public transportation is usually used for Resident A’s local

appointments. Guardian A1 reported that Resident A has resided at the facility since 2018 and this is the first time he has made any statements of concern about Ms. Johnston possibly using drugs while working with the residents. Guardian A1 reported that she has met Ms. Johnston in person, and she has held prior concerns about Ms. Johnston's behavior as "at times she seems a little out of it." Guardian A1 could not verify that this was due to drug use on the part of Ms. Johnston.

On 5/16/23 I completed an on-site investigation at the facility and interviewed Resident A. Resident A reported that "everything is good" at the facility. He reported he has no problems or concerns. Resident A reported that Ms. Johnston has not transported him via vehicle since "last year." When asked about possible drug use among the direct care staff, Resident A reported, "outside" "every fucking day." When asked if he has physically witnessed Ms. Johnston or any other direct care staff using drugs at the facility, he answered that he has not witnessed these reported occurrences. Resident A stated that he "feels safe" at the facility.

During on-site investigation on 5/16/23 I interviewed Resident B. Resident B reported that he has never suspected any of the direct care staff to be using drugs while at the facility. Resident B also reported that he has never witnessed drug paraphernalia at the facility and has not directly observed any of the direct care staff using drugs. Resident B reported feeling safe at the facility.

During on-site investigation on 5/16/23 I interviewed direct care staff, Crystal Martinez. Ms. Martinez reported that she has worked at the facility for about six months, but she previously worked for the facility as well. Ms. Martinez reported that she is not aware of any direct care staff who would be using drugs while working with the residents. Ms. Martinez had no stated concerns about Ms. Johnston's behaviors at this time.

On 5/16/23 I interviewed Ms. Holland, in person, at an off-site location. Ms. Holland reported that she has received previous complaints about Ms. Johnston potentially being under the influence of drugs, but she has required drug testing and these tests have resulted in a negative test for drug use. She reported that the most recent drug test was a random testing, and it was about one month ago. She reported she had the results available for review. Ms. Holland further reported that she has not received complaints from any of the other residents that they feel unsafe with Ms. Johnston providing their transportation and has not received any complaints from residents that Ms. Johnston has appeared to be under the influence of drugs.

On 5/16/23 I interviewed Ms. Johnston, in person, at an off-site location. Ms. Johnston reported that she is not currently using drugs and has never used drugs while caring for the residents. She also reported that she recently completed a drug test and passed this test with a negative result for illegal drugs.

On 5/16/23 I reviewed the document titled, *Basic Drug Testing Custody and Control Form*, from Quest Diagnostics, for Ms. Johnston, dated 4/24/23. This document

recorded that this was a *random* drug testing. I also reviewed a document for Ms. Johnston from the Lansing Urgent Care, dated 4/24/23, titled, *Same-Day Rapid Drug Report Form*, which indicated a “Negative” result for Ms. Johnston.

On 5/16/23 I reviewed the employee file for Ms. Johnston. Ms. Johnston had all required trainings in her file. There was also a *Michigan Workforce Background Check* eligibility letter stating Ms. Johnston “was eligible” for employment in an adult foster care facility.

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	(2) Direct care staff shall possess all of the following qualifications: (a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.
ANALYSIS:	Based upon interviews with Ms. Tzumakas, Resident A, Resident B, Guardian A1, Ms. Martinez, Ms. Johnston, and Ms. Holland, as well as review of Ms. Johnston’s employee file and recent random drug testing result form, it can be determined that there is not sufficient evidence to conclude that Ms. Johnston is not suitable to meet the physical, emotional, intellectual, and social needs of the residents. There are no eyewitness reports of Ms. Johnston using drugs and no concrete evidence to suggest that she is under the influence of illegal drugs.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	(2) Direct care staff shall possess all of the following qualifications: (b) Be capable of appropriately handling emergency situations.

ANALYSIS:	Based upon interviews with Ms. Tzumakas, Resident A, Resident B, Guardian A1, Ms. Martinez, Ms. Johnston, and Ms. Holland, as well as review of Ms. Johnston's employee file and recent random drug testing result form, it can be determined that there is not sufficient evidence to conclude that Ms. Johnston is not capable of handling emergency situations as they may arise at the facility. There are no eyewitness reports of Ms. Johnston using drugs and no concrete evidence to suggest that she is under the influence of illegal drugs.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	Based upon interviews with Ms. Tzumakas, Resident A, Resident B, Guardian A1, Ms. Martinez, Ms. Johnston, and Ms. Holland, as well as review of Ms. Johnston's employee file and recent random drug testing result form, it can be determined that there is not sufficient evidence to conclude that Ms. Johnston is not providing for resident safety and protection. There are no eyewitness reports of Ms. Johnston using drugs and no concrete evidence to suggest that she is under the influence of illegal drugs.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

I completed an on-site investigation on 5/16/23 at the facility. While investigating the above allegation, I interviewed Resident B who also reported that one to two months ago he gave Ms. Johnston \$700-\$800 of his spending money to hold on to. He reported that he had excess money in his bank account, and he needed to make a withdrawal. He reported that he asked Ms. Johnston to hold this cash for him and he reported that some of the money is missing as he recently asked Ms. Johnston about the funds and was told that he only had about \$400 remaining.

