



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

December 28, 2023

Sherry Parrish
321 Cemetery Road
Bangor, MI 49013

RE: License #: AF800087344
Investigation #: 2024A1031009
Parrish Adult Foster Care

Dear Licensee:

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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. 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,

A handwritten signature in blue ink that reads "KDuda".

Kristy Duda, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF800087344
Investigation #:	2024A1031009
Complaint Receipt Date:	11/01/2023
Investigation Initiation Date:	11/02/2023
Report Due Date:	12/31/2023
Licensee Name:	Sherry Parrish
Licensee Address:	321 Cemetery Road Bangor, MI 49013
Licensee Telephone #:	(269) 427-5033
Name of Facility:	Parrish Adult Foster Care
Facility Address:	321 Cemetery Road Bangor, MI 49013
Facility Telephone #:	(269) 427-5033
Original Issuance Date:	08/30/1999
License Status:	REGULAR
Effective Date:	07/09/2022
Expiration Date:	07/08/2024
Capacity:	2
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED

II. ALLEGATION(S)

	Violation Established?
Licensee is not in good physical health to care for Resident A.	Yes
Medications are not locked up.	Yes
Licensee does not have medications organized.	Yes
The home is not clean.	Yes
Additional Findings	Yes

III. METHODOLOGY

11/01/2023	Special Investigation Intake 2024A1031009
11/01/2023	APS Referral
11/02/2023	Special Investigation Initiated – Telephone Interview with Recipient Rights Officer Melisse Hughes.
11/06/2023	Inspection Completed On-site
11/06/2023	Inspection Completed-BCAL Sub. Non-Compliance
11/06/2023	Contact - Face to Face Interviews with Sherry Parrish, Lauren Parrish, Jessica Parrish, and Resident A.
11/06/2023	Contact - Telephone Interviews with Nikkea Kelley.
11/06/2023	APS Referral
11/07/2023	Contact - Telephone Interview with Tammy Dykstra.
11/21/2023	Contact - Telephone call received from Mike Hartman.
11/29/2023	Contact - Document Received from Mike Hartman.
12/05/2023	Contact - Telephone call received Melisse Hughes.
12/28/2023	Exit Conference held with Licensee Sherry Parrish.

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ALLEGATION:

Licensee is not in good physical health to care for Resident A.

INVESTIGATION:

On 11/2/23, I interviewed Recipient Rights Officer Melisse Hughes via telephone. Ms. Hughes reported she had concerns regarding the home after she conducted an announced visit to the home. Ms. Hughes reported she observed the licensee Sherry Parrish to have difficulty maneuvering throughout the home. Ms. Hughes reported she observed Ms. Parrish to be utilizing an office chair as a wheelchair to navigate throughout the home. When Ms. Parrish did stand up, she relied on walls and counters to support herself and maintain her balance. Ms. Hughes reported she observed Ms. Parrish to have difficulty opening the medication cabinet as it took her approximately ten minutes to open it. Ms. Hughes reported concerns regarding Ms. Parrish's ability to provide care for Resident A as Resident A requires for physical care such as lifting, eating, and bathing as she has difficulty with completing light tasks herself.

On 11/6/23, I conducted an unannounced visit to the home. Ms. Parrish and her daughter Jessica Parrish were both observed to be using office chairs to push themselves around the home. Ms. Parrish reported she was having pain in her knees and back which is why she was using the office chair. Ms. Parrish was observed to have difficulty bending down to pick up items on the floor that blocked her from rolling in her chair. When Ms. Parrish stood up, she was observed to lean on the counters and walls in the home to maintain her balance. Ms. Parrish reported she can provide all necessary care Resident A requires. Ms. Parrish reported that Resident A can get into the shower independently and she assists Resident A once they are in the shower. Ms. Parrish reported she has a Hoyer lift to assist with lifting individuals in the home. Ms. Parrish's daughter, Jessica, reported she helps Ms. Parrish with completing tasks around the home such as cooking and cleaning.

Ms. Parrish's adult daughter Lauren and Resident A were not able to be interviewed due to being nonverbal.

On 11/6/23, I interviewed Resident A's case manager Nikkea Kelley via telephone. Ms. Kelley reported she did not have any relevant information as she has not been to the home since September 2023. Ms. Kelley reported she was not able to enter the home in September due to bed bugs being present in the home. Ms. Kelley reported she was not able to observe Ms. Parrish's physical limitation or the condition of the home.

On 11/7/23, I interviewed Resident A’s guardian Tammy Dykstra via telephone. Ms. Dykstra reported she had not observed these concerns when she visited the home in the past. Ms. Dykstra reported Resident A is not able to navigate the home independently and does require physical assistance by the licensee.

