



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 30, 2023

Bianca Wilson
Umbrellex Behavioral Health Services, LLC
Suite 255
13854 Lakeside Circle
Sterling Heights, MI 48313

RE: License #: AS780404958
Investigation #: 2023A0584033
Umbrellex 2

Dear Ms. Wilson:

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.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available and you need to speak to someone immediately, please contact the local office at (517) 284-9727.

Sincerely,

A handwritten signature in cursive script that reads "Candace Coburn". The signature is written in a dark ink on a light-colored background.

Candace Coburn, 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 PROFANITY

I. IDENTIFYING INFORMATION

License #:	AS780404958
Investigation #:	2023A0584033
Complaint Receipt Date:	05/01/2023
Investigation Initiation Date:	05/02/2023
Report Due Date:	06/30/2023
Licensee Name:	Umbrellex Behavioral Health Services, LLC
Licensee Address:	Suite 255, 13854 Lakeside Circle Sterling Heights, MI 48313
Licensee Telephone #:	(586) 765-4342
Administrator:	Bianca Wilson
Licensee Designee:	Bianca Wilson, Designee
Name of Facility:	Umbrellex 2
Facility Address:	805 E King St Owosso, MI 48867
Facility Telephone #:	(586) 765-4342
Original Issuance Date:	08/21/2020
License Status:	REGULAR
Effective Date:	02/21/2023
Expiration Date:	02/20/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
On 4/29/2023, staff member Deante Jahnsen threatened and verbally abused Resident A.	Yes
Staff are not trained correctly to handle behavioral issues.	No
Manager(s) are smoking marijuana in the driveway.	No

III. METHODOLOGY

05/01/2023	Special Investigation Intake 2023A0584033.
05/02/2023	Special Investigation Initiated – Email to complainant.
06/08/2023	Contact - Face to Face interview with Umbrellex Staff manager, Anastasia Birge and Bailey Brant.
06/15/2023	Contact - Telephone interview with Jacob Hect, direct care staff.
06/16/2023	Contact – Face to face interview with Resident A and B.
06/26/2023	Exit Conference via email with Bianca Wilson, licensee designee.
06/28/2023	Contact – Email to Katrina Love, HR manager for Umbrellex Homes and Joi Mitchell, Training manager.
06/29/2023	Contact – Telephone interview with Shiawassee Health and Wellness Recipient Rights director Andrea Andrykovich.

ALLEGATIONS:

- **On 4/29/2023, staff member Deante Jahnsen threatened and verbally Resident A.**
- **Staff are not trained correctly to handle behavioral issues.**
- **Manager(s) are smoking marijuana in the driveway.**

INVESTIGATION:

On 4/20/2023 and 05/05/2023, the Bureau of Community and Health Systems (BCHS) received the above allegations via the BCHS online complaint system.

On 6/8/2023, I conducted face-to-face interviews with Umbrellex homes staff manager Anastasia Birge and Umbrellex 2 house manager Bailey Brant. Ms. Birge stated she reported the allegation that on 4/29/2023 direct care staff member Deante Jahnsen threatened and verbally abused Resident A to the Shiawassee Health and Wellness Recipient Rights Office after she was personally involved with the incident. Ms. Birge stated that Mr. Jahnsen denied the allegations. According to Ms. Birge, direct care staff Jacob Hect witnessed Mr. Jahnsen tell Resident A "I am a man and I will drop you" and "shut the fuck up". Ms. Birge confirmed that immediately after the altercation, Mr. Jahnsen was relieved of his shift duties, and his employment was terminated. Ms. Birge stated she was unaware of the allegation home managers smoke marijuana in the driveway of the facility. Ms. Birge also stated all staff members hired to work as direct care staff are trained immediately upon hire on appropriate behavior interventions via the required Shiawassee Health and Wellness Recipient Rights' training.

Ms. Brant denied the allegation she smokes marijuana at the facility.

On 6/15/2023, I conducted a telephone interview with Mr. Hect, who confirmed that on 4/29/2023, he witnessed Mr. Jahnsen tell Resident A "I will drop you" and "shut the fuck up". Mr. Hect stated he had no knowledge of, nor had he witnessed, any employees, including managers, smoke marijuana at the facility. Mr. Hect also denied the allegation he was not properly training on appropriate behavior interventions.

On 6/16/2023, I conducted face to face interviews with Residents A and B during an unannounced investigation at the facility. Resident A confirmed the allegation that on 4/29/2023, Mr. Jahnsen threatened him and verbally abused him by telling him "I will drop you" and "shut the fuck up". Resident A stated that during the altercation, Ms. Birge arrived at the facility and stopped the argument. Resident A confirmed that Mr. Jahnsen left for the rest of the day and never returned to the facility again. Resident A stated he currently feels safe at the facility. Resident A admitted he is easily angered. According to Resident A, Mr. Hect appropriately handled the altercation between him and Mr. Jahnsen by helping him to calm down and to not become combative. Resident A also stated he has never witnessed staff smoking marijuana at the facility.

