



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

February 9, 2024

Carl Schuler
Suthern Adult Care, LLC
617 Riverview Ct.
Gladwin, MI 48624

RE: License #: AL650308159
Investigation #: 2024A1038025
The Horizon Senior Living III

Dear Mr. Schuler:

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 (517) 284-9727.

Sincerely,

A handwritten signature in black ink that reads "Johnnie Daniels".

Johnnie Daniels, 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 #:	AL650308159
Investigation #:	2024A1038025
Complaint Receipt Date:	01/29/2024
Investigation Initiation Date:	02/01/2024
Report Due Date:	03/29/2024
Licensee Name:	Suthern Adult Care, LLC
Licensee Address:	617 Riverview Ct. Gladwin, MI 48624
Licensee Telephone #:	(989) 343-9404
Administrator:	Connie Clauson
Name of Facility:	The Horizon Senior Living III
Facility Address:	613 Progress St. West Branch, MI 48661
Facility Telephone #:	(989) 343-9404
Original Issuance Date:	02/11/2011
License Status:	REGULAR
Effective Date:	09/16/2023
Expiration Date:	09/15/2025
Capacity:	20
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
A staff person was improperly handling resident funds.	No
Residents at the facility are not receiving proper personal care.	No

III. METHODOLOGY

01/29/2024	Special Investigation Intake 2024A1038025
01/29/2024	Comment- I was unable to contact Complainant.
02/01/2024	Contact - Face to Face interviews were conducted with DCSM Chasity Garno, DCSM Hanna Lynn and Autumn Bratcher.
02/01/2024	Special Investigation Initiated - Face to Face
02/05/2024	Contact - Face to Face interview was conducted with Resident A.
02/05/2024	Contact - Telephone call made to Executive Director Paula Cassidy.
02/05/2024	APS Referral was not complete due to there being no suspected abuse or neglect.
02/06/2024	Contact - Telephone call made to Hospice worker Shannon Compassus who stated I would have to contact her supervisor Kristy Burton.
02/06/2024	Contact - Telephone call made to Director of clinical services Kristy Burton.
02/07/2024	Exit conference- with Connie Clauson.

ALLEGATION:

A staff person was improperly handling resident funds.

INVESTIGATION:

On 1/29/24, I received a complaint from the Bureau of Community and Health Systems (BCHS) On-line Complaint system regarding the home. The complaint alleged home manager Chasity Garno was improperly handling residents funds.

On 2/1/24, I conducted an unannounced onsite investigation at the home and interviewed home manager Chasity Garno. Ms. Garno stated she does not handle any funds related to the home. Ms. Garno stated she gets signed checks from residents which is immediately documented and deposited by the homes corporate office. Ms. Garno stated the home does not have any resident's cash at the home as it is all handled by the residents or their Guardian's. Ms. Garno stated the corporate office keeps track of all the funds coming in and out of the facility.

On 2/1/24, I viewed the *Adult Foster Care Funds & Valuable part I and part II forms* which was documented appropriately with no discrepancies. Ms. Garno showed me the checks she receives from residents which are all pay to the order of the home.

On 2/1/24, I interviewed direct care staff (DCS) Hanna Lynn who stated she does not deal with resident funds. Ms. Lynn stated Ms. Garno and corporate office deal with all things related to money for the home. Ms. Lynn stated she has not heard of anyone having concerns for money being stolen at the home.

On 2/1/24, I interviewed direct care staff (DCS) Autumn Bratcher who stated she has worked at the home for nearly four months. Ms. Bratcher stated management handles all things related to money at the home. Ms. Bratcher stated she has not heard of any concerns regarding funds being stolen.

On 2/5/24, I interviewed executive director Paula Cassidy via telephone. Ms. Cassidy verified corporate office deals with all the money related to the home. Ms. Cassidy stated there is no resident cash maintained by the home. Ms. Cassidy stated Ms. Garno collects checks at the home which are paid to the order of the home. Ms. Cassidy stated she does not have any concerns at this time of money being stolen.

APPLICABLE RULE	
R 400.15315	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:	Based on my interviews with DCSM's and the executive director, there was no corroborating evidence showing Ms. Garno was taking resident funds. Review of <i>Adult Foster Care Funds & Valuable part I and part II forms</i> revealed Ms. Garno appeared to be handling the funds in the home appropriately.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Residents at the facility are not receiving proper personal care.

INVESTIGATION:

On 1/29/24, The complainant also alleged residents at the facility are not receiving proper personal care.

Ms. Garno stated the staff check on residents every two hours. Ms. Garno stated staff monitor and change residents' briefs before and after every meal. Ms. Garno stated they take resident hygiene very serious at the home. Ms. Garno stated the residents are often changed earlier than two hours due to some summing help by their call buttons. Ms. Garno stated the home maintains shower logs and skin assessment logs on every resident within the home. Ms. Garno stated the majority of their residents are on Hospice which comes to the home multiple times a week.

On 2/1/24, I reviewed the residents shower logs which documented all hygiene duties. The shower log verified all residents are being showered at least once a week and often more. The shower log also verified the resident's hygiene is being upkeep appropriately. *The Fully Body Skin Assessment Form* verified the residents are being checked daily for any new bruising or skins concerns. The form also documents Hospice findings as to keep track of any concerns noted by Hospice.

Ms. Lynn stated the staff members change and check on residents every two hours. Ms. Lynn stated she has clients who she likes to check more often due to them using the toilet more often. Ms. Lynn stated she has worked at the home for two years and it has been run with the same concepts of checking residents often. Ms. Lynn stated Hospice is in the home twice a week also checking and caring for residents. Ms. Lynn stated she has no concerns for the care provided by the home or how it is being run.

Ms. Bratcher stated she has worked at the home for nearly four months. Ms. Bratcher stated staff members check residents every two hours, before and after every meal to

ensure they are in great hygiene standards. Ms. Bratcher stated Residents are showered often in the home. Ms. Bratcher stated Hospice was often in the home caring for residents. Ms. Bratcher stated she feels the residents are receiving good personal care.

On 2/1/24, I interviewed Resident A at the home. Resident A stated she has no concerns with the care provided by staff. Resident A stated she gets showered every Sunday and Thursday. Resident A stated she is treated very well by all the staff members.

On 2/1/24, I interviewed Compassus Hospice director of clinical services Kristy Burton by telephone. Ms. Burton stated her staff were at the home between two and five days a week. Ms. Burton stated the staff check on every resident and have not reported any concerns for abuse or neglect within the home.

APPLICABLE RULE	
R 400.15303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	Interviews with DCSM's Resident A and Compassus Hospice director of clinical services, combined with document review reveals there was no corroborating evidence indicating staff members are not providing supervision, protection, and personal care to the residents. The staff at the home were tending to residents' personal care appropriately.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

I recommend the status of the license remain unchanged.

Johnnie Daniels

2/6/24

Johnnie Daniels
Licensing Consultant

Date

Approved By:

Russell Misiak

2/9/24

Russell B. Misiak
Area Manager

Date