



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 24, 2023

Laketa Brodnex
D.E.B. AFC Inc.
P.O Box 136
Bridgeport, MI 48722

RE: License #: AS730383437
Investigation #: 2023A0576056
D.E.B. AFC Inc. #5

Dear Laketa Brodnex:

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 #:	AS730383437
Investigation #:	2023A0576056
Complaint Receipt Date:	06/26/2023
Investigation Initiation Date:	07/05/2023
Report Due Date:	08/25/2023
Licensee Name:	D.E.B. AFC Inc.
Licensee Address:	P.O Box 136, Bridgeport, MI 48722
Licensee Telephone #:	(989) 714-0793
Administrator:	Laketa Brodnex
Licensee Designee:	Laketa Brodnex
Name of Facility:	D.E.B. AFC Inc. #5
Facility Address:	821 S. Fayette Street, Saginaw, MI 48602
Facility Telephone #:	(989) 475-4034
Original Issuance Date:	10/27/2017
License Status:	REGULAR
Effective Date:	04/27/2022
Expiration Date:	04/26/2024
Capacity:	5
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL, AGED

II. ALLEGATION(S)

	Violation Established?
Resident A is mistreated by Staff, Laketa Brodnex. She has threatened to kick him out of the home.	No
Resident A only receives snacks for meals, is forced to cook his own meals, and is taken to the soup kitchen for meals.	No
Additional Findings	Yes

III. METHODOLOGY

06/26/2023	Special Investigation Intake 2023A0576056
06/26/2023	APS Referral
07/05/2023	Special Investigation Initiated – Letter Sent email to Jessire Ramos, Saginaw County Adult Protective Services (APS)
07/06/2023	Contact - Document Received Received email from Jessire Ramos
08/03/2023	Inspection Completed On-site Interviewed Staff, E'shawn Langston, and Resident B
08/15/2023	Inspection Completed On-site Interviewed Staff, Laketa Brodnex, Resident C, and Resident D
08/23/2023	Contact - Telephone call made Left message for Resident A to return call
08/24/2023	Contact - Telephone call made Left message for Resident A to return call
08/24/2023	Exit Conference Exit Conference conducted with Licensee Designee, Laketa Brodnex

ALLEGATION:

Resident A is mistreated by Staff, Laketa Brodnex. She has threatened to kick him out of the home.

INVESTIGATION:

On July 5, 2023, I sent an email to Jessire Ramos, Saginaw County Adult Protective Services (APS) Investigator regarding any updates she can provide with respect to her investigation involving Resident A. On July 6, 2023, Investigator Ramos advised she did not substantiate her investigation for abuse or neglect. Resident A was abusing substances and required mental health treatment at a psychiatric hospital prior to him moving to D.E.B. AFC #5. When Resident A moved into D.E.B. AFC #5 it was discovered that he required more specialized care resulting in an increase in his rental obligation, which Resident A could not afford. Resident A is currently living in Bay City and contact information was provided. On August 24, 2023, Investigator Ramos confirmed APS paid the AFC home \$1000 toward Resident As rental obligation.

On August 3, 2023, I conducted an unannounced on-site inspection at D.E.B. AFC #5 and interviewed Staff, E'shawn Langston, and Resident B. Staff Langston denied any knowledge of the allegations and reported Resident A no longer lives at the home. Staff Langston is not aware of any concerns regarding Staff, Laketa Brodnex's treatment of the residents.

On August 3, 2023, I interviewed Resident B who reported he likes his home, and he gets along well with Staff, Laketa Brodnex. According to Resident B, Staff Brodnex is nice and has never threatened him. Resident B denied any concerns regarding his home.

On August 15, 2023, I completed an unannounced on-site inspection at D.E.B. AFC #5 and interviewed Staff, Laketa Brodnex regarding the allegations. Staff Brodnex reported Resident A does not have a guardian or case manager. Resident A lived at the facility for about 1 month and he did not want to pay his rental obligation, so he moved back to his apartment in Bay City. She was told Resident A was high functioning however when he moved in, he was incontinent and urinating everywhere inside the home. Resident A was supposed to move into a shared room and that changed to a private room, all which increased his rental obligation. Staff Brodnex reported Resident A's rental obligation was supposed to be \$1000 however that was increased to \$1800 due to the personal care Resident A required upon him moving into the home. Resident A paid \$800 for rent and APS paid the remaining \$1000 to cover the rental obligation for one month. Staff Brodnex never threatened Resident A however she explained to him that if he did not pay his rent he would have to move. Resident A did not want to pay his rent and would go buy marijuana at a nearby dispensary.

On August 15, 2023, I interviewed Resident C and Resident D. Both residents reported to liking their home and denied being mistreated by staff. The residents denied any concerns with Staff, Laketa Brodnex and reported she is nice.

