



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 7, 2024

Alan Pumford
Meiser AFC Home Inc
4764 West Burt Road
Montrose, MI 48457

RE: License #: AL730007419
Investigation #: 2024A0576054
Meiser AFC Home

Dear Alan Pumford:

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.
- Be signed and dated.

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) 643-7960.

Sincerely,

A handwritten signature in cursive script, appearing to read "C. Garza".

Christina Garza, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 240-2478

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL730007419
Investigation #:	2024A0576054
Complaint Receipt Date:	09/11/2024
Investigation Initiation Date:	09/13/2024
Report Due Date:	11/10/2024
Licensee Name:	Meiser AFC Home Inc
Licensee Address:	4764 West Burt Road, Montrose, MI 48457
Licensee Telephone #:	(989) 770-4650
Administrator:	Alan Pumford
Licensee Designee:	Alan Pumford
Name of Facility:	Meiser AFC Home
Facility Address:	4764 West Burt Road, Montrose, MI 48457
Facility Telephone #:	(989) 770-4650
Original Issuance Date:	01/17/1992
License Status:	REGULAR
Effective Date:	03/27/2024
Expiration Date:	03/26/2026
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A was served a sandwich with moldy bread.	Yes
Resident A smells and appears unbathed.	No

III. METHODOLOGY

09/11/2024	Special Investigation Intake 2024A0576054
09/11/2024	APS Referral
09/13/2024	Special Investigation Initiated - Letter Sent email to Rebecca Robelin, Saginaw County Adult Protective Services (APS)
09/13/2024	Contact - Document Received Received email from Rebecca Robelin
10/24/2024	Contact - Face to Face Interviewed Community Ties South Director, Charlotte Fondern and Staff Rochelle Womack
10/24/2024	Inspection Completed On-site Interviewed Staff, Licensee Designee, Alan Pumford, Resident B, Resident C, and Resident D
10/24/2024	Contact - Face to Face Interviewed Staff, Sally O'Connor
11/04/2024	Contact - Telephone call made Left message for Veronica Albin, Case Manager
11/05/2024	Contact - Telephone call received Interviewed Veronica Albin
11/07/2024	Exit Conference

ALLEGATION:

Resident A was served a sandwich with moldy bread.

INVESTIGATION:

On October 24, 2024, I interviewed Rochelle Womack, Mental Health Activity Aide at CTS. Aide Womack reported Resident A came to program and was preparing to eat his lunch. Aide Womack was assisting and viewed Resident A's sandwich. The sandwich had bread that was moldy. Resident A did not eat the sandwich, and it was discarded.

On October 24, 2024, I conducted an unannounced on-site inspection at Meiser AFC Home and interviewed Staff, Sally O'Connor. Staff O'Connor that she was told Resident A was provided a sandwich that had mold bread. Staff O'Connor did not know how staff missed that. Staff O'Connor reported the facility buys bread from Walmart, and they buy several loaves at a time due to the large number of residents who reside at the home. Sometimes the bread is frozen, so it does not spoil. Due to this incident, Staff are being more vigilant with respect to resident lunches.

While at home on October 24, 2024, I viewed the facility's food supply. The food appeared fine with no concerns noted. I viewed a couple loaves of bread in the kitchen and it did not appear old or spoiled. There were several loaves of bread in the freezer. The "best by" date had not been surpassed on any of the loaves of bread.

On October 24, 2024, I interviewed Licensee Designee, Alan Pumford who reported he does not know how Resident A took a sandwich to program with moldy bread. Licensee Designee reported staff are being more careful when preparing resident meals.

On October 24, 2024, I viewed a document entitled *Staff Action Regarding Alleged Abuse/Neglect/Exploitation* dated for August 9, 2024, and authored by Candace Hubble. The document indicated that when Staff Hubble "got Resident A's sandwich out for lunch, there was a quarter size mold spot on it."

On November 4, 2024, I conducted an exit conference with Licensee Designee, Alan Pumford. I advised Licensee Pumford I would be requesting a corrective action plan for the cited rule violation. Licensee Designee Pumford explained that staff are being vigilant with staff lunches to ensure food is free from spoilage.

APPLICABLE RULE	
R 400.15402	Food service.
	(1) All food shall be from sources that are approved or considered satisfactory by the department and shall be safe for human consumption, clean, wholesome and free from spoilage, adulteration, and misbranding.

ANALYSIS:	<p>It was alleged that Resident A's lunch included a sandwich with mold on the bread. Upon conclusion of investigative interviews and a review of documentation, there is a preponderance of evidence to conclude a rule violation.</p> <p>Mental Health Aide, Rochelle Womack was interviewed and reported that she was assisting with Resident A's lunch. Aide Womack viewed Resident A's sandwich, and it had mold on the bread. I viewed a document entitled <i>Staff Action Regarding Alleged Abuse/Neglect/Exploitation</i> dated for August 9, 2024, and authored by Candace Hubble. The document indicated that when Staff Hubble "got Resident A's sandwich out for lunch, there was a quarter size mold spot on it."</p> <p>There is a preponderance of evidence to conclude that resident food was not safe for consumption and free from spoilage.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident A smells and appears unbathed.

INVESTIGATION:

On September 13, 2024, I sent an email to Rebecca Robelin, Saginaw County Adult Protective services (APS) Investigator. Investigator Robelin confirmed she is investigating this matter involving Resident A. Investigator Robelin had no concerns regarding Resident A being odorous or dirty.

