



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

January 21, 2026

Tracey Hamlet
MOKA Non-Profit Services Corp
Suite 201
715 Terrace St.
Muskegon, MI 49440

RE: License #: AS410299531
Investigation #: 2026A0357005
Wilson Home

Dear Ms. Hamlet:

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 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 (616) 356-0100

Sincerely,

Arlene B. Smith

Arlene B. Smith, MSW, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 916-4213

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS410299531
Investigation #:	2026A0357005
Complaint Receipt Date:	11/10/2025
Investigation Initiation Date:	11/12/2025
Report Due Date:	01/09/2026
Licensee Name:	MOKA Non-Profit Services Corp
Licensee Address:	Suite 201 715 Terrace St. Muskegon, MI 49440
Licensee Telephone #:	(616) 719-4263
Administrator:	Sergejs Toms Zvirgzds
Licensee Designee:	Tracey Hamlet
Name of Facility:	Wilson Home
Facility Address:	2755 Wilson Ave. NW Walker, MI 49534
Facility Telephone #:	(616) 791-7257
Original Issuance Date:	03/03/2009
License Status:	REGULAR
Effective Date:	09/03/2025
Expiration Date:	09/02/2027
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
On 10/30/2025, Resident A arrived at the Crossroads Program wearing three adult protection garments and he was soiled with dried fecal material. In addition, on around 11/10/2025 Resident A came to the program wearing pants and underwear with a strong odor of urine and dried feces.	Yes
On 10/16/2025, Resident A's lunch consisted of only two Jello's, two packs of cake and two fruit snacks.	Yes
Additional Findings	Yes

III. METHODOLOGY

11/10/2025	Special Investigation Intake 2026A0357005
11/12/2025	Special Investigation Initiated - Telephone To Michelle Richardson, Recipient Rights, network 180.
12/08/2025	Contact - Telephone call made Left Message from Jeannie Haff, Recipient Rights Officer, from network 180.
12/15/2025	Contact - Document Sent Email received to Jennie Haff, RRO.
12/16/2025	Contact - Document Sent E-mail to Jeannie Haff, RRO
12/17/2025	Contact - Document Sent To Jeannie Haff, RR0.
01/12/2026	Contact - Document Received From Jeannie Haff.
01/12/2026	Contact - Document Sent Requested documents from Stephanie Brown, Residential Coordinator.
01/13/2026	Contact - Document Received Received and reviewed Resident A's assessment plan, BTP, Assessment of IPOS and his Health Care Appraisal.
01/13/2026	Inspection Completed On-site

	Unannounced inspection at Wilson Home.
01/13/2026	Contact - Face to Face Face-to-face interview with at MOKA office, staff member Chaz Albright.
01/14/2026	Contact - Telephone call made Left telephone message to return my call with Crossroads staff Owen Shutz and Azlynn Skiddy.
01/15/2026	Contact - Telephone call made Telephone interview with Staff Molly Gowen, from the Specialized Mentor of Community Supports at MOKA Crossroads Program.
01/15/2026	Contact - Telephone call made Telephone call to staff Owen Shutz of the Specialized Mentor of Community Supports at MOKA Crossroads Program.
01/13/2026	Contact - Face to Face Interviewe with Direct Care Staff, Fre'Dazha Wilkins and Christy Kanyange.
01/13/2026	Contact – Telephone call made. Telephone interview with Jeanny Shumarb, Supervisor of Community Supports at MOKA.
01/15/2026	Contact - Telephone call received From Staff Azlynn Skiddy from Specialized Mentor of Community Supports at MOKA Crossroads Program.
01/15/2026	Contact - Telephone call received From Staff Azlynn Skiddy, from Specialized Mentor of Community Supports at MOKA Crossroads Program.
01/16/20226	Stephanie Brown, Residential Coordinator.
01/16/2026	Contact – Telephone call received from staff member of Crossroads, Jessica Portillo. I also conducted a telephone interview with the Supervisor of the Community Supports program, Jenny Shumarb.
01/16/2026	Contact - Telephone call made to Direct Care Staff Heaven Amandou, and Festus Methenge of the Wilson Home.
01/20/2026	Conducted a telephone exit conference with Licensee Designee.

ALLEGATION: On 10/30/2025, Resident A arrived at the Crossroads Program wearing three adult protection garments and he was soiled with dried fecal material. In addition, on around 11/10/2025 Resident A came to the program wearing pants and underwear with a strong odor of urine and dried feces.