On August 23, 2023, and August 24, 2023, I left a message for Resident A to return my call.

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:	<p>It was alleged that Resident A is mistreated by staff, Laketa Brodnex and she threatened to kick him out of the home. Upon completion of investigative interviews, there is not a preponderance of evidence to conclude a rule violation.</p> <p>Staff, Laketa Brodnex was interviewed and denied mistreating or threatening Resident A. Staff Brodnex reported that prior to Resident A moving into the facility she was told he was high functioning. Once Resident A moved into the home, she realized he required more care than initially thought. As a result, Resident A's rental obligation increased. Resident A did not want to pay his rent and Staff Brodnex advised Resident A if he did not pay his rent he would have to move.</p> <p>Resident A was unable to be interviewed as he has since moved from the facility and phone calls to resident A have been unsuccessful. Resident B, Resident C, and Resident D were interviewed and denied any concerns regarding Staff Brodnex or their home.</p> <p>There is not a preponderance of evidence to conclude Resident A was mistreated or threatened by Staff, Laketa Brodnex as alleged.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A only receives snacks for meals, is forced to cook his own meals, and is taken to the soup kitchen for meals.

INVESTIGATION:

On August 3, 2023, conducted an unannounced on-site inspection at D.E.B. AFC #5 and interviewed Staff E'shawn Langston. Staff Langston reported staff cook meals for the residents and the residents receive plenty to eat.

On August 3, 2023, I interviewed Resident B who reported staff cook meals for the residents and no residents cook meals. Resident B does not cook, and he gets enough food to eat at his home.

On August 15, 2023, I conducted an unannounced on-site inspection at D.E.B. AFC #5 and interviewed Staff, Laketa Brodnex, Resident C, and Resident D. Staff Brodnex reported Resident A never cooked at the facility when he lived there. Staff cook full meals for the residents 3 times daily and they also get snacks. Staff Brodnex reported the residents do not go to the soup kitchen for meals. Sometimes residents attend church as an outing. The church serves meals and residents also receive spiritual guidance.

On August 15, 2023, I viewed menus posted on the refrigerator. There was adequate food in the refrigerator, freezer, cabinets, and pantry including canned goods and boxed food items.

On August 15, 2023, I interviewed Resident C who reported he has lived at his home for 1 year and he likes his home. Regarding the allegations, staff cook meals for the residents and the food is good. Resident C gets enough to eat, and he is never hungry. Resident C also receives snacks when he wants. Resident C denied any concerns regarding his home.

On August 15, 2023, I interviewed Resident D who reported he has lived at his home "quite a while" and he likes his home. Resident D reported he eats at his home and staff cook for the residents. Staff cook good food and Resident D gets enough to eat. Resident D likes to eat, and he also gets snacks twice per day. Resident D denied any concerns regarding his home.

On August 23, 2023, and August 24, 2023, I left a message for Resident A to return my call.

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.

ANALYSIS:	It was alleged that the facility is not providing Resident A adequate meals. Upon conclusion of investigative interviews, there is not a preponderance of evidence to conclude a rule violation. Two staff and three residents were interviewed and denied they are responsible for cooking or providing their own meals. Residents report staff cook all meals, and they are provided adequate meals including snacks.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On August 15, 2023, I conducted an unannounced on-site inspection at D.E.B. AFC #5 and requested to view the resident register. The resident register was not updated as Resident A was not documented that he lived at the home.

APPLICABLE RULE	
R 400.14210	Resident register.
	A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident: <ul style="list-style-type: none"> (a) Date of admission. (b) Date of discharge. (c) Place and address to which the resident moved, if known.
ANALYSIS:	On August 15, 2023, I conducted an unannounced on-site inspection at D.E.B. AFC #5 and requested to view the resident register. The resident register was not updated as Resident A was not documented that he lived at the home.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On August 15, 2023, I conducted an unannounced on-site inspection at D.E.B. AFC #5 and requested to view Resident A's funds sheets. Resident A's funds sheets were not available for review.

APPLICABLE RULE	
R 400.14315	Handling of resident funds and valuables.
	(3) A licensee shall have a resident's funds and valuables transaction for 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:	On August 15, 2023, I conducted an unannounced on-site inspection at D.E.B. AFC #5 and requested to view Resident A's funds sheets. Resident A's funds sheets were not available for my review.
CONCLUSION:	VIOLATION ESTABLISHED

On August 24, 2023, I conducted an Exit Conference with Licensee Designee, Laketa Brodnex. I advised Licensee Designee Brodnex I would be requesting a corrective action plan for the cited rule violations.

IV. RECOMMENDATION

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




8/24/2023

Christina Garza
Licensing Consultant

Date

Approved By:



8/24/2023

Mary E. Holton
Area Manager

Date