GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 20, 2025

Roderick Davis
Davis Better Care LLC
722 Fifth St
Jackson, MI 49203

RE: License #: AS380411620
Investigation #: 2025A0007013
Davis Better Care III

Dear Mr. Davis:

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 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) 284-9720.

Sincerely,

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa
P.O. Box 30664
Lansing, MI 48909
(517) 262-8604

Enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT
THIS REPORT CONTAINS QUOTED DEROGATORY AND PROFANE LANGUAGE

I. IDENTIFYING INFORMATION

License #:	AS380411620
Investigation #:	2025A0007013
Complaint Receipt Date:	01/24/2025
Investigation Initiation Date:	01/27/2025
Report Due Date:	03/25/2025
Licensee Name:	Davis Better Care LLC
Licensee Address:	722 Fifth St Jackson, MI 49203
Licensee Telephone #:	(517) 937-6721
Administrator:	Roderick Davis
Licensee Designee:	Roderick Davis
Name of Facility:	Davis Better Care III
Facility Address:	1705 Fourth St. Jackson, MI 49203
Facility Telephone #:	(517) 539-5915
Original Issuance Date:	06/13/2023
License Status:	REGULAR
Effective Date:	12/13/2023
Expiration Date:	12/12/2025
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
On January 24, 2025, Resident A was released from the hospital after suffering a broken nose from an unknown direct care staff member.	Yes

III. METHODOLOGY

01/24/2025	Special Investigation Intake - 2025A0007013
01/24/2025	Contact - Telephone call received From Aubrey Lee, APS. Case discussion.
01/24/2025	Contact - Telephone call received voicemail from Roderick Davis, Licensee Designee.
01/27/2025	Contact - Telephone call received from Mr. Davis, Licensee Designee.
01/27/2025	Contact - Telephone call made to LaShanda Walker, ORR. Case Discussion.
01/27/2025	Special Investigation Initiated – Telephone call made to LaShanda Walker, ORR. Case discussion.
01/27/2025	Contact - Document Received - Email from Roderick Davis.
01/28/2025	Contact - Telephone call made to Nicole Ragland, DCW. Interview.
01/28/2025	Inspection Completed On-site - Unannounced - Face to face contact with Ricky Patterson, DCW, Aiyana Lyons, DCW, Najee Davis, DCW, Rashawn Parris, other staff, Resident A, Resident B, Resident C, Resident D, and a behavioral specialist.
02/13/2025	Contact - Telephone call received from Roderick Davis, Licensee Designee. Discussion regarding Resident B being ill with pneumonia and passing away while at the hospital.
03/19/2025	Contact - Document Sent - Email to Devin Pickett, APS Worker. Status update requested.
03/19/2025	Contact - Document Received - Email from Devin Pickett, APS Worker. Status updated provided.

03/19/2025	Contact - Document Sent Email to Rachel Henry, ORR. Status update requested.
03/19/2025	Contact - Document Received - Office of Recipient Rights Summary Report.
03/19/2025	Contact - Face to Face contact with Aubrey Lee, APS Worker.
03/20/2025	Inspection Completed On-site - Face to face contact with Najee Davis, Resident A, other staff and residents.
03/20/2025	Contact - Telephone call made - He was not in a place that he could talk and requested that I call him back in about 40 minutes.
03/20/2025	Contact - Telephone call made - Greg Eubanks, DCW. No Answer.
03/20/2025	Exit Conference conducted with Roderick Davis, Licensee Designee.

ALLEGATION: On January 24, 2025, Resident A was released from the hospital after suffering a broken nose from an unknown direct care staff member.

INVESTIGATION:
As a part of this investigation, I reviewed the written complaint, and the following additional information was noted:

> "[Resident A] resides in a specialized adult foster care facility. [Resident A] has been diagnosed with Prater Willy Syndrome; a condition in which the individual doesn't feel full, constantly eats and hoards food, and an Intellectual Disability. Today, [Resident A] was released from the hospital after suffering a broken nose from an unknown staff. According to [Resident A], the direct care staff barged in the bathroom while [Resident A] was in there. The direct care staff did not knock on the door, making [Resident A] frustrated. [Resident A] went into his room and returned, waving a knife. The staff physically took the knife from [Resident A] and punched him in the face, breaking his nose. [Resident A's] caseworkers were not notified, and it is unknown if [Guardian A1], was aware of the incident. There are concerns of physical abuse. The incident occurred on January 23, 2025.'