On 5/16/23, during on-site inspection, I reviewed Resident B's resident record. I reviewed the document, *AFC-Resident Care Agreement*, for Resident B, dated

1/12/22. On page 1 of this document is selected, “I do not agree to entrust the following to the licensee for safekeeping, if this option is available” and the option for “funds” and “valuables” are marked.

On 5/16/23 I emailed Ms. Holland and requested she provide the resident funds documentation for Resident B.

I also reviewed the document in Resident B’s resident record titled, *Resident Funds Part II*. This document was dated for the year 2019. There was not another current *Resident Funds Part II* form available in Resident B’s resident record during this investigation. The only notations noted on this form were for room and board payments to the licensee. No resident funds/cash transactions were noted in Resident B’s resident record.

On 5/22/23 I received an email correspondence from Ms. Johnston with the subject line, “Funds [Resident B]”. The email stated, “Hi Jana, We do not do monthly funds for [Resident B]. Chastidy” Attached to the email were handwritten notes. The notes state as follows:

- “3/2/23 March [Resident B] had left \$700.00 Today I gave him \$40.00 for his wallet and \$300 into bank account. \$700 – 340/\$360 he has left.” This handwritten note was signed by Ms. Johnston and Resident B.
- “4/14/23 April 14 [Resident B] received \$120 from Chastidy Johnston today. \$360-120/\$240 left.” This handwritten note was signed by Ms. Johnston and Resident B.
- “5/18/23 In February I [Resident B] had to take out a lump sum of \$ from my account so that I didn’t have I believe it to be over \$2000.00. I gave it to Chastidy to put up for me and give to me when I ask for it. On 3/2/23 she gave me \$340.00. On 4/14/23 she gave me \$120. She still has \$240.00 put up for me. She gives it to me when I ask for it. I do not get monthly spending from the house or thru the house.” This handwritten note is signed by Chastidy Johnston and Resident B.

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

ANALYSIS:	Based upon interviews with Resident B and review of the funds documentation Ms. Johnston provided and Resident B's <i>Resident Care Agreement</i> form, it can be determined that the licensee, Ms. Holland, and Ms. Johnston did not update the <i>Resident Care Agreement</i> to reflect the new arrangement requested by Resident B, in February 2023, for the licensee to manage his cash funds. The <i>Resident Care Agreement</i> form that was available for review reflected that the licensee would not be managing Resident B's cash funds. An updated <i>Resident Care Agreement</i> form is required at this time.
CONCLUSION:	VIOLATION ESTABLISHED

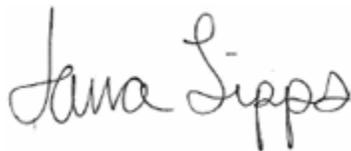
APPLICABLE RULE	
R 400.14315	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.
ANALYSIS:	Based upon the review of documentation in Resident B's resident record as well as review of the documentation submitted, via email, by Ms. Johnston, it can be determined that Ms. Holland and Ms. Johnston are not completing the required <i>Resident Funds Part II</i> form to document resident fund transactions or resident room and board expenses. The most current <i>Resident Funds Part II</i> form available in Resident B's record was dated for the year 2019.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14315	Handling of resident funds and valuables.
	(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.

ANALYSIS:	Based upon interviews with Resident B and review of documentation provided, via email, by Ms. Johnston, it can be determined that Resident B requested that Ms. Johnston manage \$700 in cash in February 2023. Ms. Johnston made handwritten notations, with her signature, that she has distributed cash from this lump sum amount to Resident B, at his request. The most current notation indicated that Ms. Johnston is still managing \$240.00 cash for Resident B, which exceeds the allowed amount of \$200.00.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon the receipt of an approved corrective action plan, no change to the status of the license recommended at this time.



06/28/23

Jana Lipps
Licensing Consultant

Date

Approved By:



06/30/2023

Dawn N. Timm
Area Manager

Date