

GRETCHEN WHITMER
GOVERNOR

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

MARLON I. BROWN, DPA DIRECTOR

October 7, 2024

Nichole VanNiman
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AS390406167 Investigation #: 2024A1024050

Beacon Home at Interlochen

#### Dear Nichole VanNiman:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On September 10, 2024, you submitted an acceptable written corrective action plan.

It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan.

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,

Ondrea Johnson, Licensing Consultant Bureau of Community and Health Systems

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enclosure

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

## THIS REPORT CONTAINS QUOTED PROFANITY

## I. IDENTIFYING INFORMATION

License #:	AS390406167
	200414004050
Investigation #:	2024A1024050
Complaint Receipt Date:	08/16/2024
Complaint Rossipt Bate.	00/10/2021
Investigation Initiation Date:	08/20/2024
Report Due Date:	10/15/2024
Licensee Name:	Pageon Charielized Living Carvings Inc
Licensee Name.	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110
	890 N. 10th St.
	Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
Administrator:	Kimborly Howard
Administrator:	Kimberly Howard
Licensee Designee:	Nichole VanNiman
Name of Facility:	Beacon Home at Interlochen
Facility Address:	8038 Interlochen St.
	Kalamazoo, MI 49009
Facility Telephone #:	(269) 353-6941
r domity receptions in	(255) 555 5511
Original Issuance Date:	06/21/2021
License Status:	REGULAR
Effective Date:	12/21/2023
Effective Date:	12/21/2023
Expiration Date:	12/20/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

## II. ALLEGATION(S)

## Violation Established?

Staff member Chassin Swarn cursed at Resident A and stated that	No
he was going to beat him up.	
Additional Findings	Yes

## III. METHODOLOGY

08/16/2024	Special Investigation Intake 2024A1024050
08/20/2024	Special Investigation Initiated – Telephone with Recipient Rights Officer (ORR) Suzie Suchyta
08/21/2024	APS Referral not warranted
08/21/2024	Contact - Telephone call made with administrator Kimberly Howard
08/21/2024	Contact - Telephone call made with direct care staff member Chassin
08/26/2024	Contact - Telephone call made with direct care staff member Belinda Cardaci
08/26/2024	Inspection Completed On-site with direct care staff Shakeelah Griffis, Resident A, B, C
09/03/2024	Exit Conference with licensee designee Nichole VanNiman
09/03/2024	Inspection Completed-BCAL Sub. Compliance
09/03/2024	Corrective Action Plan Requested and Due on 9/18/2024
09/10/2024	Corrective Action Plan Received
09/10/2024	Corrective Action Plan Approved

## ALLEGATION: Staff member Chassin Swarn cursed at Resident A and stated that he was going to beat him up.

#### **INVESTIGATION:**

On 8/16/2024, I received this complaint through the Bureau of Community and Health Systems (BCH) online complaint system. This complaint alleged direct care staff member Chassin Swarn cursed at Resident A and stated that he was going to beat him up. This complaint further stated staff member Belinda Cardaci heard Chassin Swarn make this statement.

On 8/20/2024, I conducted an interview with Recipient Rights Officer (RRO) Suzie Suchyta who stated that she is also investigating this allegation and stated that it was also reported to her office that staff member Belinda Cardaci heard Chassin Swarn swear at Resident A and told him to "shut up the hell up."

On 8/21/2024, I conducted an interview with administrator Kimberly Howard who stated that she has not observed Chassin Swarn mistreat any of the residents and Chassin Swarn denied this allegation however he has been suspended pending RRO investigation.

On 8/21/2024, I conducted an interview with direct care staff member Chassin Swarn who denied this allegation and stated that Resident A called the Office of Recipient Rights and made a false accusation against him because Resident A became upset with him regarding Resident A's chore chart system. Chassin Swarn stated Resident A did not complete one of his chores during the week and when they discussed his chore chart Resident A became upset when he found out he was missing points for not completing all his chores. Chassin Swarn stated Resident A informed him that he was going to contact the Office of Recipient Rights and made threats towards him. Chassin Swarn stated he did not mistreat Resident A in any way, and he never threatened him or told him to "shut up." Chassin Swarn stated he works on the overnight shift and has very little interaction with the residents because they are sleeping. Chassin Swarn further stated he believes he is being targeted by Resident A because Resident A is upset with him.