On January 27, 2025, I received a phone call from Roderick Davis, Licensee Designee. He stated that there was an incident at the facility. It started when Greg Eubanks, DCW, accidentally walked into the bathroom on Resident A. Resident A came out of the bathroom cursing saying, "I'll kill you nigger!" Resident A made statements as he went to his room. Resident A returned and pulled a knife out, and

Jhamahd Ganaway, DCW, tried to calm him down. Jhamahd Ganaway then snatched the knife out of Resident A's hand, and Resident A threw milk in Jhamahd Ganaway's face and rushes him. Jhamahd Ganaway reported that he threw his hands up, trying to stop Resident A. Greg Eubanks stated that Jhamahd Ganaway put a stiff arm out. Resident B told Roderick Davis that staff swung and punched Resident A. Roderick Davis stated that he could not determine if Jhamahd Ganaway did it or not, so he used caution and terminated him. Roderick Davis stated that he would not tolerate residents being harmed.

On January 28, 2025, I interviewed Nicole Ragland, DCW, who reported that she was not at the facility when the incident occurred. She was told that Resident A got into it with a staff member, Resident A threw milk on him and pulled a knife on the direct care staff member.

On January 28, 2025, I conducted an unannounced onsite investigation and made face to face contact with Ricky Patterson, DCW, Aiyana Lyons, DCW, Najee Davis, DCW, Rashawn Parris, other staff, Resident A, Resident B, Resident C, Resident D, and a behavioral specialist.

I made face to face contact with Resident A. I observed him to have a scrape on the bridge of his nose, a black eye on the right side of his face and his glasses were taped. Resident A appeared to be agitated when spoken to.

I interviewed Ricky Patterson, DCW, as he was there when the incident occurred. He stated that it started when Resident A and Greg Eubanks got into it. Greg Eubanks knocked on the bathroom door and Resident A did not hear him knocking. Greg Eubanks walked into the bathroom. This upset Resident A. Ricky Patterson stated that he came into the kitchen. Resident A then said something about a knife and he went into his room and got it. Ricky Patterson stated that the knife looked like a "switch blade" and was approximately five inches long. Ricky Patterson, Jhamahd Ganaway, and Greg Eubanks were all in the kitchen when Jhamahd Ganaway snatched the knife out of Resident A's hand and gave it to Greg Eubanks, who then gave it to him (Ricky Patterson). Resident A said, "Give me my knife back!" Then Resident A threw milk in Jhamahd Ganaway's face. Resident A and Jhamahd Ganaway got into a "scuffle," and then they saw blood dripping from Resident A's nose. According to Ricky Patterson, they said that Resident A had another knife. Ricky Patterson stated that he did not see Jhamahd Ganaway punch Resident A, only the scuffle between the two. Resident A said he was going to call the police, which he did, and the police and the ambulance arrived about 30 minutes later. Ricky Patterson stated they left the milk on the table, so the police could see the series of events and that it was self-defense.

Najee Davis has the role of Home Manager. I interviewed and spoke with Najee Davis in the basement of the facility, where the staff office was located. He informed he was not there when the incident occurred. Najee Davis informed me that Resident A's nose was fractured during the incident and that Resident A had a

follow-up appointment scheduled. Najee Davis also called Resident A's mother, Guardian A1, to discuss Resident A's visitation that day and setting expectations, as Resident A had behaviors when there was a lack of follow-through.

Resident A was upstairs and started to have behaviors. He was yelling, and then a very loud noise was heard, as he pushed over a filing cabinet. Resident A was not interviewed, due to him being in behaviors.

After the interview with Najee Davis, I returned to the main level of the facility. I noted that someone in the facility had the odor of marijuana on them (on their coat or clothing). I did not smell the marijuana when I first arrived at the home. I later spoke to Mr. Davis regarding this matter, and he informed that he did not tolerate staff smelling like marijuana in the facility, and he had terminated employees for this in the past. He informed that he would check into the matter.

On January 28, 2025, I interviewed Demontae King, DCW. He stated that he had tried to talk to Resident A about his behaviors. Demontae King informed me that Resident A had a knife, he was flipping it and trying to intimidate Jhamahd Ganaway. Jhamahd Ganaway asked Resident A several times to put the knife down. Resident A would make statements, saying "He's a knife thrower." Demontae King stated that he has told Resident A that if someone asks him to put the knife away, he should do that because some people are not comfortable with that.

