



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

February 27, 2024

Anna-Lee Hendricks
Harmony Enterprises Inc
PO Box 118
Plainwell, MI 49080

RE: License #: AM390015877
Investigation #: 2024A0581018
Harmony Brook

Dear Anna-Lee Hendricks:

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 black ink that reads "Cathy Cushman". The signature is written in a cursive, flowing style.

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 615-5190

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM390015877
Investigation #:	2024A0581018
Complaint Receipt Date:	02/07/2024
Investigation Initiation Date:	02/07/2024
Report Due Date:	04/07/2024
Licensee Name:	Harmony Enterprises Inc
Licensee Address:	P.O. Box 118 10060 Riverview Drive Plainwell, MI 49080
Licensee Telephone #:	(269) 271-7462
Administrator:	Anna-Lee Hendricks
Licensee Designee:	Anna-Lee Hendricks
Name of Facility:	Harmony Brook
Facility Address:	10130 N. Riverview Drive Plainwell, MI 49080
Facility Telephone #:	(269) 343-8255
Original Issuance Date:	05/20/1994
License Status:	REGULAR
Effective Date:	10/05/2022
Expiration Date:	10/04/2024
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

	AGED
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II. ALLEGATION

	Violation Established?
Resident bedroom #6 isn't being maintained for the health of Resident A as mold is present.	Yes

III. METHODOLOGY

02/07/2024	Special Investigation Intake 2024A0581018
02/07/2024	Contact – Telephone call received Interview with Complainant
02/07/2024	Special Investigation Initiated - Telephone Interview with BFS inspector, Ken Howe
02/08/2024	APS Referral APS referral not necessary. No abuse or neglect of resident(s).
02/08/2024	Inspection Completed On-site Interview with staff and licensee designee. Observed facility.
02/08/2024	Contact - Telephone call made Contacted OnPointe RRO.
02/08/2024	Exit Conference with licensee designee, Anna Hendricks.
02/09/2024	Contact - Document Sent Emailed Ms. Kridler
02/09/2024	Inspection Completed-BCAL Sub. Compliance
02/14/2024	Contact - Document Received Received licensee's mold remediation policy and lab report.
02/23/2024	Contact – Document Received Email from licensee designee containing Restoration 1 contract.

ALLEGATION:

Resident bedroom #6 isn't being maintained for the health of Resident A as mold is present.

INVESTIGATION: On 02/07/2024, Complainant contacted me and reported Bureau of Fire Services (BFS) conducted an annual inspection of the facility and had concerns mold was present in bedroom #6.

On 02/07/2024, I interviewed BFS inspector, Ken Howe, via telephone. Mr. Howe stated he'd conducted his annual inspection at the facility that day and observed mold or mildew in resident bedroom #6. He stated staff were with him during the inspection and they were also surprised by the condition of Resident A's bedroom. Mr. Howe stated staff reported to him they were not aware Resident A's bedroom was in the condition it was because Resident A had not reported to them any concerns. Mr. Howe stated he took pictures of the room and sent them via text for my review.

Mr. Howe sent me three pictures of bedroom #6. The first picture showed a corner of Resident A's bedroom where his bed and dresser were located. I observed a black unknown substance covering an approximate one square foot section of the ceiling, but also covering an approximate six by five square foot area of the wall behind Resident A's bed. There were five additional one square foot sections of black areas above his dresser, along the wall and right beneath the ceiling.

The second picture showed the wall with Resident A's window and window coverings. In this picture there was a black substance covering an approximate one foot by four foot section above the window beneath the ceiling. There was a separate one square foot section of black substance in the left corner right beneath the ceiling.

The third picture showed Resident A's bedroom door with the number 6 on it. The picture showed the black substance covering the corner above Resident A's bed and dresser.

On 02/08/2024, the licensee designee, Anna-Lee Hendricks, contacted me via telephone while I was en-route to the facility for an unannounced investigation. Ms. Hendricks stated after BFS' inspection on 02/07/2024, she contacted the company, Mold Scope to obtain a professional opinion regarding the substance on the walls in Resident Bedroom #6. Ms. Hendricks stated Mold Scope just completed an inspection at the facility that morning. She stated despite staff cleaning most of the substance off the walls and ceiling after BFS' inspection, Mold Scope was able to obtain samples of the substance and send it out for testing. She stated the test results should be received by 02/13/2024. Ms. Hendricks stated based on the results of the tests, Mold Scope may contract with another company to perform the cleanup in the facility.

Ms. Hendricks stated Resident A had resided in bedroom 6 for approximately two years. She stated he did not report to any staff regarding the condition of the room. She stated Resident A is “gone a lot” and isn’t in his room much. She stated because Resident A doesn’t require much, if any, assistance with his activities of daily living, staff are not in his room. Ms. Hendricks stated Resident A did not appear to be experiencing any breathing issues, but she stated she would request he see a doctor to have him checked out. She also stated Resident A and all his belongings had been moved into another private bedroom. Ms. Hendricks stated none of the other residents complained of any issues relating to any unknown substances on their walls or within the facility.

Ms. Hendricks stated there was some flashing on the outside of the facility that was missing after blowing off when it was particularly windy. She stated the missing flashing could have contributed to possible water damage within the walls of bedroom 6. Ms. Hendricks stated the black substance was not observed in any of the other resident bedrooms or common areas. She also stated none of the other residents complained of any issues within their rooms or within the house.