Resident B stated he did not witness the incident between Resident A and Mr. Jahnsen on 04/29/2023, because he was sitting in his bedroom. Resident B also reported he had never witnessed staff smoke marijuana at the facility. Resident B stated he believed staff handle behavioral issues at the facility in an adequate manner.

During my unannounced investigation, I did not witness any staff members smoking marijuana, nor did I observe any evidence of individuals smoking marijuana at the facility.

On 6/28/2023, via email, Umbrellex training manager Joi Mitchell provided written confirmation that current facility employees completed training on non-aversive techniques for the prevention and treatment of challenging behaviors of residents through the Shiawassee Health and Wellness Recipient Rights' Office.

I received a telephone call from Katrina Love, Human Resources Administrator for Umbrellex Homes. Ms. Love stated that in early April, she had a conversation with an employee who was being terminated for attendance issues. At that time, the employee mentioned that staff were smoking marijuana at the facility. Ms. Love stated she asked the employee if she had witnessed this activity and if she could provide the names the employees who were smoking marijuana. According to Ms. Love, the employee said she did not witness the allegation personally and had only heard of it secondhand. Subsequently, the employee had no names to provide to Ms. Love. Ms. Love stated she asked the employee why she didn't report the allegation immediately to her direct supervisor, as well as to the Recipient Rights Office, and the employee was unable to answer this question.

On 6/29/2023, I interviewed Shiawassee Health and Wellness Recipient Rights Director Andrea Andrykovich. Ms. Andrykovich confirmed their agency trains staff on behavior intervention techniques and the licensee is prompt with training all new employees. Ms. Andrykovich stated she consulted with Shiawassee Health and Wellness Behavior Management staff members, who reported no concerns regarding facility staff members' ability to handle the behavioral issues of the consumers placed in the facility.

According to Special Investigation Report (SIR) #2021A0584013, dated 2/17/2021, the facility was in violation of Adult Foster Care Administrative Licensing rule R 400.14308 (2)(b)(f)(iv) when it was established that staff member Tyler Strachan verbally abused a resident. The facility's approved corrective action plan (CAP), dated 3/3/2021, indicated the involved employee, Tyler Strachan, was terminated from Umbrellex Behavioral Health Services on 1/13/21 for the use of threatening language toward a resident. The CAP documents: *"Umbrellex will maintain compliance of rule R 400.14308 by continuing to dispatch the Umbrellex Crisis Team to the scene of an incident to intervene by investigation, regulation, prevention, response and reporting out in an expedited manner. Each violation will be responded to immediately per the crisis team dispatch protocol and the staff person will be removed from shift immediately while the investigation is occurring. As a preventive measure, Umbrellex provides an Employee Assistance Program (EAP) to assist our staff with emotional and behavioral regulation management. Umbrellex continues to provide cultural and sensitivity training, CPI non-violent crisis intervention training, a manager-in-training program by our compliance director, weekly meetings to address workplace climate and culture and an open-door access to our human resources department to be able to address workplace matters from an impartial perspective"*.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following: (f) Subject a resident to any of the following: (ii) Verbal abuse. (iv) Threats.
ANALYSIS:	Based upon my investigation, which consisted of interviews with multiple facility staff members and Residents A and B, it has been established that on 4/29/2023, direct care staff Deonte Johnson threatened and verbally abused Resident A.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED [SEE SIR #2021A0584013 DATED 2/17/2021 AND CAP DATED 3/3 2021].

APPLICABLE RULE	
R 330.1806	Staffing levels and qualifications.
	(2) All staff who work independently and staff who function as lead workers with clients shall have successfully completed a course of training which imparts basic concepts required in providing specialized dependent care and which measures staff comprehension and competencies to deliver each client's individual plan of service as written. Basic training shall address all the following areas: (h) Non-aversive techniques for the prevention and treatment of challenging behavior of clients.
ANALYSIS:	Based upon my investigation, which consisted of interviews with multiple facility staff members, Residents A and B, and Shiawassee Health and Wellness Recipient Rights Director Andrea Andrykovich, there is no evidence to substantiate the allegation that staff are not trained correctly to handle behavioral issues. The licensee provided the department adequate verification that current facility staff members have been trained on non-aversive techniques for the prevention and treatment of challenging behaviors of residents.
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: (a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.
ANALYSIS:	Based upon my investigation, which consisted of interviews with multiple facility staff members, and Residents A and B, as well as an inspection of the facility, there is no evidence that any staff members, including managers, are smoking marijuana at this facility.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 6/26/2023, an exit conference was conducted via email with licensee designee Bianca Wilson notifying her of the findings of the investigation.

IV. RECOMMENDATION

After receiving an acceptable corrective action plan, I recommend no change in the status of this license.



6/29/2023

Candace Coburn
Licensing Consultant

Date

Approved By:



06/30/2023

Michele Streeter
Section Manager

Date