On 11/21/23, I interviewed Adult Protective Services (APS) Mike Hartman via telephone. Mr. Hartman reported he conducted an unannounced visit to the home and observed Ms. Parrish to be pushing herself around in an office chair and used walls and counters to support herself when standing or walking. Mr. Hartman expressed concerns regarding Ms. Parrish’s physical ability to provide care to Resident A as well as her daughter Jessica as she is completely immobile. Mr. Hartman reported Ms. Parrish reported to him that she was on new medications which made her “dizzy” and “tipsy”. Mr. Hartman reported Ms. Parrish expressed that she was having back problems which is why she cannot lift her daughter or Resident A, but she does use the Hoyer lift. Mr. Hartman reported he has never seen Resident A outside of her bedroom when he has conducted multiple unannounced visits to the home.

On 11/29/23, Mr. Hartman sent an email containing his findings for his APS investigation. Mr. Hartman reported there was a preponderance of evidence found that Ms. Parrish did neglect Resident A as well as her disabled adult children, Lauren and Jessica. APS found the home to be in hoarding condition with three bedrooms and a medical bed stored with numerous boxes and items. Ms. Parrish failed to use a medical bed for her disabled daughter Lauren who is sleeping on an air mattress in the living room. APS observed wheelchairs to be stored in a corner in the living room with minimal access to them. Medications were not properly secured, and Ms. Parrish had difficulty with mobility.

APPLICABLE RULE	
R 400.1405	Health of a licensee, responsible person, and member of the household.
	A licensee, responsible person, and a member of the household shall be in such physical and mental health so as not to negatively affect either the health of the resident or the quality of his or her care.
ANALYSIS:	Based on interviews and observations, there are significant concerns regarding the licensee’s physical health and her ability to provide quality care for Resident A. The licensee was observed to have difficulty navigating herself throughout the home and keeping her balance when standing independently. The licensee expressed negative side effects from her medications, knee pain, and back pain which hinders her ability to walk without relying on the chair or structures in the home for support. APS found there was sufficient evidence to support that

	Ms. Parrish neglected Resident A due to her own health and conditions of the home.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Medications are not locked up.

INVESTIGATION:

Ms. Hughes reported she observed medications to scattered throughout the home and not secured.

I observed medications to be stored in a cabinet in the kitchen that was not locked as well as on the counter in the kitchen. Ms. Parrish reported she typically locks the medications up, but she was recently passing medications. I was at the home at approximately 2pm and Ms. Parrish reported medications were last passed around 12pm.

Mr. Hartman reported Ms. Parrish reported “not right now” when asked if medications are spread throughout the home. Mr. Hartman reported he observed the medication cabinet to have a lock, but it was not locked when he visited the home.

APPLICABLE RULE	
R 400.1418	Resident medications.
	(5) Prescription medication shall be kept in the original pharmacy-supplied and pharmacy-labeled container, stored in a locked cabinet or drawer, refrigerated if required, and labeled for the specific resident.
ANALYSIS:	Medications were observed to not be stored in a locked cabinet or drawer.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Licensee does not have medications organized.

INVESTIGATION:

Ms. Hughes reported she observed medications to be in Ms. Parrish’s office, in the kitchen, and the medication cabinet. Ms. Hughes reported the medications in the medication cabinet were not organized and in disarray. Ms. Hughes reported she was concerned that Resident A was not receiving her medications.

I asked Ms. Parrish to show me Resident A’s medications. Ms. Parrish opened the medication cabinet and reported she did not know where they were. Ms. Parrish then asked her daughter, Jessica, where Resident A’s medications were. Jessica then went into a different room in the home and retrieved the medications. Ms. Parrish reported she typically keeps the medications in the cabinet and did not know why they were moved somewhere else.

Mr. Hartman reported he observed the medication cabinet to have a lock, but it was not locked when he visited the home.

APPLICABLE RULE	
R 400.1418	Resident medications.
	(6) A licensee shall take reasonable precautions to ensure that prescription medication is not used by a person other than the resident for whom the medication was prescribed.
ANALYSIS:	Based on interviews and observations, the licensee has not taken reasonable precautions to ensure that medication is not used by another person in the home. Medications were observed to be easily accessible, misplaced, and disorganized by recipient rights, APS, and licensing.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

The home is not clean.

INVESTIGATION:

Ms. Hughes reported the home was observed to not be generally clean, cluttered, and the bathroom was dirty and smelled of urine.

