



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

November 21, 2023

Teresa Wendt
HGA Non Profit Homes Inc.
917 West Norton
Muskegon, MI 49441

RE: License #: AS620012266
Investigation #: 2024A0340005
Morgan St

Dear Ms. Wendt:

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 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 (616) 356-0183.

Sincerely,



Rebecca Piccard, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 446-5764

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AS620012266
Investigation #:	2024A0340005
Complaint Receipt Date:	10/27/2023
Investigation Initiation Date:	10/27/2023
Report Due Date:	12/26/2023
Licensee Name:	HGA Non Profit Homes Inc.
Licensee Address:	917 West Norton Muskegon, MI 49441
Licensee Telephone #:	(231) 728-3501
Administrator:	Stacy McDonald
Licensee Designee:	Teresa Wendt
Name of Facility:	Morgan St
Facility Address:	104 Morgan Street White Cloud, MI 49349
Facility Telephone #:	(231) 689-0034
Original Issuance Date:	04/22/1991
License Status:	REGULAR
Effective Date:	11/07/2023
Expiration Date:	11/06/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Resident A had funds missing.	Yes
The licensee was maintaining more than \$200 in Resident A's personal account in the home.	Yes

III. METHODOLOGY

10/27/2023	Special Investigation Intake 2024A0340005
10/27/2023	APS Referral
10/27/2023	Special Investigation Initiated - Telephone Teresa Wendt
11/07/2023	Inspection Completed On-site
11/07/2023	Inspection Completed-BCAL Sub. Compliance
11/07/2023	Exit Conference
11/21/2023	Corrective Action Plan Requested and Due on 12/01/2023

ALLEGATION: Resident A had funds missing.

INVESTIGATION: On October 27, 2023, I received a complaint forwarded to me from the Office of Recipient Rights (ORR) in Newaygo County which stated that there was over \$1,000 missing from Resident A's funds account. The ORR report did substantiate a violation for the missing funds.

On October 27, 2023, I reported the information to Adult Protective Services.

On October 27, 2023, I contacted Designee Teresa Wendt. She was aware of the allegations and the ORR investigation. She informed me that staff had attended a Rights training through ORR and the trainer had told staff that resident funds have to be available to residents at all times. Ms. Wendt stated that Home Manager LaTeisha Stout interpreted that to mean all resident money maintained in the home had to be available to all staff so that any resident could get funds at any time they wanted. Ms. Wendt stated Ms. Stout moved the resident funds lock box from where it had been kept secure and accessible to only a few staff and put it in a locked cupboard, accessible to all staff. Ms. Wendt did not know when resident funds went missing and said she has no way of knowing who would have taken the funds during

this time because the training was back in September and funds were not realized to be missing until this week. She has now made the resident funds accessible by only the manager and only \$20 per resident is available immediately.

On November 7, 2023, I conducted an on-site inspection. Ms. Wendt and Ms. Stout were present on this day. I reviewed the Funds sheet for Resident A. Transactions were documented and the funds sheet had been highlighted to show the discrepancies. The calculations totaled \$1,008 missing from Resident A's funds. Ms. Wendt stated HGA will reimburse the missing funds to Resident A.

Ms. Stout confirmed what Ms. Wendt had previously reported. We discussed the plan to keep the funds securely locked and that \$20 available upon request by a resident as being sufficient. I also advised Ms. Stout that if something were to be told to her and staff by CMH, ORR or anyone else that does not seem quite right, she should inquire with Ms. Wendt or myself for clarification or verification.

Ms. Wendt stated law enforcement has been notified, but it is unlikely they will do anything since there are no leads as to who took 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:	An allegation was made that Resident A was missing over \$1,000 dollars from his account. ORR substantiated a violation due to the missing funds. Ms. Wendt and Ms. Stout confirmed the money was missing. The funds will be reimbursed to Resident A by HGA. There is evidence to support the rule violation.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: The licensee was maintaining more than \$200 in Resident A's personal account in the home.

INVESTIGATION: On October 27, 2023, I received a complaint from Newaygo ORR stating that Resident A had more than \$200 in her funds account managed by the Morgan AFC Home.

On October 27, 2023, I contacted Designee Teresa Wendt. She was aware of the allegations and the ORR investigation. She informed me that Resident A's guardian continued to send money for her to spend and Ms. Stout did not return the checks or inform the guardian they could not keep more than \$200 available at one time. Resident A previously spent a lot more money, but due to a health decline, she has not been going out shopping as often, so the money was not getting spent.

Ms. Wendt stated she has informed Ms. Stout and staff that there should never be more than \$200 in a resident funds account at one time. We discussed the rule violation described above and how the large sum of money would not have gone missing had staff returned some of the funds to the guardian and ensured the funds balance did not exceed \$200.

On November 7, 2023, while conducting an onsite investigation, I reviewed the resident funds and while the balance was accurate on this date, the document did show that in the past, there was over \$1,000 in Resident A's funds account being maintained by the AFC home.

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:	<p>An allegation was made that the licensee had more than \$200 in Resident A's account.</p> <p>A review of Resident A's account documentation revealed that Resident A's account did exceed \$200.</p> <p>The Licensee Designee Theresa Wendt confirmed that Resident A's account at the home exceeded \$200.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On November 7, 2023, I conducted an exit conference with Designee Teresa Wendt. We discussed the violations found. I requested a Corrective Action Plan which Ms. Wendt agreed to send.

