



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 4, 2025

James Boyd  
Crisis Center Inc - DBA Listening Ear  
PO Box 800  
Mt Pleasant, MI 48804-0800

RE: License #: AS370011270  
Investigation #: 2025A0622027  
Isabella Home

Dear Mr. Boyd:

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) 284-9727.

Sincerely,

A handwritten signature in black ink, appearing to read 'A. Blasius', written in a cursive style.

Amanda Blasius, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS370011270
<b>Investigation #:</b>	2025A0622027
<b>Complaint Receipt Date:</b>	03/17/2025
<b>Investigation Initiation Date:</b>	03/17/2025
<b>Report Due Date:</b>	05/16/2025
<b>Licensee Name:</b>	Crisis Center Inc - DBA Listening Ear
<b>Licensee Address:</b>	107 East Illinois Mt Pleasant, MI 48858
<b>Licensee Telephone #:</b>	(989) 773-6904
<b>Administrator:</b>	James Boyd
<b>Licensee Designee:</b>	James Boyd
<b>Name of Facility:</b>	Isabella Home
<b>Facility Address:</b>	2599 S Isabella Road Mount Pleasant, MI 48858
<b>Facility Telephone #:</b>	(989) 773-0326
<b>Original Issuance Date:</b>	10/10/1986
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	04/05/2024
<b>Expiration Date:</b>	04/04/2026
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Direct care workers are using a behavior intervention technique that limits Resident A's movement and social interaction with other residents.	Yes

## III. METHODOLOGY

03/17/2025	Special Investigation Intake 2025A0622027
03/17/2025	Special Investigation Initiated – Telephone call with licensing consultant, Julie Elkins.
03/19/2025	Telephone call with Recipient Rights Officer, Sarah Watson
03/21/2025	Inspection Completed-BCAL Sub. Compliance
03/25/2025	Contact - Document Received from direct care worker, Kristy Bruechert.
04/01/2025	Telephone interviews with direct care workers, Sabrina Fisher, Dave Mascho and Kristy Bruechert.
04/02/2025	Exit Conference with licensee designee, James Boyd

**ALLEGATION: Direct care workers are using a behavior intervention technique that limits Resident A's movement and social interaction with other residents.**

### **INVESTIGATION:**

On 03/17/2025, I received this complaint through the LARA Bureau of Community and Health Systems online complaint system. According to the complaint, Resident A is non-verbal and non-ambulatory. The complaint stated that Resident A will become agitated and will start to cough and spit on others. According to the complaint, staff will turn Resident A's wheelchair around or place in a position where she can't see others. The complaint stated that she is concerned as this technique is not included in her behavior management plan.

On 03/17/2025, I interviewed licensing consultant Julie Elkins via phone. Ms. Elkins reported that she discussed the complaint with the office of recipient rights officer,

Sarah Watson. Ms. Elkins stated that Ms. Watson was going out the facility to interview staff on 3/18/2025 and would provide additional details.

On 03/19/2025, I interviewed recipient rights officer, Sarah Watson via phone. Ms. Watson reported that she completed an investigation at Isabella Home and all staff, except one reported that they were turning Resident A around in her wheelchair as a behavior technique to stop her from coughing and spitting on others. Ms. Watson reported that this behavior intervention was not approved by Community Mental Health or listed in her assessment plan.

On 03/21/2025, I completed an unannounced onsite investigation to Isabella Home. During the unannounced onsite investigation, I interviewed two direct care workers and reviewed Resident A's file. Resident A was not present at the home during the unannounced onsite investigation.

Upon reviewing Resident A's file a document was found that was unlabeled, typed and not signed or dated. The following was written in this unlabeled document:  
*"[Resident A] will cough and spit while eating if she is upset. Pay no attention to this, turn her away from you and wait until she is done."*

On 03/21/2025, I viewed Resident A's Community Mental Health for Central Michigan PCP Addendum report. The following was found in the addendum:  
*"[Resident A] is dependent in functional mobility. She requires use of a mechanical lift for all transfers or physical assistance from two staff to perform transfers.  
[Resident A] is dependent on others for wheelchair mobility."*

*"When [Resident A] starts spitting at people when doing personal care, staff may want to walk away and come back, send in other staff, if possible and ask some questions to see if she is trying to communicate something. [Resident A] is able to let staff know what she likes and dislikes by nodding with her head up for yes and looking down for no."*

*"[Resident A] loves to receive attention and sympathy from staff and will make a cough sound to seek attention. When staff give sympathy, verbal attention or eye contact, the cough escalates to a real cough and could cause [Resident A] to aspirate. Staff pay attention without [Resident A's] knowledge (limit verbal attention, verbal communication or eye contact) and [Resident A] usually stops the coughing almost immediately. Staff intervene as needed to assure [Resident A's] safety. Staff will also give [Resident A] positive attention throughout their shift."*

On 03/25/2025, I received a copy of Resident A's *Assessment Plan for AFC Residents* (assessment plan). After reviewing Resident A's assessment plan, no written documentation was within the document stating that Resident A has a behavior of coughing or spitting. There were no interventions documented on Resident A's *Assessment Plan for AFC Residents* explaining what to do when

Resident A starts to cough or spit at others. The assessment plan stated that Resident A controls aggressive behavior and gets along with others. No comments were provided for these two sections. Resident A's *Assessment Plan for AFC Residents* was dated for 6/14/2024.

