



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 17, 2023

Stephanie Riley
Valley Residential Serv Inc.
P O Box 186
St Charles, MI 486550186

RE: License #: AS730016089
Investigation #: 2023A0576058
Navaho Trail Home

Dear Ms. Riley:

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.
- 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 "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 #:	AS730016089
Investigation #:	2023A0576058
Complaint Receipt Date:	07/03/2023
Investigation Initiation Date:	07/03/2023
Report Due Date:	09/01/2023
Licensee Name:	Valley Residential Serv Inc.
Licensee Address:	300 S Saginaw, St. Charles, MI 48655
Licensee Telephone #:	(231) 580-5204
Administrator:	Diane Carrillo
Licensee Designee:	Stephanie Riley
Name of Facility:	Navaho Trail Home
Facility Address:	3161 Navaho Trail, Hemlock, MI 48626
Facility Telephone #:	(989) 642-3603
Original Issuance Date:	08/01/1994
License Status:	REGULAR
Effective Date:	02/22/2023
Expiration Date:	02/21/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
During an audit, it was discovered that Resident A was missing \$50 from his savings account.	Yes

III. METHODOLOGY

07/03/2023	Special Investigation Intake 2023A0576058
07/03/2023	APS Referral
07/03/2023	Special Investigation Initiated - Telephone Interviewed Home Manager, Diane Carrillo
08/07/2023	Inspection Completed On-site Interviewed Home Manager, Diane Carrillo and viewed Resident A
08/14/2023	Contact - Telephone call made Left message for Judy Saucedo, Saginaw County Office of Recipient Rights (ORR)
08/14/2023	Contact - Telephone call received Interviewed Judy Saucedo
08/14/2023	Contact - Document Received Reviewed Incident Report (IR)
08/14/2023	Exit Conference Exit Conference conducted with Licensee Designee, Stephanie Riley

ALLEGATION:

During an audit, it was discovered that Resident A was missing \$50 from his savings account.

INVESTIGATION:

On July 3, 2023, I interviewed Home Manager, Diane Carrillo who reported there was an audit at the home, and it was discovered that Resident A had \$50.00 unaccounted

for. Manager Carrillo reported that she took the money out of the bank and did not record where the money was spent. She did remember paying a pharmacy bill however there is no documentation indicating where the money was spent.

On August 7, 2023, I completed an unannounced on-site inspection at Navaho Trail Home and viewed Resident A. Resident A is nonverbal and was walking around his home. Resident A appeared neat and clean and did not appear to be under any duress.

On August 7, 2023, I interviewed Diane Carrillo who reported she does not know what happened to Resident A's \$50.00. There was a recent audit, and it was documented on Resident A's "savings" funds II sheet that there was a \$50.00 withdrawal from Resident A's savings account on October 31, 2022. This money was not documented on Resident A's funds sheet for "cash" in the home, which is normally done. Manager Carrillo went shopping however could remember what happened to \$50.00. Manager Carrillo recalls paying for a pharmacy bill however there is no receipt. Once the discrepancy was discovered on June 28, 2023, the \$50.00 was replaced by the licensee and placed back in Resident A's savings account.

While at the home, Resident A's Resident Funds Part I and II sheets were viewed. It was documented that on October 31, 2022, there was \$50.00 withdrawal from Resident A's savings account that was not accounted for confirming the allegations to be true.

On August 14, 2023, I left a message for Judy Saucedo, Saginaw County Office of Recipient Rights (ORR) inquiring if she is investigating this matter and, if so, the status of her investigation. Officer Saucedo returned my call and was interviewed. Officer Saucedo confirmed she is investigating this matter and will likely substantiate her investigation involving Resident A.

On August 14, 2023, I reviewed an AFC Licensing Division Incident / Accident Report (IR) dated for June 29, 2023, and authored by Erinn Noland, CCO. The IR documented that on June 28, 2023, a review of resident funds revealed that on October 31, 2023, \$50.00 was withdrawn from Resident A's savings account but was not transferred to the resident's cash on hand in the home. The staff were unable to locate the \$50.00. Corrective measures include making a complaint to AFC Licensing, Office of Recipient Rights, Adult Protective Services (APS), and the police. Licensee, Valley Residential Services was notified to reimburse Resident A the money.

APPLICABLE RULE	
R 400.14315	Handling of resident funds and valuables.
	(10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.

ANALYSIS:	<p>It was alleged that \$50.00 was missing from Resident A's savings account. Upon completion of investigative interviews and a review of documentation, there is a preponderance of evidence to conclude a rule violation.</p> <p>A routine audit of resident funds was conducted and revealed \$50.00 was withdrawn from Resident A's savings account by the Home Manager, Diane Carrillo. It was not documented that the money was brought into the home nor were there any receipts to account for how or where the money was spent. There is a preponderance to evidence to indicate a rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On August 14, 2023, I conducted an exit conference with Licensee Designee, Stephanie Riley. I advised Licensee Designee Riley I would be requesting a corrective action plan for the cited rule violation.

IV. RECOMMENDATION

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



8/17/2023

Christina Garza
Licensing Consultant

Date

Approved By:



8/17/2023

Mary E. Holton
Area Manager

Date