GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 19, 2025

Gretchen Craft
Creative Images Inc
PO Box 253
Southfield, MI 48037

RE: License #: AS820071227
Investigation #: 2025A0901016
Willow Cove Home

Dear Gretchen Craft:

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) 456-0380.

Sincerely,

Regina Buchanan, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3029

Enclosure

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

## I. IDENTIFYING INFORMATION

| | |
|---|---|
| **License #:** | AS820071227 |
| | |
| **Investigation #:** | 2025A0901016 |
| | |
| **Complaint Receipt Date:** | 02/07/2025 |
| | |
| **Investigation Initiation Date:** | 02/10/2025 |
| | |
| **Report Due Date:** | 04/08/2025 |
| | |
| **Licensee Name:** | Creative Images Inc |
| | |
| **Licensee Address:** | 28125 7 Mile Rd<br>Livonia, MI 48152 |
| | |
| **Licensee Telephone #:** | (313) 527-1098 |
| | |
| **Administrator:** | Janet McCarver |
| | |
| **Licensee Designee:** | Gretchen Craft |
| | |
| **Name of Facility:** | Willow Cove Home |
| | |
| **Facility Address:** | 23610 Willow Cove<br>Allen Park, MI 48101 |
| | |
| **Facility Telephone #:** | (313) 359-0778 |
| | |
| **Original Issuance Date:** | 08/27/1996 |
| | |
| **License Status:** | REGULAR |
| | |
| **Effective Date:** | 05/19/2023 |
| | |
| **Expiration Date:** | 05/18/2025 |
| | |
| **Capacity:** | 6 |
| | |

| | |
|---|---|
| **Program Type:** | PHYSICALLY HANDICAPPED<br>DEVELOPMENTALLY DISABLED |

## II. ALLEGATION(S)

| | **Violation Established**? |
|---|---|
| Staff Peggy was verbally and physically aggressive towards Resident A. | Yes |

## III. METHODOLOGY

| | |
|---|---|
| 02/07/2025 | Special Investigation Intake<br>2025A0901016 |
| 02/07/2025 | Referral - Recipient Rights |
| 02/07/2025 | Adult Protective Services Referral |
| 02/10/2025 | Special Investigation Initiated - Telephone<br>Home Manager, Windy Kovalenko |
| 02/18/2025 | Inspection Completed On-site<br>Resident A |
| 02/21/2025 | Contact - Telephone call made<br>Staff, Christine Wells |
| 02/26/2025 | Contact - Telephone call made<br>Case Manager, Martineez Gregory |
| 03/10/2025 | Contact - Telephone call made<br>Case Manager, Martineez Gregory |
| 03/10/2025 | Contact - Telephone call made<br>Guardian, Amy Torrony |
| 03/12/2025 | Contact - Telephone call made<br>Staff, Peggy Ibe |
| 03/12/2025 | Inspection Completed-BCAL Sub. Compliance |
| 03/19/20925 | Exit Conference<br>Licensee designee, Gretchen Craft |

**ALLEGATION:**

**Staff Peggy was verbally and physically aggressive towards Resident A.**

**INVESTIGATION:**

On 02/10/2025, I made a telephone call to the home manager, Windy Kovalenko. She stated the incident happened in October 2024 and she did not witness it. She said staff, Christine Wells, was present and saw it. She further stated since the incident, staff, Peggy Ibe, was terminated.

On 02/18/2025, I conducted an onsite inspection at that facility and observed Resident A. She could not be interviewed, due to having limited verbal skills.

On 02/21/2025, I made a telephone call to Christine. She did not recall the date of the incident, but stated it happened a few months ago. She stated she was working with Peggy, who told Resident A to do something, and she was not listening. Christine explained Resident A sometimes goes into a daze and must be repeatedly redirected due to not listening. She said Peggy was getting impatient and frustrated with Resident A and was yelling at her in a mean aggressive tone. She also observed Peggy roughly grab Resident A and yank her arms.

On 02/26/2025 and 03/10/2025, I attempted to contact Resident A's case manager, Martineez Gregory. Each time I called there was no answer. I left voice messages, but the calls were not returned.

On 03/10/2025, I made a telephone call to Resident A's guardian, Amy Torrony. She stated she has never had any issues with the facility. She spoke well of the care provided by staff and stated she never had any concerns of mistreatment and was surprised by the allegations.

On 03/12/2025, I made a telephone call to Peggy. She denied the allegations. She admitted to having a loud and aggressive voice but stated that it was a part of her culture and that she meant no harm. She also said that is the only tone Resident A responds to. Peggy indicated that when speaking to Resident A, you have to be loud, direct, and forceful or she would ignore you. She denied grabbing Resident A and pulling her arms.

On 03/19/2025, I made a telephone call to the licensee designee, Gretchen Craft. I informed her of my investigative findings, which agreed with. She confirmed Peggy was no longer employed with them and said she would send a corrective action plan.

| 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 on the information obtained during this investigation, Resident A was not treated with dignity and her protection and safety was not attended to. Peggy admitted using a loud aggressive tone with Resident A. In addition to this, Christine reported witnessing Peggy being physically and verbally aggressive towards Resident A. |
| **CONCLUSION:** | **VIOLATION ESTABLISHED** |

## IV. RECOMMENDATION

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

_____ 03/19/2025

Regina Buchanan — Date
Licensing Consultant

Approved By:

03/19/2025

_____

Ardra Hunter — Date
Area Manager