On 03/21/2025 I reviewed documentation in Resident A's file which was labeled *Individual Plan of Service/addendum Training Record*. All current staff signed this form stated they were trained on 01/25/2025 by Kristy Bruechert regarding Resident A's *Individual Plan of Service/addendum*. Ms. Bruechert has been identified as the home manager for Isabella Home.

On 03/21/2025, I interviewed direct care worker (DCW) Julie Gilmore in person. She reported that she has worked at Isabella Home since June, 2024 and works second shift. DCW Gilmore reported that Resident A will give a fake cough if she is trying to communicate or is liking the attention. She stated Resident A will spit on others if she is upset or does not like someone. DCW Gilmore reported that she was trained to turn Resident A around if she starts to have fake cough, so she will settle down. DCW Gilmore stated that she usually turns Resident A around for a couple of minutes and these incidents occur when Resident A is being fed a meal. DCW Gilmore reported that once Resident A has settled down, she will turn her back around and offer more to eat.

On 03/21/2025, I interviewed direct care worker, Naomi Cook in person. She stated that she has worked at Isabella Home for three weeks. DCW Cook reported that she has not heard Resident A cough to where she needed intervention. DCW Cook reported that no one trained her to turn Resident A around if she was coughing or spitting and she has not seen any direct care workers use this intervention. DCW Cook reported that if Resident A was starting to get upset with spitting or coughing, she has just removed herself from the area.

On 04/01/2025, I interviewed direct care worker, Sabrina Fisher via phone. DCW Fisher stated that she works third shift. DCW Fisher stated that Resident A will start to look for attention and will start coughing or spitting. DCW Fisher reported that she will turn Resident A around, so she is not spitting on anyone and knows that the behavior is unacceptable. DCW Fisher reported that Resident A is usually turned around for less than a minute before she stops coughing. She explained that Resident A has a feeding tube now, so these incidents have not been occurring since the feeding tube has started.

On 04/01/2025, I interviewed direct care worker, Kristy Bruechert via phone. She reported that she has been the manager for the last year. DCW Bruechert stated that it is her understanding that the document was created by an old manager, as Resident A has been in the home for about 40 years. DCW Bruechert stated that she was trained to turn Resident A's wheelchair around to help calm her down. She explained that staff will keep an eye on her, so she does not aspirate. Once she has calmed down and stopped coughing, she will turn Resident A back around and

continue feeding her. DCW Bruechert reported that she assumed that this behavior intervention had been approved by community mental health and was in her service plan.

On 04/01/2025, I interviewed direct care worker, Dave Mascho via phone. DCW Mascho reported that Resident A likes attention and being fussed over. He reported that Resident A will start coughing if she is being fussed over and then the cough could turn into a medical situation if it continues. DCW Mascho reported that staff have been trained to not mention the cough and turn Resident A to the side. If Resident A starts to spit particles at others, they will turn her around all the way. He explained that Resident A is only turned around for a minute or less and that staff keep an eye on her, so she does not aspirate. DCW Mascho stated that Resident A is on a feeding tube now, so this behavior has decreased.

<b>APPLICABLE RULE</b>	
<b>R 400.14307</b>	<b>Resident behavior interventions generally.</b>
	<b>(2) Interventions to address unacceptable behavior shall be specified in the written assessment plan and employed in accordance with that plan. Interventions to address unacceptable behavior shall also ensure that the safety, welfare, and rights of the resident are adequately protected. If a specialized intervention is needed to address the unique programmatic needs of a resident, the specialized intervention shall be developed in consultation with, or obtained from, professionals who are licensed or certified in that scope of practice.</b>
<b>ANALYSIS:</b>	Four direct care workers interviewed confirmed that Resident A is turned around in her wheelchair when she starts spitting or coughing. Resident A does not have the ability to turn herself back around and must wait until staff turn her back. No documentation was available regarding this behavior intervention in Resident A's <i>Assessment Plan for AFC Residents</i> or her Community Mental Health for Central Michigan PCP Addendum report, therefore I am unable to determine if this intervention has been approved through a professional who is working directly with Resident A.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, I recommend that the status of the license remains the same.



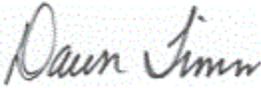
04/02/2025

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Amanda Blasius  
Licensing Consultant

Date

Approved By:



04/04/2025

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Dawn N. Timm  
Area Manager

Date