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GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

January 5, 2024

Bobi Kaszubowski Bobi Sue, Inc. 740 St. Onge Alpena, MI 49707

> RE: License #: AL040293493 Investigation #: 2024A0360004

Sally's Care Home I

Dear Ms. Kaszubowski:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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 (866) 865-0006.

Sincerely,

Matthew Soderquist, Licensing Consultant Bureau of Community and Health Systems

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931 S Otsego Ave Gaylord, MI 49735 (989) 370-8320

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL040293493
Investigation #:	2024A0360004
Onwardaint Descript Date	44/07/0000
Complaint Receipt Date:	11/07/2023
Investigation Initiation Date:	11/07/2023
Report Due Date:	01/06/2024
Robolt Buo Buto.	01/00/2021
Licensee Name:	Bobi Sue, Inc.
Licensee Address:	740 St. Onge Alpena, MI 49707
Licensee Telephone #:	(989) 354-2401
Administrator:	Shirley Dingman
Licensee Designee:	Bobi Kaszubowski
Name of Facility:	Sally's Care Home I
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Facility Address:	740 St. Onge Alpena, MI 49707
Facility Telephone #:	(989) 354-2401
Tuesday Telephone III	(666) 66 1 2 16 1
Original Issuance Date:	11/02/2012
License Status:	REGULAR
Effective Deter	00/05/0000
Effective Date:	08/25/2023
Expiration Date:	08/24/2025
Capacity:	20
Capacity.	20
Program Type:	AGED

II. ALLEGATION(S)

Violation Established?

Resident A had bruising from an unknown cause a month ago.	No
The facility has been cold at 60 degrees Fahrenheit.	No

III. METHODOLOGY

11/07/2023	Special Investigation Intake 2024A0360004
11/07/2023	Special Investigation Initiated - Letter APS assigned to Kayla Kelly
11/07/2023	APS Referral
11/08/2023	Inspection Completed On-site APS Kayla Kelly, APD Linnessa Mellberg, McLaren Hospice Jessica Srebnik, Hospice of Michigan Patti Lacross, Licensee Designee Bobi Kaszubowski, DCS Anne Bisson, Resident A.
12/28/2023	Inspection Completed On-site
12/28/2023	Contact - Telephone call received Administrator Shirley Dingman
01/04/2024	Exit Conference With Administrator Shirley Dingman

ALLEGATION: Resident A had bruising from an unknown cause a month ago.

INVESTIGATION: On 11/07/2023 I was assigned a complaint from the LARA online complaint system.

On 11/08/2023 I conducted an unannounced onsite inspection at the facility with Adult Protective Services worker Kayla Kelly and Alpena Police Department Officer Linnessa Mellberg. McLaren Hospice nurse Jessica Srebnik was at the facility and stated she provides care to Resident A. She stated he had a bruise about a month ago on his left arm. She stated the staff noticed the bruise and contacted her right away. She stated they were not able to determine the cause of the bruise, but it could have been caused from the Hoyer lift. She stated it was a small bruise and did not look concerning. She stated that she has no concerns with the staff at the facility.

While at the facility on 11/08/2023 I interviewed the licensee designee Bobi Kaszubowski. Ms. Kaszubowski did not know anything about the bruise. I then interviewed direct care staff Anne Bisson. Ms. Bisson stated Resident A uses a Hoyer lift and he could've gotten the bruise from the lift. She stated she has never seen any staff get aggressive with Resident A. I then interviewed Resident A. Resident A denied that any staff has hit him or caused a bruise on his arms. I observed both of his arms and did not see any bruising.

While at the facility on 11/08/2023 APS worker Kayla Kelly stated that she would not be substantiating her APS investigation and APD officer Mellberg stated she did not have any concerns that would require additional investigation.

On 11/15/2023 I received a call from the administrator Shirley Dingman. Ms. Dingman stated Resident A had a slight bruise on his arm about one month ago however she believes it was from the Hoyer lift. She stated Resident A has never stated anything about any staff hurting him. Ms. Dingman stated that they have an offer to sell the facility and will likely be closing their license. She stated she will be issuing 30-day discharge notices to all residents once the paperwork is final.

On 12/28/2023 I conducted an unannounced onsite inspection at the facility. The facility was locked and it appeared that no one was residing at the facility any longer.

On 12/28/2023 I received a phone call from the administrator Shirley Dingman who stated that all residents have moved out of the facility, and they would like to close the license.

APPLICABLE RULE		
R 400.15305	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:	The complaint alleged Resident A had a bruise from unknown cause a month ago.	
	Resident A denied being hit and was not aware of any bruises on his arms.	
	APS worker Kayla Kelly did not substantiate her investigation. APD officer Linnessa Mellberg stated she seen no reason for any further investigation.	
	Hospice nurse Jessica Srebnik stated she was made aware of a bruise about one month prior to the complaint but had no	

	concerns with the staff and believed it may have been caused by the Hoyer lift. There is not a preponderance of evidence that Resident A was not treated with dignity and his personal needs including protection and safety were not attended to at all times.	
CONCLUSION:	VIOLATION NOT ESTABLISHED	

ALLEGATION: The facility has been cold at 60 degrees Fahrenheit.

INVESTIGATION: On 11/08/2023 I conducted an unannounced onsite inspection at the facility. The facility thermostat read 70 degrees Fahrenheit in 3 different locations of the facility. The licensee designee Bobi Kaszubowski stated they always keep the thermostat at 70 degrees.

While at the facility on 11/08/2023 I interviewed McLaren Hospice nurse Jessica Srebnik. Ms. Srebnik stated the facility is always kept at a comfortable temperature and she has never noticed it to be cold or 60 degrees Fahrenheit. I then interviewed Hospice of Michigan staff Patti Lacross. Ms. Lacross stated the facility is always kept at a comfortable temperature and she has never noticed it to be cold or 60 degrees Fahrenheit. I then interviewed direct care staff Anne Bisson. Ms. Bisson stated the home is always kept at 70 or 72 degrees Fahrenheit.

APPLICABLE R	RULE
R 400.15406	Room temperature.
	All resident-occupied rooms of a home shall be heated at a temperature range between 68 and 72 degrees Fahrenheit during non-sleeping hours. Precautions shall be taken to prevent prolonged resident exposure to stale, noncirculating air that is at a temperature of 90 degrees Fahrenheit or above. Variations from the requirements of this rule shall be based upon a resident's health care appraisal and shall be addressed in the resident's written assessment plan. The resident care agreement shall address the resident's preferences for variations from the temperatures and requirements specified in this rule.
ANALYSIS:	The complaint alleged the facility has been cold at 60 degrees Fahrenheit.
	During an unannounced onsite inspection on 11/08/2023 I observed three separate thermostats in the facility to be set at and reading 70 degrees Fahrenheit.

	Direct care staff Anne Bisson and licensee designee Bobi Kaszubowski both stated the home is always kept at least 70 degrees Fahrenheit.
	Hospice staff Jessica Srebnik and Patti Lacross both stated the home is always kept at a comfortable temperature.
	There is not a preponderance of evidence that the facility is not heated at a temperature between 68 and 72 degrees Fahrenheit.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 01/04/2024 I conducted an exit conference with the administrator Shirley Dingman. Ms. Dingman concurred with the findings of the investigation.

IV. RECOMMENDATION

I recommend no change in the status of the license.

Down & A	01/04/2024
Matthew Soderquist Licensing Consultant	Date
Approved By:	
0 0	01/05/2024
Jerry Hendrick Area Manager	Date