



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

December 27, 2023

James Boyd
Crisis Center Inc - DBA Listening Ear
PO Box 800
Mt Pleasant, MI 48804-0800

RE: License #: AS180010525
Investigation #: 2024A1033010
Weatherhead Home

Dear Mr. Boyd:

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) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Jana Lipps". The signature is written in black ink on a white background.

Jana Lipps, 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**

I. IDENTIFYING INFORMATION

License #:	AS180010525
Investigation #:	2024A1033010
Complaint Receipt Date:	11/17/2023
Investigation Initiation Date:	11/17/2023
Report Due Date:	01/16/2024
Licensee Name:	Crisis Center Inc - DBA Listening Ear
Licensee Address:	107 East Illinois Mt Pleasant, MI 48858
Licensee Telephone #:	(989) 773-6904
Administrator:	Sherry Kidd
Licensee Designee:	James Boyd
Name of Facility:	Weatherhead Home
Facility Address:	749 Richard St Harrison, MI 48625
Facility Telephone #:	(989) 773-6904
Original Issuance Date:	02/06/1985
License Status:	REGULAR
Effective Date:	07/30/2023
Expiration Date:	07/29/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED

II. ALLEGATION(S)

	Violation Established?
Resident A has demonstrated a 16-pound weight loss from February 2023 to the present and direct care staff, Jessica O'Rourke has refused to take her to the doctor to follow up on this issue. The direct care staff are not providing for Resident A's nutritional needs.	Yes

III. METHODOLOGY

11/17/2023	Special Investigation Intake 2024A1033010
11/17/2023	Special Investigation Initiated - Telephone Interview with AFC Licensing Consultant, Johnnie Daniels, via telephone.
12/07/2023	APS Referral- No referral indicated. No current suspicion of abuse/neglect.
12/07/2023	Inspection Completed On-site- Interviews with direct care staff, Billie Thomas & Courtney Cooper. Review of Resident A's resident record initiated.
12/07/2023	Inspection Completed-BCAL Sub. Compliance
12/19/2023	Exit Conference with Licensee designee, Jim Boyd, granted written permission to conduct exit conference with Administrator, Sherry Kidd. Exit conference conducted via telephone with Ms. Kidd. Voicemail message left.

ALLEGATION: Resident A has demonstrated a 16-pound weight loss from February 2023 to the present and direct care staff, Jessica O'Rourke, has refused to take her to the doctor to follow up on this issue. The direct care staff are not providing for Resident A's nutritional needs.

INVESTIGATION:

On 11/17/23 I received a complaint regarding the Weatherhead Home, adult foster care facility (the facility). The complaint alleged that Resident A has demonstrated a 16-pound wight loss from February 2023 to the present and direct care staff, Jessica O'Rourke, has refused to take her to the doctor to follow upon this issue. The

complaint further alleges that direct care staff are not providing for Resident A's nutritional needs. On 11/17/23 I interviewed Adult Foster Care Licensing Consultant, Johnnie Daniels, regarding the allegation. Mr. Daniels reported that he had received a telephone call from the facility Administrator, Sherry Kidd, regarding the allegations. Mr. Daniels reported that Ms. Kidd reported to him that direct care staff members at the facility brought these allegations to her attention.