On March 19, 2025, I made face to face contact with Aubrey Lee, APS Worker, who originally made face to face contact with Resident A. Resident A reported to Aubrey Lee that staff were being rude. Resident A reported that he was going to the bathroom and staff tried to open the bathroom door. They picked the lock on the door and Resident A asked them to knock. Staff called Resident A the "N word," and he asked them not to refer to him with that word, as he was white. Resident A also stated that staff said to him "I don't give a fuck, you fucking fat ass." Resident A informed Aubrey Lee that he then went to his room and was tossing a knife up and down. Resident A reported to be around knives growing up and that his grandfather taught him how to use them. Resident A reported that the knife was dull. Resident A reported that he could have the knife as long as he did not threaten others. Resident A informed that a staff person grabbed the knife from him. Resident A threw a cup of milk in the staff person's face. The staff person then struck him multiple times, including in the face. Resident A reported to be hit six or seven times. Resident A contacted law enforcement, and the ambulance took him to the hospital. During the investigation, contact was made with Guardian A1.

On March 19, 2025, Devin Pickett, APS Worker, informed me that Jhamahd Ganaway denied hitting Resident A, only pushing him away. Resident A was also the aggressor, and it was reported that Resident A went after Jhamahd Ganaway with a knife in his hand. In addition, Jhamahd Ganaway had been terminated. According to Devin Pickett, Resident A also had a history of violent behavior. The allegations were not substantiated.

As a part of this investigation, I reviewed the *Office of Recipient Rights Summary Report*. It was noted that an incident report submitted by Roderick Davis documented the following:

> "On January 23, 2025, [Resident A] was in the bathroom when Greg [Eubanks] walked in on him. This upset Resident A, and he came out of the bathroom, yelling, and threatening to cut Greg Eubanks. [Resident A] went to his room after yelling for about 30 seconds to a minute. [Resident A] got a pocketknife and came out to the living room with it. [Resident A] waved the knife around and threatened to stab Greg Eubanks. Jhamahd Ganaway tried to diffuse the situation, and stepped in, asking [Resident A] to put the knife down. Jhamahd Ganaway was trying to calm [Resident A] down. "There was a physical altercation that occurred and is under investigation by the supervisor." [Resident]A called the police, and he was taken to the hospital by ambulance. [Resident A's] nose was fractured during the altercation. Staff and the residents were interviewed, and it was discovered that a glass of milk was thrown in staff's face, while [Resident A] was charging at him trying to get the knife back. This information was not included in the original incident report. Mr. Davis was unable to determine if the staff punched [Resident A] intentionally or if it happened from the staff trying to create distance between them with an open hand. There were conflicting statements provided; however, due to the severity of the injury to [Resident A], the staff was discharged from employment.
>
> ORR reviewed a photograph of [Resident A's] nose, which documented that he had slight bruising under his right eye and a laceration to the bridge of his nose. ORR also reviewed documents, interviewed Roderick Davis, [Resident A], direct care staff, other support persons, Dr. Joseph Drumm, Lifeways Medical Director, Jhamahd Ganaway, and Greg Eubanks, and it was determined that the allegations were substantiated."

On March 19, 2025, I interviewed Jhamahd Ganaway. He stated that Resident A was in the bathroom, but no one knew he was in there. Greg Eubanks knocked on the bathroom door and there was no answer. He opened the door. When Resident A came out of the bathroom, he was angry, saying what he was going to do. Resident A was calling staff slaves and racial slurs. Jhamahd Ganaway stated "I didn't say nothing" and he went into the kitchen. Resident A went into his room and grabbed a pocketknife and started swinging and twirling it around. He started saying to the staff (Ricky Patterson), what would happen if he let the knife go. According to Jhamahd Ganaway, Ricky Patterson was calm, so then Resident A started talking to Greg Eubanks, saying if he threw the knife, it would end up in his face. Jhamahd Ganaway stated that he was standing next to Greg Eubanks, (who was sitting at the table), acting like he wasn't paying attention to what Resident A was saying; and that is when he grabbed the knife, put it to his side, and handed it to Greg Eubanks. Resident A was saying "Give me my knife back, give my knife back!" Jhamahd Ganaway told Resident A that he wasn't supposed to have the knife. Resident A