INVESTIGATION: On 01/13/2025, I received and reviewed Resident A's, IPOS (Individual Plan of Service), dated 03/26/2025. This document read that Resident A had a Psychiatrist Diagnosis: *"Attention-deficit/hyperactivity disorder, Predominantly hyperactive/impulsive presentation (Active), Bipolar I disorder, Current or most recent episode depressed; Unspecified (in Remission)."*

On 01/13/2026, I reviewed Resident A's Health Care Appraisal, dated 10/03/2025. His Diagnoses included: *"Cerebral Palsy, Intellectual disability and Developmental delay."* In the same document it read: *"He has severe intellectual disability."* This document also read: *"Intellectual disability, unable to communicate meaningfully."*

On 01/13/2026, I reviewed Resident A's *Community Living Services Inc. Social Work Assessment*, dated 02/26/2025, This document reported that Resident A has lived in the Wilson home since approximately 2017 and it went on to read that, *"(Resident A) does not have insight into his hygiene needs and would not know when to ask for which personal care product to ask for."* In this report under his Primary Care Physician, Dr. Harland Holman, MD, General Practice, under discussion of Resident A's current medical issues or concerns the following was written: *"Bowel Concerns: (Resident A) continues to "leak" stool. After an outpatient procedure and colonoscopy, it was concluded (Resident A's) condition is due to his Cerebral Palsy, which causes his colon to be "semi-filled with stool at all times." (Resident A) is prescribed Clearlax powder stirred into 8oz of water 3 times daily, one mg Colace capsule daily, and Hydrocil SF mixed into water 2 times daily."* In the same document there was a section on any historical concerns or issues. *"In May of 2017, (Resident A) had an appointment with Dr. Wallace for an abdomen exam. He was referred to a gastroenterologist, who concluded (Resident A) was likely impacted and performed outpatient surgery to remove the impaction and perform a colonoscopy. However, no impaction was found, and Resident A continues to "leak" stool."*

Under the section entitled "Risk & Safety Assessment:" The following was written *"(Resident A) continues to be resistant to completing personal care and if further prompted will engage in verbal and physical aggression. (Resident A) will also refuse to use the bathroom to void or to change his incontinence products. Prompts to participate in this can lead to verbal and physical aggression. (Resident A) requires a toileting schedule or he will remain in soiled garments. It helps if (Resident A) is already standing so he has momentum to walk to the bathroom. (Resident A) will refuse to use the toilet if asked when he is watching television."* The report continued under the section of Assessment of Abilities, Personal Skills. The report read: *"(Resident A) does not independently use the toilet. He wears adult briefs and he will refuse to use the bathroom even with prompts. Staff asks*

(Resident A) to use the bathroom every two hours and assist him with hygiene after toileting and managing incontinence. (Resident A) can remove his brief and place it in the trash can when prompted. (Resident A) needs assistance with a shower... Resident A can be resistant in personal care...and personal hygiene."

On 01/13/2026 I reviewed Resident A's Network 180 Functional Behavior Assessment (FBA). In the report under the section of Developmental/Medical the following was written: *"(Resident A) continues to have ongoing problems with his bowels and was hospitalized several times during April and May 2025 for this reason. Staff at the home noticed (Resident A) was "leaking" stool so they took him in to be seen. After being seen, it was evident that (Resident A) had severe bowel impaction and was hospitalized. After being home for a short time, he was sent back for the same issue. (Resident A) now follows a bowel protocol and staff are being extra aware and vigilant for signs to watch out for in order to ensure (Resident A's) health/safety. (Resident A) uses briefs, as he is incontinent, and his doctors believe this is related to is cerebral palsy."*

On 01/13/2026, I reviewed Resident A's Assessment Plan. Under the section of Self Care Skill Assessment the same information is included about Resident A not being able to independently use the toilet, wears adult briefs, will refuse to use the bathroom even with prompts, staff asks him to use the bathroom every 2 hours, staff assists him with hygiene after toileting and managing incontinence and he is able to remove his brief and place it in the trash can when prompted.

On 01/13/2026, I made an unannounced inspection of the home. I inquired if the Home Manager was there and the staff said he was on vacation. I conducted interviews with Direct Care Staff, Fre'Daha Wilkins and Christy Kanyange. Ms. Wilkins stated that this AM she showered Resident A and changed him, and she said he was clean when the staff from Crossroads picked him up. Ms. Wilkins stated that each day Resident A comes back from Crossroads he is soiled and "we don't call and complain." Both staff confirmed that Resident A has bowel issues which he receives medications for, and they check/change him every two hours.

On 01/13/2026, I met Resident A at the Crossroad program and due to his disability, he was unable to contribute with a meaningful conversation with me. During our time together I did not detect any odors.

On 01/13/2026, I conducted a face-to-face interview with the Crossroads staff, Chaz Albright. He stated that on 10/30/2025, he had provided personal care to Resident A who came to Crossroads wearing three briefs soaked through with urine and dried fecal material. He explained that they only have wipes to clean Resident A up and they do not have a shower. Mr. Albright reported that on or about 11/10/2025, Resident A arrived in pants and underwear that had a strong odor of "old" urine, (they were dry) as well as feces. He stated that he cleaned him with the wipes and changed him into fresh clothing.