On 12/7/23 I conducted an unannounced on-site investigation at the facility. I interviewed direct care staff/Assistant Program Director, Billie Thomas. Ms. Thomas reported that Ms. O'Rourke recently resigned and is no longer employed at the facility. Ms. Thomas reported that prior to Ms. O'Rourke's resignation she had been on an extended medical leave recovering from a surgery. Ms. Thomas reported that she was aware of Resident A's weight loss, and this was first brought to her attention by the direct care staff, Jennifer Ison, who works the overnight shift. She reported this information was provided by Ms. Ison a couple of months ago. Ms. Thomas reported direct care staff who work the overnight shift are primarily responsible for getting Resident A groomed and dressed and they noticed that Resident A's bras and shirts were fitting more loosely. Ms. Thomas reported that it was Ms. Ison who first noticed this and brought this to Ms. Thomas' attention in October 2023. Ms. Thomas reported she then contacted Guardian A1, on 11/14/23, and had a conversation about the weight loss pattern. Ms. Thomas reported that it was decided direct care staff would schedule an appointment with Resident A's physician to have her weight loss addressed. Ms. Thomas reported the earliest she was able to secure a visit with the physician for Resident A was 12/1/23. She reported that the physician wanted to check Resident A's thyroid levels as Resident A is on a thyroid medication. She reported that Resident A had her lab work completed on 12/4/23. Ms. Thomas reported that when she was discussing the weight loss with the physician, the physician's office did inform her that Ms. O'Rourke had previously contacted them, earlier in the Fall, to discuss similar concerns about Resident A's weight loss. Ms. Thomas reported that Resident A's thyroid medication had been reduced prior to her 12/1/23 physician appointment because of a conversation Ms. O'Rourke had with the physician's office. Ms. Thomas reported she has not heard any direct care staff members report that Ms. O'Rourke was not following through with Resident A's medical care needs. Ms. Thomas reported that she can view Resident A's past physician progress notes by accessing Resident A's online medical portal. Ms. Thomas was able to print visit notes from 7/24/23, 9/22/23, and 12/1/23, for my review today. Ms. Thomas reported that there is a document titled, *Pertinent Health and Medication History*, for each resident at the facility. Ms. Thomas reported that when a resident goes to a medical appointment, direct care staff document the appointment date and findings on this log for their reference. Ms. Thomas reported that it was brought to her attention, during a staff meeting, she believed to have taken place in October 2023, that Resident A's diet was to be modified to a higher calorie diet due to her weight loss. Ms. Thomas reported that Ms. O'Rourke led this staff meeting and provided this information. Ms. Thomas did not recall the date of this staff meeting, other than she thought the meeting happened in the month of October 2023. Ms. Thomas reported

that direct care staff follow a document titled, *Weatherhead Mealtime*, regarding residents who have been ordered a special diet. Ms. Thomas reported that this document is kept on the refrigerator at the facility and documents all special diets to be followed for all residents. She reported that resident initials are used on the document for resident confidentiality and Resident A's initials were identified to me during this investigation as being on this document. Ms. Thomas reported that the document is currently not accurate, and she is in the process of modifying this document to account for the new special diet that was ordered for Resident A. The direct care staff had been following a 1200 calorie diet for Resident A until this past week, when it was identified that this was not the current diet that Resident A was prescribed. Ms. Thomas reported confusion over what the new diet order is. Ms. Thomas reported that she has been given conflicting information on the new diet ordered.

During on-site investigation, on 12/7/23, I interviewed direct care staff, Courtney Cooper. Ms. Cooper reported that the direct care staff have recently been informed to modify Resident A's diet to an 1800 calorie diet. She reported that she was made aware of the change in Resident A's diet when she took Resident A for her annual physical, but she could not recall the date of this physical. She reported that she communicated the change in diet to Ms. O'Rourke at that time, but she was unsure why the diet was not modified until at least October 2023. Ms. Cooper reported she could not recall the exact date when it was communicated to the direct care staff members that the diet had been modified. Ms. Cooper reported she had no knowledge of the document titled, *Pertinent Health & Medication History*, and was unaware she was to record on this document any changes resulting from a physician's appointment.

During on-site investigation on 12/7/23 I reviewed Resident A's resident record. I reviewed the document, *Pertinent Health & Medication History*, for Resident A. The following physician appointments were listed on this log:

- 3/3/23: "prescribed flonase & a Z-pack azithromycin"
- 3/21/23: "cardiovascular health"
- 7/24/23: "labs, annual physical"
- 8/2/23: "bloodwork completed"
- 9/22/23: "AIMS score, lowering thyroid meds, No more low carb diet"

I reviewed an *After Visit Summary* from My Michigan Health, dated 2/20/23, for Resident A. The purpose of this medical visit was listed as "seizure disorder".

I also reviewed an *After Visit Summary* from My Michigan Health, dated 3/3/23, for Resident A. The purpose of this medical appointment was related to Resident A "nasal congestion and acute cough".

I reviewed Resident A's current *Resident Weight Record* document, which noted the following weights:

- 2/21/23: 151.8
- 3/28/23: 147.8
- 4/30/23: 144.4
- 5/31/23: 144.6
- 6/21/23: 141.5
- 7/16/23: 141.5
- 8/30/23: 135.7
- 9/27/23: 135
- 10/19/23: 135.2

I reviewed Resident A's *Resident Weight Record* from the time period, 1/29/20 through 12/13/22. This weight record recorded fluctuations in Resident A's weight from 149.9lbs on 1/29/20, up to 181.2lbs on 11/29/21, and back down to 156.5lbs on 12/13/22.

