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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

September 4, 2024

Delissa Payne Spectrum Community Services Suite 700 185 E. Main St Benton Harbor, MI 49022

> RE: License #: AS410357190 Investigation #: 2024A0467053 Springmont Home

Dear Mrs. Payne:

Attached is the Special Investigation Report for the above referenced facility. Due to the violation 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 the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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 (616) 356-0183.

Sincerely,

Anthony Mullins, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor

350 Ottawa, N.W.

Grand Rapids, MI 49503

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enclosure

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

#### I. IDENTIFYING INFORMATION

License #:	AS410357190
Investigation #:	2024A0467053
Complaint Receipt Date:	08/01/2024
Investigation Initiation Date:	08/01/2024
Report Due Date:	09/30/2024
Licensee Name:	Spectrum Community Services
Licensee Address:	Suite 700 185 E. Main St
	Benton Harbor, MI 49022
Licensee Telephone #:	(231) 887-4130
Administrator:	Delissa Payne
Licensee Designee:	Delissa Payne
Name of Facility:	Springmont Home
Facility Address:	4623 Springmont Drive SE Kentwood, MI 49508
	Tentwood, Wii 40000
Facility Telephone #:	(616) 803-0885
Original Issuance Date:	03/12/2014
	00/12/2011
License Status:	REGULAR
Effective Date:	09/12/2024
Expiration Date:	09/11/2026
Capacity:	6
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Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

#### II. ALLEGATION(S)

Violation Established?

Staff member Bonvery Tabala left residents unsupervised at the	Yes
home on two separate occasions.	

#### III. METHODOLOGY

08/01/2024	Special Investigation Intake 2024A0467053
08/01/2024	Special Investigation Initiated - Telephone
08/01/2024	Contact - Document Received Company vehicle records received from Associate Director, Jordan Walch
08/20/2024	Inspection Completed On-site
08/20/2024	Inspection Completed-BCAL Sub. Compliance
08/28/2024	APS Referral
09/04/2024	Exit conference with licensee designee, Delissa Payne

### ALLEGATION: Staff member Bonvery Tabala left residents unsupervised at the home on two separate occasions.

**INVESTIGATION:** On 8/1/24, I received a complaint via phone from the Associate Director, Jordan Walch. Mrs. Walch informed me that staff member, Bonvery Tabala left the residents unattended on two separate occasions during 3<sup>rd</sup> shift while using the company vehicle. As a result of his actions, Mrs. Walch has submitted a termination request to the company's Human Resource Department. Mrs. Walch agreed to send me documentation to support Mr. Tabala leaving the home unattended.

On 8/1/24, I received an email from Mrs. Walch. The email included vehicle records from 7/25/24 – 7/26/24, and 7/30/24. Per the vehicle records, Mr. Tabala left the home on 7/25/24 at 11:44 pm and made one stop prior returning to the home on 7/26/24 at 12:02 am. On 7/30/24, Mr. Tabala left the home at 12:33 am and returned 3 minutes later at 12:36 am. On the same morning, he left the home at 2:00 am and made one stop prior to returning to the home at 3:12 am.

On 8/20/24, I made an announced onsite investigation at the facility. Upon arrival, I spoke to staff member, Jill Tollar regarding the allegation. Ms. Tollar confirmed that staff member Bonvery Tabala left residents unsupervised in the home on different occasions. Ms. Tollar was unable to recall the specific dates but shared that she

noticed a gap in the mileage on the company vehicle and reported it to management. Ms. Tollar did not believe that residents were aware that they were in the home alone for any period of time. To Ms. Tollar's knowledge, Mr. Tabala has been terminated.

Mr. Tabala was not interviewed due to being terminated prior to the conclusion of the investigation.

On 09/04/24, I conducted an exit conference with licensee designee, Delissa Payne. She was informed of the investigative findings and confirmed that Mr. Tabala has been terminated. Mrs. Payne agreed to submit a CAP within 15 days of receipt of this report.

APPLICABLE RULE		
R 400.14206	Staffing requirements.	
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.	
ANALYSIS:	Per vehicle record reports, Mr. Tabala left the residents unsupervised in the home on two different occasions between 7/25 and 7/30. Therefore, there is a preponderance of evidence to support the allegation.	
CONCLUSION:	VIOLATION ESTABLISHED	

#### IV. RECOMMENDATION

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

arthony Mullin	09/04/2024
Anthony Mullins, Licensing Consu	Itant Date
Approved By:	
	09/04/2024
Jerry Hendrick, Area Manager	Date