



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

October 17, 2023

Karen Hoornstra
P.O. Box 362
Reese, MI 48757

RE: License #: AS730012944
Investigation #: 2023A0871067
Karens AFC Home

Dear Karen Hoornstra:

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) 643-7960.

Sincerely,



Kathryn A. Huber, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48605
(989) 293-3234

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 #:	AS730012944
Investigation #:	2023A0871067
Complaint Receipt Date:	09/19/2023
Investigation Initiation Date:	09/21/2023
Report Due Date:	11/18/2023
Licensee Name:	Karen Hoornstra
Licensee Address:	10015 E Washington Reese, MI 48757-0362
Licensee Telephone #:	(989) 753-1368
Administrator:	Theresa Hoornstra
Licensee Designee:	N/A
Name of Facility:	Karens AFC Home
Facility Address:	10015 E. Washington Reese, MI 48757-0147
Facility Telephone #:	(989) 753-1368
Original Issuance Date:	10/01/1986
License Status:	REGULAR
Effective Date:	05/19/2022
Expiration Date:	05/18/2024
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A is being verbally abused and disrespected. Staff Member Traci Hoornstra called Resident A a “fucker” on multiple occasions.	No
Additional Findings	Yes

III. METHODOLOGY

09/19/2023	Special Investigation Intake 2023A0871067
09/21/2023	Special Investigation Initiated - On Site Interviewed Staff Tracy Hoornstra
09/26/2023	Contact - Face to Face Interviewed Resident A at day program
10/10/2023	Inspection Completed On-site Interviewed Resident C
10/10/2023	Exit Conference Face to face exit conference with Theresa Hoornstra
10/16/2023	APS Referral Through Central Intake to Saginaw County MDHHS

ALLEGATION:

Resident A is being verbally abused and disrespected. Staff Member Traci Hoornstra called Resident A a “fucker” on multiple occasions.

INVESTIGATION:

On September 21, 2023, I conducted an unannounced onsite investigation and interviewed Staff Traci Hoornstra. Staff Hoornstra stated she was cooking dinner and the cat jumped on her back. Staff Hoornstra said, “the cat had its claws in my back” and she swore at the cat. Staff Hoornstra stated she called the cat a “mother fucker” but was not swearing at the residents. Resident A thought she said it to him, and she told him that she did not call him that or swear at Resident A and apologized for swearing. Staff Hoornstra said she does not swear while working in the home, but the cat startled her, and it hurt.

On September 21, 2023, I interviewed Resident B at the onsite investigation. Resident B stated there is no swearing in the home and he never heard Staff Hoornstra swear. Resident B likes Staff Hoornstra and says she is a good cook. Resident B said there is no name calling in the facility.

On September 26, 2023, I interviewed Resident A at day program. Resident A said Staff Hoornstra swore at the cat and he thought she was swearing at him. Resident A said she was cooking dinner and the cat jumped on her. Resident A indicated Staff Hoornstra said, “get the fucking cat out of here.” Resident A said it is a good home and there is no swearing in the home.

On October 10, 2023, I conducted an onsite investigation and interviewed Resident C. Resident C said Staff Hoornstra was cooking dinner and “the cat climbed up her.” Resident C said she was standing by the kitchen and saw the cat climb up her. Resident A was standing by the kitchen as well and he thought she swore at him. Resident C said Staff Hoornstra does not swear and “she is a good worker.”

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.
ANALYSIS:	Staff Traci Hoornstra swore at the cat and not at Resident A. Resident A said Staff Hoornstra swore at the cat and not at him. Resident B stated there is no swearing in the home. Resident C witnessed the cat climb on Staff Hoornstra and Staff Hoornstra swore at the cat, not at Resident A. There is no evidence to confirm violation of this rule.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

At the onsite investigations on September 21 and October 10, 2023, I observed the wooden railing leading into the facility weathered and a hole in the railing. The steps were uneven, and the boards are warped.

Another door on the outside of the facility had the no glass in it, and it was just the door frame.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	The steps are uneven, and the wood is warped. The wooden rail has a gaping hole in it, and it appears that it could collapse. I confirm violation of this rule.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On September 21 and October 10, 2023, I observed overgrown weeds and trees that were grown up on the fence. There were weeds with two bikes growing on them by the shed. There was a garbage receptor with a trash bag sticking out of it. There was a basketball hoop that had blown over and was laying in the grass.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(13) A yard area shall be kept reasonably free from all hazards, nuisances, refuse, and litter.
ANALYSIS:	On September 21 and October 10, 2023, I observed overgrown weeds growing up on the fence that is attached to the house. A basketball hoop was laying in the yard. I confirm violation of this rule.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

At the onsite investigations on September 21 and October 10, 2023, I observed a pile of clothes and papers on the cabinet in the living room. The desk had piles of loose papers stuck in it. There was unfolded clothes and puzzles on it. The papers were not organized and loosely

hanging out. There was an aluminum pan on the shelf with the papers. There were two aerosol cans sitting on the top of it with plastic flowers.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
ANALYSIS:	There were unfolded clothes hanging on a cabinet in the living room. The kitchen desk had papers loosely hanging out of it. There was a chair sitting by the desk with a blanket hanging out of it, which is a trip hazard. I confirm violation of this rule.
CONCLUSION:	VIOLATION ESTABLISHED

On October 10, 2023, I conducted a face-to-face exit conference with Administrator Theresa Hoornstra. I advised Administrator Hoornstra the steps had to be fixed and the house needs to be cleaned. The overgrown weeds must be cleared.

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the status of this small group adult foster care home remain unchanged (capacity 1-6).

Kathryn A. Huber

10/16/2023

Kathryn A. Huber
Licensing Consultant

Date

Approved By:

Mary E. Holton

10/17/2023

Mary E. Holton
Area Manager

Date