Shortly after interviewing Ms. Hendricks, I conducted my inspection at the facility. I went through each room on the facility’s main floor and second floor. All the facility’s rooms were clear of any mold type substances except bedroom 6. Though staff had cleaned the room, there continued to a substance in the corner near the ceiling above the area where Resident A’s bed had been. An approximate two foot by two foot section of the wall and ceiling was covered in a brown/yellowish substance. There were also splatters of the same substance above the window in bedroom 6. I also observed the inside windowsill trim covered in a black substance. Sections of the wood trim appeared rotted, and water damaged. I observed bedroom 6 clear of all Resident A’s belongings except an empty dresser remained. Ms. Hendricks took me outside the facility and showed me the missing flashing above bedroom 6’s window.

I was unable to interview Resident A during the inspection because he was out in the community.

I interviewed direct care staff, Melissa Wingler, who stated she’s worked in the facility for approximately two years. Her statement to me regarding staff not going into Resident A’s bedroom and Resident A not complaining of any issues within in his room was consistent with Ms. Hendricks ’s statement to me. Ms. Wingler stated she was in Resident A’s bedroom approximately two weeks ago to change the batteries in his thermostat. She stated at that time she did not observe any substances, including black mold or mildew, on Resident A’s walls.

Both Ms. Wingler and Ms. Hendricks stated the recent weather changes caused melting snow and increased temperatures may have contributed to the substance on the walls in bedroom 6.

Ms. Hendricks stated since the discovery of bedroom 6 she has requested all staff make it part of their daily routine to check every resident bedroom on 1st shift for potential hazards and cleanliness, which she stated was documented in the resident logbook. Ms. Hendricks also stated she placed a dehumidifier in the hallway near bedroom 6 to pull the extra moisture out of the air. I reviewed the facility's logbook, which confirmed Ms. Hendricks 's instructions. Ms. Hendricks also stated she planned to purchase new windows for the facility in the upcoming year.

Ms. Hendricks also provided confirmation Mold Scope Testing LLC conducted their inspection that day. According to my review of the "Mold Sampling Agreement", Mold Scope swapped two surface samples, obtained two air samples, conducted a visual inspection, provided remediation protocol, and would provide a lab report of the findings.

On 02/14/2024, Ms. Hendricks documented in an email to me she contacted the company, Restoration 1, who was recommended by Mold Scope, to remediate the mold issue in bedroom 6. Ms. Hendricks submitted the mold remediation protocol provided by Mold Scope, dated 02/08/2024. According to this protocol, the findings and observations documented the following:

- Bedroom showed signs of water damage around the window and drywall and a spore trap was collected and sent into a third-party accredited laboratory.
- The damage is believed to be caused by a roof/gutter leak which may have yet been repaired upon inspection.
- 2 air samples were collected by Mold Scope Testing and were analyzed by IMS Laboratory, a third-party accredited laboratory.
- The air sample collected in the bedroom indicated elevated levels of microbial growth which is considered Abnormal Fungal Ecology (Condition 2). Settled spores.
- The swab collected indicates elevated levels of multiple spores classified in lab report considered Abnormal Fungal Ecology (Condition 3). Settled spores.

Mold Scope's remediation protocol documented professional mold remediation and post remediation verification as recommended due to the abnormal fungal ecologies (Condition 2 and 3) being discovered in the bedroom. The conclusion of Mold Scope's protocol documented the careful removal of water-damaged materials under containment to prevent cross-contamination during selective demolition and cleaning.

Ms. Hendricks also submitted the IMS Laboratory Report, dated 02/12/2024, which confirmed the information provided in Mold Scope's Mold Remediation Protocol.

On 02/23/2024, Ms. Hendricks submitted a copy of Restoration 1's estimate to me. She documented in her email to me she accepted their estimate and proposal and was awaiting to schedule the restoration, service, and remodel.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	<p>Based on my investigation, Resident Bedroom 6 in the facility had the presence of mold when the Bureau of Fire Services (BFS) conducted an annual inspection on 02/07/2024 and when Mold Scopes completed an inspection on 02/08/2024. The presence of mold was confirmed via a laboratory report, dated 02/12/2024, after surface and air samples were submitted on behalf of Mold Scope to a third party accredited company.</p> <p>Though the licensee has sought professional assistance with the mold remediation, nevertheless, Resident Bedroom 6 had extensive mold on the walls, ceiling, and the inside windowsill trim while Resident A was residing in the bedroom. Consequently, Resident Bedroom 6 was not maintained to provide for the health and safety of Resident A while he was residing in the bedroom, as required.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On 02/08/2024, I conducted the exit conference with the licensee designee, Anna Hendricks, in person at the facility. Ms. Hendricks acknowledged my findings and recommendation. She stated she was committed to addressing the mold and following the recommendations of Mold Scope.

IV. RECOMMENDATION

Upon receipt of an acceptable plan of correction, I recommend no change in the current license status.

Cathy Cushman

02/26/2024

Cathy Cushman
Licensing Consultant

Date

Approved By:

Dawn Timm

02/27/2024

Dawn N. Timm
Area Manager

Date