GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

November 27, 2023

Vicky Cates
3960 Sharp Rd.
Adrian, MI 49256

RE: License #: AM460095319
Investigation #: 2024A1032007
New Beginnings AFC

Dear Vicky Cates:

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.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0183.

Sincerely,

Dwight Forde, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa, N.W. Unit 13, 7th Floor
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 #:	AM460095319
Investigation #:	2024A1032007
Complaint Receipt Date:	11/03/2023
Investigation Initiation Date:	11/03/2023
Report Due Date:	01/02/2024
Licensee Name:	Vicky Cates
Licensee Address:	3960 Sharp Rd. Adrian, MI 49256
Licensee Telephone #:	(517) 902-3950
Licensee Designee:	Lela Shank/Vicky Cates
Name of Facility:	New Beginnings AFC
Facility Address:	211 E. Main Street Morenci, MI 49256
Facility Telephone #:	(517) 458-6926
Original Issuance Date:	05/24/2001
License Status:	REGULAR
Effective Date:	03/21/2022
Expiration Date:	03/20/2024
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Residents are treated like they are children.	No
Resident A was not receiving her medications.	No
Additional Findings	Yes

III. METHODOLOGY

11/03/2023	Special Investigation Intake 2024A1032007
11/03/2023	Special Investigation Initiated - On Site
11/14/2023	Exit Conference
11/17/2023	Contact - Telephone call made I left a voicemail for the complainant.

ALLEGATION:

Residents are treated like they are children.

INVESTIGATION:

I received this complaint as an Adult Protective Services (APS) screen out.

On 11/3/23, I interviewed employee Nina Mitchell in the home. Ms. Mitchell stated that the residents were somewhat frustrated that the Wi-Fi password had been changed, and that only the television has the code.

I interviewed Resident B in the home. Resident B expressed some irritation that the Wi-Fi password had been changed, but denied feeling disrespected by the new management or the employees. Resident B denied that residents are made to watch children's programming.

I interviewed Resident C in the home. Resident C stated that he likes the home but bemoaned the loss of Wi-Fi access.

APPLICABLE RULE	
R 400.14305	**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:	Based on interviews conducted, it does not appear that residents are being mistreated. Residents did express displeasure about not having access to the WIFI connection.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ALLEGATION:

Resident A was not receiving her medications.

INVESTIGATION:

On 11/3/23, Ms. Mitchell stated that she was trained to pass medication, and demonstrated an understanding by reciting the five R's. She denied that Resident A was not receiving her scheduled medications. She stated that she was recently hired at the home and mentioned being aware that there was a transition from pharmacies, since the incoming licensee designee had switched pharmacies.

I observed Resident A's medication administration record. The record reflected that two medications listed in the complaint (Klonopin and Flexeril) were as needed, not scheduled, therefore she would not be receiving them daily.

I interviewed Resident A in the home. Resident A stated that she was not feeling well but was working with the home and the case manager to resolve her medication problems.

I interviewed Lenawee Community Health Authority case manager Alex Barich in the home. Mr. Barich had been on a phone call with Resident A's doctor's office clarifying which medications were current, and which ones were discontinued. There was an apparent discrepancy with one of Resident A's medications, which on the phone call, had been discontinued, but which was still part of Resident A's medication regimen on the MAR.

APPLICABLE RULE	
R 400.14312	**Resident medications**
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
ANALYSIS:	I was able to observe Resident A's medication administration record. The document reflected that the medications specified in the complaint were as needed, and not scheduled medications.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION:

On 11/3/23, Ms. Mitchell provided access to the medication box. I observed pre-popped medications outside of the original packaging.

APPLICABLE RULE	
R 400.14312	**Resident medications.**
	Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.
ANALYSIS:	I observed that resident medications were not contained in their original packaging.
CONCLUSION:	**VIOLATION ESTABLISHED**

On 11/14/23, I conducted an exit conference with licensee designee Lela Shank. I shared my findings and Ms. Shank agreed to provide an acceptable corrective action plan.

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no change to the status of this license.

11/27/23

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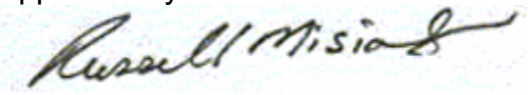
Dwight Forde Date
Licensing Consultant

Approved By:



12/5/23

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Russell B. Misiak Date
Area Manager