When I entered the home, there was a noticeable odor that smelled of urine and feces. The kitchen was observed to have multiple dishes, pots, pans, and utensils containing dried up food on the counters and table. The microwave was observed to

be unclean as is contained dried up and spilled food. The refrigerator was observed to be unsanitary as there was spilled and dried up liquids as well as food remnants. There was a bag of garbage observed to be hanging from a closet doorknob. The home was cluttered as Ms. Parrish's bedroom had a path between items leading to her bed and her daughter Lauren's bed was not accessible and full of many items. Ms. Parrish's office was not fully accessible due to the number of items stored in the room. The two other bedrooms in the home were observed to have many items stored and stacked which made the bedrooms inaccessible. Jessica's bedroom was not accessible as there was a dresser blocking the doorway leading into the room and items stacked all over the floor. Jessica has two beds in her room that contained more items making the bed not usable for sleeping. Resident A's bedroom was observed to have a bed, side table, and Hoyer lift. The bathroom used by Resident A was observed to have urine and feces on the toilet seat and on the side of the toilet. The shower was observed to have soap scum build up and feces. There were multiple areas in the home that did not have finished flooring as there was exposed subfloor.

Ms. Parrish reported "taking care of the girls are more important than the house". Ms. Parrish was reminded that the home needs to be maintained and clean to provide a safe home for her daughters and Resident A. Ms. Parrish reported she was not responsible for cleaning the main bathroom as she does not use it. Ms. Parrish and Jessica reported that Jessica is responsible for cleaning the bathroom and she did not clean it recently. Ms. Parrish did not appear to be concerned about the condition of her home and the concerns of the department.

APS found the home to be in hoarding condition with three bedrooms and a medical bed stored with numerous boxes and items.

APPLICABLE RULE	
R 400.1426	Maintenance of premises.
	(1) The premises shall be maintained in a clean and safe condition.
ANALYSIS:	The premises was not observed to be maintained and in clean and safe condition on multiple occasions by licensing, APS, and recipient rights. The home overall was observed to be cluttered and in unsanitary condition.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

I requested a copy of Resident A's *Assessment Plan for AFC Residents* when I was at the home. Ms. Parrish reported she was not able to locate the form due to her office being disorganized.

APPLICABLE RULE	
R 400.1407	Resident admission and discharge criteria; resident assessment plan
	(3) In situations where a resident is referred for admission, the resident assessment plan shall be conducted in conjunction with the resident or the resident's designated representative, the responsible agency, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	The licensee was not able to provide a copy of Resident A's AFC Assessment when requested.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

I requested a copy of Resident A's medication administration record (MAR) while at the home. Ms. Parrish reported that she has not completed Resident A's MAR for a few months and was not able to locate previous records.

APPLICABLE RULE	
R 400.1418	Resident medications.
	(4) When a licensee or responsible person supervises the taking of medication by a resident, the licensee or responsible person shall comply with the following provisions: (a) Maintain a record as to the time and amount of any prescription medication given or applied. Records of prescription medication shall be maintained on file in the home for a period of not less than 2 years.

ANALYSIS:	I requested a copy of Resident A's medication administration record (MAR) while at the home. Ms. Parrish reported that she has not completed Resident A's MAR for a few months and was not able to locate previous records.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

I observed the refrigerator to have spilled dried-up liquids that appeared to be juice from raw meat and food remnants next to food being consumed by members of the household and Resident A.

APPLICABLE RULE	
R 400.1425	Food service.
	(1) All food shall be from sources approved or considered satisfactory by the department and shall be clean; wholesome; free from spoilage, adulteration, and misbranding; and safe for human consumption.
ANALYSIS:	The refrigerator was observed to have spilled dried-up liquids that appeared to be juice from raw meat and dried-up food remnants next to food being consumed by members of the household and Resident A.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

The laundry room and bathroom were observed to have unfinished flooring and exposed subfloor.

APPLICABLE RULE	
R 400.1426	Maintenance of premises.
	(4) Floors, interior walls, and ceilings shall be sound, in good repair, and maintained in a clean condition.

ANALYSIS:	The laundry room and bathroom were observed to have unfinished flooring and exposed subfloor.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

Resident A's bed was observed to have only a comforter and a plastic mattress protector.

APPLICABLE RULE	
R 400.1434	Linens.
	(1) A licensee shall provide bedding which includes 2 sheets, a pillowcase, a minimum of 1 blanket, and a bedspread. Bed linens shall be changed at least weekly or more often if soiled.
ANALYSIS:	Resident A's bedroom did not have 2 sheets, a pillowcase, and blanket. The bed was observed to have one comforter and a plastic mattress protector.
CONCLUSION:	VIOLATION ESTABLISHED

On 12/28/23, I completed an exit conference with licensee Sherry Parrish via telephone. Ms. Parrish reported she did not agree with the findings involving her physical health. Ms. Parrish reported Resident A will be moving from her home soon and she plans to close her foster home license.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend modification of the license to provisional.

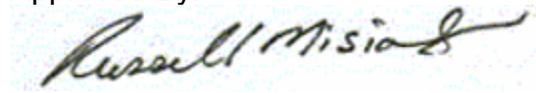
KDuda

12/28/23

Kristy Duda
Licensing Consultant

Date

Approved By:



12/28/24

Russell B. Misiak
Area Manager

Date