On October 24, 2024, I interviewed Charlotte Fondern, Director from Community Ties South (CTS) where Resident A attends day programming during the week. Director Fondern reported Resident A is an older gentleman and blind. Resident A is observed to be in wrinkled clothes and sometimes dribbles food on himself as Resident A is blind. Director Fondern has never found Resident A to be odorous. Resident A is a smoker and there are times he may smell of smoke.

On October 24, 2024, I interviewed Rochelle Womack, Mental Health Activity Aide at CTS. Aide Womack reported there was an occasion in September 2024 when Resident A smelled of urine. Resident A sometimes wears the same clothing during the week and Resident A could be refusing to change his clothing as Resident A will stand firm when does not want to do something. Currently, Resident A is in the hospital due to an infection.

On October 24, 2024, I conducted an unannounced on-site inspection at Meiser AFC Home and interviewed Staff, Sally O'Connor who reported she works part time. Staff O'Connor denied the allegations and advised staff wash resident clothing and bedding daily. Staff O'Connor reported that residents shower at least every other day and she showed me a chart the facility utilizes to indicate when residents shower. It appears residents are expected to shower every other day. According to the chart, 10 residents shower on odd days and the other 10 residents shower on even days. Regarding Resident A, he is currently in the hospital. Resident A showers often and staff will prompt him to change his clothing.

On October 24, 2024, I interviewed Licensee Designee, Alan Pumford who reported Resident A is in the hospital and not doing too well. Resident A is 86 years old and has Chronic Obstructive Pulmonary Disease (COPD). When Resident A is ready from discharge from the hospital it is likely he will go to a nursing home and not return to the AFC home. Resident A has lived at his home since 1971 and has no guardian. Regarding the allegations, Licensee Designee Pumford reported Resident A's clothes are washed daily he is compliant with showering. Licensee Designee Pumford denied that Resident A is odorous, or he leaves the home unclean.

On October 24, 2024, I interviewed Resident B who was eating lunch upon my arrival to the home. Resident B reported he has lived at his home for 10 months and it is "okay". Resident B has clean clothes to wear every day, and he always has clean clothes to wear. Resident B showers at his home and he showers every couple of days Resident B appeared clean, appeared to be wearing clean clothing, and was not odorous. Resident B denied any concerns about his home.

On October 24, 2024, I interviewed Resident C at his home. Resident C has lived at his home for 28 years. Regarding the allegations, Resident C reported that staff wash clothes every day and he always has clean clothes to wear. Resident C showers 3 times per week and he can shower more often if wanted. Resident C appeared clean and was not odorous. Resident C denied any concerns.

On October 24, 2024, I viewed Resident D in a living room area of the home watching television. Resident D appeared well and in good spirits as he smiled often. Resident D appeared clean and was not odorous. I viewed Resident E who had just finished eating lunch. Staff O'Connor prompted Resident E to change his shirt as he had gotten it dirty after eating lunch. Resident E said his shirt was fine however he did change the shirt. Resident E appeared well and clean.

On October 24, 2024, I viewed Resident A's AFC Assessment Plan. The plan indicated Resident A is 86 years old and does not move independently in the community as he is blind. Resident A can communicate his needs and understands verbal communication. Resident A does not require any assistance with toileting and eating. Resident A requires reminders with respect to bathing, grooming, dressing (for the weather), and personal hygiene.

On November 4, 2024, I left a message for Veronica Albin, Resident A's Case Manager from The Disability Network. On November 5, 2024, Manager Albin returned my call, and she was interviewed. Manager Albin reported she has been Resident A's case manager for 12 years. Resident A has lived at Meiser AFC since the 1970s and he came from the state hospital. Currently, Resident A is in the hospital due to COPD complications. Regarding the allegations, Manager Albin had no concerns with Resident A's hygiene. Manager Albin explained that Resident A is his own guardian, and he has choices as to when and how often he showers. Staff offer Resident A showers, and he chooses to do what he wants. Resident A is an older gentleman, and he does have urine issues on occasions. When this happens, staff will prompt Resident A to shower. Manager Albin denied any concerns with staff and explained that staff advocated for Resident A to be taken to the hospital when emergency medical professionals said it was not needed. According to Manager Albin, when she visits the home, it is always clean.

APPLICABLE RULE	
R 400.15314	Resident hygiene.
	(1) A licensee shall afford a resident the opportunity, and instructions, when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.
ANALYSIS:	<p>It was alleged that Resident A has an odor and appears unbathed. Upon completion of an unannounced on-site inspection there is not a preponderance of evidence to conclude a rule violation.</p> <p>Resident A was not interviewed due to being hospitalized. Rochell Womack, staff at the day program that Resident A attends explained there was one occasion in September 2024 where Resident A came to program with clothes on that smelled of urine. The Director from Resident A's day program reported she has never found Resident A to be odorous other than maybe smelling of cigarette smoke due to smoking. Staff at Meiser AFC report Resident A's clothing are washed frequently and residents are expected to shower every other day.</p> <p>Resident A's case manager denied any concerns regarding Resident A's hygiene.</p>

	Upon conclusion of investigative interviews there is not a preponderance of evidence to conclude the facility is not affording the resident the opportunity for bathing and personal hygiene.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, no change to the license status is recommended.



11/7/2024

Christina Garza
Licensing Consultant

Date

Approved By:



11/7/2024

Mary E. Holton
Area Manager

Date