shoved him. Jhamahd Ganaway put his hands up and moved Resident A back. Jhamahd Ganaway explained that Resident A was larger than him and he (Resident A) had pushed him (Jhamahd Ganaway) back into a corner with his chest/body weight. Jhamahd Ganaway told Resident A “Get up off me.” Jhamahd Ganaway stated “I put my hands up and shoved him back (arm’s length).” Resident A then left the kitchen and went to his room. Resident A returned with milk mixed with other substances and Resident A acted like he had something else (another knife). Resident A threw the milk substance in his face and then rushed him. Jhamahd Ganaway stated that he panicked, as he was blinded from the milk substance in his eyes and felt in danger because he didn’t know if Resident A had another weapon or not. Jhamahd Ganaway was concerned that Resident A was going to stab him. Jhamahd Ganaway denied punching Resident A, but stated he put his hands up and shoved Resident A back with force. Jhamahd Ganaway stated that he had been trained to deal with residents in behaviors, but he was never told how to handle a situation like this. Jhamahd Ganaway stated “I wasn’t trained for someone throwing a substance in my face and trying to stab me.” Jhamahd Ganaway voiced his concerns about being terminated from employment and stated that he wanted to know how he could clear his record.

On March 20, 2025, I conducted an on-site investigation and made face to face contact with Najee Davis, Resident A, and other staff and residents.

I interviewed Resident A who informed me that he was in the bathroom and Greg Eubanks walked in on him, without knocking. Once Resident A was out of the bathroom, Resident A asked Greg Eubanks if he could knock. Greg Eubanks then replied that it was “Not that big of a fucking deal,” and told Resident A to “Shut the fuck up.” Resident A told Greg Eubanks not to talk to him that way, and Greg Eubanks told Resident A to “Quit being a bitch nigga.” Resident A said that he asked not to be called that because he was white, not black, and he wasn’t Greg Eubank’s brother either. Resident A then went to his room and got his knife and returned to the dining area. Resident A was flipping the knife in the air and Jhamahd Ganaway said that he needed to put the knife away because they were feeling threatened. Resident A stated that he had the knife in his right hand, with the blade in the palm of his hand. Jhamahd Ganaway then grabbed the handle of the knife, pulling it out of his hand, tearing his skin. Resident A stated the knife was dull, so it was not a deep cut. Resident A stated that he then threw milk on Jhamahd Ganaway. Resident A stated that Jhamahd Ganaway closed the knife, and he had it in his right hand and was punching him in the face, with both his right and left hands, injuring his nose. Resident A stated that Jhamahd Ganaway was the only staff that was hitting him during this incident, and that he was hit about eight times.

I spoke with Najee Davis, who has the role of Home Manager. I inquired about Resident A having access to sharps and Najee Davis informed me that at that point, he could still have access to knives.

While at the facility, I reviewed the employee file for Jhamahd Ganaway. It was noted that the required background checks were completed and maintained in the file. It was also noted that Jhamahd Ganaway was trained in Safety Care, Resident Rights, and Recognizing and Responding to a person in crisis.

On March 20, 2025, I conducted the exit conference with Roderick Davis, Licensee Designee. We discussed the investigation and my recommendations. Mr. Davis stated that Resident A had a history of these behaviors in other facilities and that is why he was placed in their facility. He also questioned if Resident A's weight was considered, as he weighs about 400 lbs., and he has a history of being physically violent. We also discussed Resident A's pocketknife and Mr. Davis stated that he did not have it anymore but that did not stop him from going and getting another one. I informed Mr. Davis that while licensing does not make recommendations for placement, he has the responsibility to access and determine if the level of care that is required for Resident A can be provided in the home. Including staffs' ability to provide the personal care, protection, and supervision that Resident A requires. Mr. Davis informed that he also substantiated these allegations and that he would submit a written corrective action plan to address the established violation.

APPLICABLE RULE	
R 400.14305	**Resident protection.**
	(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.
ANALYSIS:	Based upon my investigation which consisted of onsite investigations, interviews and discussions with facility staff members, Resident A, Adult Protective Services, and Office of Recipient Rights, it is concluded that while it appears Resident A may have been the aggressor, there was a physical altercation between he and Jhamahd Ganaway, DCW, and Resident A sustained a fractured nose as a result of the incident. Based on this information, it's concluded that there is a preponderance of the evidence to support the allegations that Resident A was not treated with dignity and respect, in accordance with the provisions of the act.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable written corrective action plan, it's recommended that the status of the license remains unchanged.

03/20/2025

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Mahtina Rubritius Date
Licensing Consultant

Approved By:

03/20/2025

_____

Dawn N. Timm Date
Area Manager