



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

December 12, 2024

Mickey Bauchan  
Michigan Community Services, Inc.  
PO Box 317  
Swartz Creek, MI 48473

RE: License #: AS250010706  
Investigation #: 2025A0623004  
River Road

Dear Mickey Bauchan:

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 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 this issue, 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 that reads "Cynthia Badour". The ink is a light gray color.

Cynthia Badour, Licensing Consultant  
Bureau of Community and Health Systems  
411 Genesee  
P.O. Box 5070  
Saginaw, MI 48605  
(517) 648-8877

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS250010706
<b>Investigation #:</b>	2025A0623004
<b>Complaint Receipt Date:</b>	10/22/2024
<b>Investigation Initiation Date:</b>	10/22/2024
<b>Report Due Date:</b>	12/21/2024
<b>Licensee Name:</b>	Michigan Community Services, Inc.
<b>Licensee Address:</b>	5239 Morrish Rd. Swartz Creek, MI 48473
<b>Licensee Telephone #:</b>	(810) 635-4407
<b>Administrator:</b>	Sarah Burns
<b>Licensee Designee:</b>	Mickey Bauchan
<b>Name of Facility:</b>	River Road
<b>Facility Address:</b>	6290 River Road Flushing, MI 48433
<b>Facility Telephone #:</b>	(810) 733-2599
<b>Original Issuance Date:</b>	05/24/1983
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	02/12/2024
<b>Expiration Date:</b>	02/11/2026
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. ALLEGATION(S)

	Violation Established?
Facility has disregarded a physician's order for Resident A to always use a shower chair when showering.	Yes

## III. METHODOLOGY

10/22/2024	Special Investigation Intake 2025A0623004
10/22/2024	Special Investigation Initiated - Telephone I contacted Recipient Rights officer Matthew Potts
10/22/2024	APS Referral Denied at intake for investigation.
10/24/2024	Inspection Completed On-site Observation and Interviews
10/24/2024	Contact - Document Received
10/24/2024	Inspection Completed-BCAL Sub. Compliance
12/06/2024	Exit Conference I contacted Administrator Sarah Burns
12/09/2024	Contact - Telephone call made I contacted Resident A's guardian

**ALLEGATION:** Facility has disregarded a physician's order for Resident A to always use a shower chair when showering.

**INVESTIGATION:** On 10/22/2024, I contacted Genesee County Recipient Rights (RR) officer Matthew Potts. RR Potts stated that Resident A has an order to use a shower chair each time Resident A showers. RR Potts stated that the home manager Lurenda Shelby stated that she thought the order for the shower chair stated as needed, and upon examination of the order it was every time. RR Potts stated that there is a shower chair available and used by other residents in the home.

On 10/22/2024, an APS (Adult Protective Services) referral was made regarding the allegation received in this investigation. The APS referral was denied at intake for investigation.

On 10/24/2024, I completed an unscheduled on-site inspection. I interviewed Home Manager (HM) Lurenda Shelby and Resident A.

Resident A was observed sitting in the living room area of the home watching television. Resident A appeared alert and oriented to person and place. Resident A was observed to be clean, neatly groomed and dressed for the weather. Resident A appeared uninterested in answering questions, however, expressed that they were happy living at the home.

HM Shelby stated that Resident A has resided at this home for 2 years with the same order for the shower chair. HM Shelby stated that she believed the order was for the shower chair to be used as needed, however the order was written that the shower chair would be used anytime Resident A was in the shower. HM Shelby stated that staff have not used the shower chair for Resident A. HM Shelby stated that Resident A has not had any seizure activity in the 2 years they have been at the home. HM Shelby stated that she was contacted by Recipient Rights that the order was not being followed on 10/22/2024. HM Shelby stated that a new physician's order was obtained on 10/23/24 which allows flexibility on whether to use the shower chair.

I observed the physician's orders for Resident A.

Previous order dated 1/4/2023 had the following information regarding adaptive equipment: "Shower chair/shower bench must be used for shower"

Current order dated 10/23/2024 from Flint Neurological Centre.  
"Epilepsy (Grand mal and drop attacks) May use shower seat only as needed"  
Signed by Dr. Sabbagh

12/9/2024, I contacted Resident A's guardian, Guardian A. I explained my findings. Guardian A expressed no concerns about the home or their ability to meet Resident A's needs. Guardian A stated that Resident A has not had any seizures in a long time. Guardian A stated that they had no concern about the change stating that if the doctor thought it was okay to use a shower chair as needed, that was fine.

On 12/6/2024, I conducted an exit conference with Administrator Sarah Burns. I explained my findings and the rule violation. I requested a corrective action plan be completed addressing how the home will address changes in a resident's need for adaptive equipment.

<b>APPLICABLE RULE</b>	
<b>R 400.14305</b>	<b>Resident protection.</b>
	<b>(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.</b>
<b>ANALYSIS:</b>	<p>Resident A had a physician's order dating 1/4/2023 stating that a shower chair be used every time they showered. HM Shelby stated that she believed the order stated to use as needed. HM Shelby stated that Resident A has been in the home for 2 years and has not had a seizure during that time. HM Shelby stated that when notified on 10/22/24 that the current order stated that the chair be used every time, a new physician's order signed by the neurologist was obtained on 10/23/24 stating that a shower chair be used as needed. Resident A's guardian stated that they had not had any seizures in some time so it would make sense that the doctor would change the order to as needed.</p> <p>I conclude that there is sufficient evidence to substantiate a rule violation.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, the status of this facility's license will remain unchanged.



12/11/2024

Cynthia Badour  
Licensing Consultant

Date

Approved By:



12/12/2024

Mary E. Holton  
Area Manager

Date