I reviewed the *Medication Administration Record (MAR)* for Resident A for the month of October 2023. The MAR recorded that Resident A's Levothyroxine medication was changed from 150mcg to 137mcg on 10/12/23, per physician instruction.

I reviewed the document, *Weatherhead Mealtime*, presented to me by Ms. Thomas. The document stated, "[Resident A] 1200 Calorie Diet. Low-carb. Bite size".

During on-site investigation I reviewed the document, *Health Care Appraisal*, dated 7/24/23, for Resident A. Under the section, *Special dietary instructions and recommended caloric intake*, it reads, "1800 cal diet – chopped".

I also reviewed Resident A's *Health Care Appraisal*, dated, 1/31/22. Under the section, *Special dietary instructions and recommended caloric intake*, it reads, "1300-1400 Calorie low carb/diabetic diet, chopped".

During on-site investigation I reviewed the document, *Assessment Plan for AFC Residents*, dated 6/16/23, for Resident A. On page 2, under section, *III. Health Care Assessment*, subsection, *B. Special Diets*, it reads, "1200 Calorie low carb diet finely chopped".

During on-site investigation I reviewed the document, *Progress Notes*, dated 7/24/23, for Resident A, completed by Phani D. Vadlamudi, MD. The document states, "Not sure why she is on DM diet, noticed some wt. loss, rec going back to 1600 cal per day diet soft cut up food". Resident A's weight was documented at this visit of being 141.5lbs.

I reviewed the document, *Progress Notes*, dated 9/22/23, completed by Phani D. Valamudi, MD. It was reported on this document that Resident A's Synthroid medication was reduced today to 137mcg tablet. Resident A's weight was recorded at 135lbs on this document.

I reviewed the document, Progress Notes, dated 12/1/23, completed by Phani D. Vadlamudi, MD. This document reported the chief complaint for Resident A being “weight loss”. The note further read, “Could be related to thyroid or other meds she is on like Topamax. Check labs and follow up”.

APPLICABLE RULE	
R 400.14310	Resident health care.
	(4) In case of an accident or sudden adverse change in a resident's physical condition or adjustment, a group home shall obtain needed care immediately.
ANALYSIS:	Based upon interviews with Ms. Thomas and Ms. Cooper, as well as review of Resident A's resident record it can be determined that the direct care staff members were aware of the weight loss Resident A was experiencing and this was documented in physician reports on 7/24/23, 9/22/23, and 12/1/23. The direct care staff demonstrated that they discussed these physical changes and the physician, Phani D. Vadlamudi, MD, was making recommendations and ordering testing to assess the source of the weight loss, therefore no violation is established at this time.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(3) Special diets shall be prescribed only by a physician. A resident who has been prescribed a special diet shall be provided such a diet.

ANALYSIS:	Based upon interviews with Ms. Thomas & Ms. Cooper, as well as review of Resident A's resident record it can be determined that Resident A's special diet was modified by Doctor Vadlamudi on 7/24/23, as noted in the physician <i>Progress Notes</i> on this date, as well as on Resident A's <i>Health Care Appraisal</i> , dated 7/24/23. The direct care staff have direct access to each of these documents yet noted that the special diet was not modified at the facility for Resident A until some point in October 2023. Since direct care staff members did not follow Resident A's special diet when it was ordered, despite Ms. Cooper being present at the medical appointment and reporting she recalled hearing Dr. Vadlamudi update the diet due to Resident A's weight loss, this demonstrates a clear violation that the direct care staff were not providing the special diet ordered for Resident A for at least a two month period after the diet was modified. Furthermore, Ms. Thomas reported that she had confusion about what special diet parameters Resident A should have in place due to conflicting information found on the <i>Progress Notes</i> form from 7/24/23 and the <i>Healthcare Appraisal</i> dated for the same date, but there is no documentation that any of the direct care staff attempted to resolve the confusion by communicating this discrepancy with the physician's office.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	Based upon interviews with Ms. Thomas & Ms. Cooper, as well as review of Resident A's resident record it can be determined that Resident A's special diet was modified by Dr. Vadlamudi, on 7/24/23 and the Assessment Plan for AFC Residents form, dated 6/13/23, was not updated to reflect the change in this diet.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an approved corrective action plan, no change to the status of the license recommended at this time.



12/20/23

Jana Lipps
Licensing Consultant

Date

Approved By:



12/27/2023

Dawn N. Timm
Area Manager

Date