On 8/26/2024, I conducted an interview with direct care staff member Belinda Cardaci who stated that she has not observed Chassin Swarn mistreat Resident A and believes this complaint is coming from another resident who likes to "stir up trouble." Belinda Cardaci stated Resident B told Resident A that he heard Chassin Swarn say that he was going to "put [Resident A] in a chokehold" therefore Resident A called the Office of Recipient Rights however she believes this is hearsay as no one else heard Chassin Swarn make this statement besides Resident B. Belinda Cardaci stated she did witness Chassin Swarn and Resident A discussing the complaint that was made to the Office of Recipient Rights at which time Chassin Swarn called Resident A "a liar" for making a false complaint against him however she has never heard him swear at Resident A or tell Resident A to "shut up."

On 8/26/2024, I conducted an onsite investigation at the facility with direct care staff member Shakeelah Griffis who stated that she has no knowledge of Chassin Swarn mistreating Resident A however has heard Resident A complain that he does not like Chassin Swarn with no additional details. Shakeelah Griffis further stated she has not heard any other complaints regarding Chassin Swarn from any other residents.

While at the facility I also conducted interviews with Residents A, B, and C. Resident A stated another resident told him that Chassin Swarn went into his bedroom to look for something that was stolen from another resident therefore he called the Office of Recipient Rights because he did not want Chassin Swarn in his bedroom. Resident A stated Chassin Swarn denied going into his bedroom and he has no evidence that Chassin Swarn actually went into his bedroom. Resident A stated he does not like Chassin Swarn because he is not nice however denied that Chassin Swarn has ever sworn at him, made any threats towards him or tell him to "shut up." Resident A stated Chassin Swarn is not nice because he allegedly went into his bedroom without permission.

Resident B stated he overheard Chassin Swarn state "under his breath that he was going to put Resident A in a chokehold" however Resident A was in his bedroom when this statement was made so no one else heard this statement. Resident B stated he told Resident A what Chassin Swarn said about him therefore Resident A made a complaint to the Office of Recipient Rights. Resident B stated he has not heard Chassin Swarn swear or make any other rude statements to any residents.

Resident C stated he has not seen Chassin Swarn mistreat Resident A or any other resident and has not heard any complaints made by anyone.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.

ANALYSIS:	Based on my investigation which included interviews with Recipient Rights Officer (ORR) Suzie Suchyta, administrator Kimberly Howard, direct care staff members Chassin Swarn, Belinda Cardaci, and Residents A, B and C there is no evidence to support the allegation staff member Chassin Swarn cursed at Resident A or threatened physical harm toward Resident A. Kimberly Howard and Belinda Cardaci both stated they have not witnessed Chassin Swarn mistreat Resident A. Chassin Swarn also denies this allegation and stated that he believes he is being targeted because Resident A is upset with him and therefore made a false complaint against him. Resident A denied that Chassin Swarn has ever cursed at him, made any threats to him or told him to "shut up". Resident C also stated he has not seen or heard any complaints made regarding Chassin Swarn mistreating Resident A.
CONCLUSION:	VIOLATION NOT ESTABLISHED

### **ADDITIONAL FINDINGS:**

### **INVESTIGATION:**

While at the facility, I observed two dumpster bin containers with an overflow of garbage that did not have a closed tight-fitting lid.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.
ANALYSIS:	While at the facility, I observed two dumpster bins with an overflow of garbage with lid that was not closed and tight fitting.
CONCLUSION:	VIOLATION ESTABLISHED

On 9/03/2024, I conducted an exit conference with licensee designee Nichole VanNiman. I informed Nichole VanNiman of my findings and allowed her an opportunity to ask questions and make comments.

On 9/10/2024, I received and approved an acceptable corrective action plan.

## IV. RECOMMENDATION

An acceptable corrective action plan was received therefore I recommend the current license status remain unchanged.

Ondrea Johnson	10/07/2024
Ondrea Johnson	Date
Licensing Consultant	

Approved By:

Dawn N. Timm Date Area Manager