

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

August 13, 2024

Katlyne Forquer-Friar 4028 S Dickerson Rd LAKE CITY, MI 49651

RE: License #:	AS570417969
Investigation #:	2024A0870035
-	Mama T's AFC

Dear Katlyne Forquer-Friar:

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 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 (231) 922-5309.

Sincerely,

Brene O Masin

Bruce A. Messer, Licensing Consultant Bureau of Community and Health Systems Suite 11 701 S. Elmwood Traverse City, MI 49684 (231) 342-4939

enclosure

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

### I. IDENTIFYING INFORMATION

<b>1</b> • • • • • • <b>#</b>	40570447000
License #:	AS570417969
Investigation #:	2024A0870035
Complaint Receipt Date:	08/07/2024
Investigation Initiation Data:	00/00/2024
Investigation Initiation Date:	08/08/2024
Report Due Date:	09/06/2024
Licensee Name:	Katlyne Forquer-Friar
Licensee Address:	4028 S Dickerson Rd
LICENSEE AUUIESS.	
	LAKE CITY, MI 49651
Licensee Telephone #:	(984) 202-1150
Name of Facility:	Mama T's AFC
Eacility Address	4024 S Dickerson Rd
Facility Address:	-
	Lake City, MI 49651
Facility Telephone #:	(231) 942-2147
Original Issuance Date:	02/16/2024
License Status:	REGULAR
Effective Date:	08/16/2024
Expiration Date:	08/15/2026
Capacity:	4
Program Type:	PHYSICALLY HANDICAPPED
	DEVELOPMENTALLY DISABLED
	MENTALLY ILL
	AGED
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## II. ALLEGATION(S)

	Violation Established?
Staff are inadequately trained to handle the residents that live in the facility.	Yes
Staff have not been tested for communicable tuberculosis.	Yes
Staff have not been given a job description.	Yes

## III. METHODOLOGY

08/07/2024	Special Investigation Intake 2024A0870035
08/08/2024	Special Investigation Initiated - Telephone Telephone interview with Complainant.
08/09/2024	Inspection Completed On-site Interview with Licensee Katlyne Forquer-Friar.
08/09/2024	Inspection Completed-BCAL Sub. Compliance
08/09/2024	Exit Conference Completed with Licensee Katlyne Forquer-Friar.

# ALLEGATION: Staff are inadequately trained to handle the residents that live in the facility.

**INVESTIGATION:** On August 8, 2024, I spoke with Complainant-1 via telephone to clarify issues alleged in her complaint. Complainant-1 stated that she recently began working at the Mama T's AFC home and was assigned an overnight shift "with absolutely no training." Complainant-1 further stated that she did work with another staff on that shift, but the other staff member "Sally", also was "new and not trained."

On August 9, 2024, I conducted an unannounced on-site special investigation at the Mama T's AFC home. I met with Licensee Designee Katlyne Forquer-Friar and informed her of the above stated allegation. Ms. Forquer-Friar provided me with a copy of the staff work schedule. I noted that Complainant-1 and staff member Sally Mishler had worked two overnights shifts together the first week of August 2024. Ms. Forquer-Friar confirmed that no other staff worked with these two staff members at those times. I reviewed both Complainant-1 and Ms. Mishler's employee records.

Neither had any training records on file. Ms. Forquer-Friar stated that both are scheduled to receive the required trainings during the coming month but had not yet been fully trained.

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	<ul> <li>(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas: <ul> <li>(a) Reporting requirements.</li> <li>(b) First aid.</li> <li>(c) Cardiopulmonary resuscitation.</li> <li>(d) Personal care, supervision, and protection.</li> <li>(e) Resident rights.</li> <li>(f) Safety and fire prevention.</li> <li>(g) Prevention and containment of communicable diseases.</li> </ul> </li> </ul>
ANALYSIS:	Two staff member files reviewed do not contain documentation that they have received required trainings and are competent in the areas listed by the above rule. In addition, the Licensee Designee acknowledged that these two staff members worked in the home prior to being fully trained without a fully trained staff member working with them.
CONCLUSION:	VIOLATION ESTABLISHED

## ALLEGATION: Staff have not been tested for communicable tuberculosis.

**INVESTIGATION:** Complainant-1 noted that she has not had a TB test prior to beginning her employment at the facility.

A review of staff member Complainant-1's employee record does not contain written evidence that she has been tested for communicable tuberculosis.

Ms. Forquer-Friar stated she believes this staff member had informed her that she had been previously tested for TB. She did not have an explanation as to why verification of a negative TB test was not on file in the home.

APPLICABLE RULE	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.
ANALYSIS:	The Licensee failed to obtain written evidence that a staff member had been tested for communicable tuberculosis.
CONCLUSION:	VIOLATION ESTABLISHED

## ALLEGATION: Staff have not been given a job description.

**INVESTIGATION:** Complainant-1 noted that she has never received a job description.

A review of Complainant-1's employee record does not contain verification that staff member, Complainant-1, has received a copy of her job description.

Ms. Forquer-Friar did not offer an explanation as to why this staff member did not have verification on file that she had received a copy of her job description.

APPLICABLE R	ULE
R 400.14207	Required personnel policies.
	(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record.

ANALYSIS:	The licensee failed to maintain verification that a staff member received a copy of her job description.
CONCLUSION:	VIOLATION ESTABLISHED

On August 9, 2024, I provided Licensee Katlyne Forquer-Friar with an exit conference. I explained my findings as noted above. Ms. Forquer-Friar stated that she understands the findings and that she has no further information to provide, or questions to ask, concerning this special investigation. She noted she would submit a corrective action plan which addresses the cited areas of noncompliance within 15 days of this report.

I provided Ms. Forquer-Friar with technical assistance and consultation while on site regarding improving "on-boarding" processes for staff and maintenance of staff files and records.

### IV. RECOMMENDATION

I recommend, contingent upon the submission of an acceptable corrective action plan, that the status of the license remain unchanged.

Shere Of Sara August 13, 2024

Bruce A. Messer Licensing Consultant Date

Approved By: Handh

August 13, 2024

Jerry Hendrick Area Manager Date