



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 10, 2025

Louis Hill
Hill's Support Services Inc
PO Box 648
Inkster, MI 48141

RE: License #: AS820352279
Investigation #: 2025A0119032
Wayne Respite Care

Dear Mr. Hill:

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 (313) 456-0439.

Sincerely,

A handwritten signature in cursive script that reads "Shatonla Daniel".

Shatonla Daniel, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-3003

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS820352279
Investigation #:	2025A0119032
Complaint Receipt Date:	05/14/2025
Investigation Initiation Date:	05/16/2025
Report Due Date:	07/13/2025
Licensee Name:	Hill's Support Services Inc
License Address:	PO Box 648 Inkster, MI 48141
Licensee Telephone #:	(313) 671-8188
Administrator:	Louis Hill
Licensee Designee:	Louis Hill
Name of Facility:	Wayne Respite Care
Facility Address:	3221 John Daly Inkster, MI 48141
Facility Telephone #:	(313) 671-8188
Original Issuance Date:	04/29/2014
License Status:	REGULAR
Effective Date:	10/29/2024
Expiration Date:	10/28/2026
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Staff- Keisha Robinson was intoxicated while working and was arrested by Detroit Police.	Yes
Resident A requires 1:1 staffing at the time Staff- Keisha Robinson was arrested.	Yes

III. METHODOLOGY

05/14/2025	Special Investigation Intake 2025A0119032
05/14/2025	Referral Recipient Rights Received
05/14/2025	APS Referral Made
05/16/2025	Special Investigation Initiated - Telephone Recipient Right Investigator- Ann Alexander
05/16/2025	Contact - Document Received Inkster Police report
05/23/2025	Inspection Completed On-site Staff- Chrisanna Hayes, Residents C-D, Observed Residents A- B
06/24/2025	Contact- Telephone call made Home Manager- Tracy Hill Resident A's guardian, left a message
06/24/2025	Exit Conference Licensee Designee Louis Hill

ALLEGATION:

Staff- Keisha Robinson was intoxicated while working and was arrested by Detroit Police.

INVESTIGATION:

On 05/16/2025, I telephoned and interviewed Recipient Right Investigator- Ann Alexander regarding this investigation. Ms. Alexander stated Staff- Keisha Robinson was drinking alcohol while caring for Resident A. Ms. Alexander stated Ms. Robinson called the police because she felt that Staff Chrisanna Hayes locked her out of the facility. Ms. Alexander stated the police arrived and arrested Ms. Robinson because she was intoxicated.

On 05/16/2025, I received an Inkster Police Report dated 05/08/2025 which indicated Ms. Robinson was arrested for intoxication and neglect of vulnerable adult.

On 05/23/2025, I completed an unannounced onsite inspection and interviewed Staff- Chrisanna Hayes and Residents C-D regarding the above allegations. I observed Residents A- B as they could not be interviewed due to their disabilities. Ms. Hayes stated she was working during the time of the incident. Ms. Hayes stated Ms. Robinson went out to her car three or four times during the night shift. Ms. Hayes stated Ms. Robinson was drinking alcohol in her car. Ms. Hayes stated Ms. Robinson offered her a drink but she declined. Ms. Hayes stated they got into a verbal altercation because Ms. Robinson was leaving the front door unlocked to go back and forth to her car. Ms. Hayes stated she told Ms. Robinson that the front door was to remain locked at all times. Ms. Hayes stated Ms. Robinson started cursing at her. Ms. Hayes stated Ms. Robinson was becoming increasingly intoxicated. Ms. Hayes stated she attempted to contact Home Manager- Tracey Hill but she was not able to reach her by telephone. Ms. Hayes stated Ms. Robinson was becoming more aggressive, loud talking and handling Resident A in a rough manner. Ms. Hayes stated when Ms. Robinson left the home without closing the front door and she closed the door which automatically locked the front door. Ms. Hayes stated Ms. Robinson was yelling and cursing for about an hour outside the home. Ms. Hayes stated Ms. Robinson called the police to the home because she wanted to gain entry into the home. Ms. Hayes stated she did not allow her back into the home because she was clearly intoxicated.

Resident C stated she was awakened by Ms. Robinson yelling and it scared her. Resident C stated Ms. Robinson was cursing loudly at Ms. Hayes for a long time. Resident C stated she did not see the police.

Resident D stated she was awakened by Ms. Robinson yelling and it made her feel very uncomfortable. Resident C stated Ms. Robinson was cursing loudly at Ms. Hayes for a long time.

On 06/24/2025, I telephoned and interviewed Home Manager- Tracey Hill regarding the above allegations. Mrs. Hill stated Ms. Robinson was immediately terminated because she was arrested while working. Mrs. Hill stated Ms. Robinson was a new employee to the home having only worked three or four days.

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	(2) Direct care staff shall possess all of the following qualifications: (a) Be suitable to meet the physical, emotional, intellectual, and the social needs of each resident.
ANALYSIS:	Staff- Keisha Robinson was consuming alcohol while working at the facility. Ms. Robinson was arrested due to being intoxicated. Therefore, she was not suitable to meet the needs of the residents.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident A requires 1:1 staffing at the time Staff- Keisha Robinson was arrested.

INVESTIGATION:

On 05/16/2025, I telephoned and interviewed Recipient Right Investigator- Ann Alexander regarding this investigation. Ms. Alexander stated Ms. Robinson was providing 1:1 staffing for Resident A.

On 05/16/2025, I telephoned and interviewed Recipient Right Investigator- Ann Alexander regarding this investigation. Ms. Alexander stated Staff- Keisha Robinson was drinking alcohol while caring for Resident A. Ms. Alexander stated Ms. Robinson was providing 1:1 staffing for Resident A. Ms. Alexander stated the police arrived and arrested Ms. Robinson because she was intoxicated.

On 05/23/2025, I completed an unannounced onsite inspection and interviewed Staff- Chrisanna Hayes. Ms. Hayes stated Ms. Robinson was assigned to Resident A as her 1:1 staff person. Ms. Hayes stated there was no other staff person assigned after Ms. Hayes was arrested by the police.

On 06/24/2025, I telephoned and interviewed Home Manager- Tracey Hill regarding the above allegations. Ms. Hill denies Resident A requires 1:1 staffing.

I received a copy of Resident A's individual plan of service (IPOS) which indicates Resident A has 1:1 staffing for 24 hours. It further states Resident A has seizure disorder, has a bed alarm and needs staff assistance in ambulating out of the bed. The plan indicates Resident A has a monitor hook on her bed to alert staff if she is having a seizure while sleeping.

APPLICABLE RULE	
R 400.14206	Staffing requirements.
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.
ANALYSIS:	<p>Ms. Robinson was providing 1:1 staffing for Resident A. While working Ms. Robinson was arrested due to being intoxicated at the facility.</p> <p>Resident A's IPOS indicates Resident A requires 24 hours staffing due to her care needs.</p> <p>Therefore, Resident A was not provided with her supervision and protection by staff according to Resident A's assessment plan.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



07/10/2025

Shatonla Daniel
Licensing Consultant

Date

Approved By:



07/10/2025

Ardra Hunter
Area Manager

Date