On 01/15/2026, I conducted a telephone interview with Molly Gowen, Crossroads staff. She confirmed that she has provided personal care to Resident A when he is in their program. She stated that she has noticed that he has had double or triple briefs on. She stated that the smell of urine on him was "stale". She said on 08/25/2025, she and others noticed that he smelled of old urine. She stated she let her supervisor know of the issue. She said this happened a couple more times. She reported that on 10/28/2025, Resident A had dried waste in his brief, and she changed him and found dried fecal material in his pubic area. She explained that Resident A has bowel problems and she has experienced Resident A on multiple days that he had not been changed. She went on to say he must be changed up to three to four times day. She said: "He is constantly going."

On 01/15/2026, I conducted a telephone interview with Owen Shutz staff from Crossroads. He reported that Resident A has problems with his bowels. He stated that he has changed Resident A several times and has found dried fecal material in Resident A's brief more than once. Mr. Shutz stated that Resident A cannot report if he has eliminated into his brief, due to his lack of verbal skills.

On 01/15/2026, I conducted a telephone interview with Azlyn Skiddy, staff with Crossroads. She reported that she had changed Resident A many times and she had seen him wearing three briefs at one time. She reported that on 10/28/2025, she found Resident A with dried fecal material on Resident A's private parts. She stated that wipes can only do so much and it has been difficult to clean Resident A up. She stated Resident A comes to the program with soiled briefs. She reported that if the home cannot have Resident A cleaned and ready to go when they come to pick him up, they can always let them know and they could bring him later. She stated that Mr. Shutz had documented a note on 10/28/2025, that Resident A had been triple briefs on and he had dried waste in his brief and on him.

On 01/16/2025, Ms. Stephanie Brown, Residential Coordinator, provided me with the Direct Care staff's names and phone numbers who had worked on 3rd and 1st shifts in the Wilson Home on the following dates: 08/25/2025, 10/28/2025, 10/30/2025 and 11/10/2025

On 01/16/2026, I conducted a telephone interview with Jessica Portillo, staff at Crossroads. She stated that she had changed Resident A and found him in three briefs, along with a liner, but she was unable to provide dates. She said that Resident A has digestive issues and they have to change him often when he is at Crossroads.

On 01/16/2026, I conducted a telephone call with Jenny Shumarb, Supervisor for Community Supports and she is over the Crossroads program. She reported that her staff report to her any concerns they have by email or discussing the concerns together in person. She confirmed that the dates of 08/25/2025, 10/28/2025, 10/30/2025, and 11/10/2025, Resident A had dried fecal material on him and soaked in urine and/or dried urine.

On 01/16/2026, I conducted a telephone interview with Direct Care Staff, Heaven Amandou. She stated that she showered Resident A and assisted him with dressing with clean clothes. She said she changed his brief. She stated that Resident A can be showered and before he gets out of the shower he continues to eliminate with his stool. She said he has had ongoing problems with his bowels. She said when he returns back from Crossroads there are many days that he has eliminated, and he is soiled. She denied having any knowledge of him having three briefs on from the night before. I asked Ms. Amandou about the date of 08/25/2025, when she worked 3rd shift and I explained that we were told Resident A had smells of old urine. Ms. Amandou reported that when she works 3rd shift she always showers Resident A at 5:30am and he never refuses his shower. She denied that he could have smelled of old urine because she always puts a new brief on him and puts clean clothes on after his shower. I also asked Ms. Amandou about 10/28/2025, when it was reported that Resident A was observed at Crossroads with three briefs on and dried fecal material on him and in his brief. Ms. Amandou denied that he could have smelled of old urine or have two or three briefs on because after his shower she puts on fresh clothes and a fresh brief.

On 01/16/2025, I conducted a telephone interview with Direct Care Staff, Festus Methenge. He told me that he worked 3rd shift on 10/30/2025. He said when Resident A sleeps, he often has soiled his brief and he said he gave Resident A, a shower that morning, changed his brief and put clean clothes on him. He explained that since Resident A had surgery, he has had difficulty with his stool. He said after Resident A eats his breakfast he will often eliminate. He explained that 1st shift staff are to check him and make sure his brief is clean before he gets on the bus. He said Resident A's elimination is unpredictable and it can come very fast and frequently. He said he was certain that Resident A would eliminate on the bus ride which is over an hour to Crossroads program. He denied knowing about Resident A having three briefs on him on 10/30/2025. He said they have spoken to their manager and the staff at Crossroads, and they are working on the issues together. He said he has worked in the Wilson home for over six years and he does his very best to care for all of the residents. I asked Mr. Mathenge about 11/10/2025, and he had worked 3rd shift it was reported that Resident A had smell of old urine and had fecal material on his groin area. He explained that when he works third shift, he gives Resident A, a shower at 6:30am. He said he puts clean clothes and clean brief on Resident A. He denied that Resident A could have smelled of old urine and that he could not have had dried fecal material on him.

On 01/20/2026 I conducted a telephone exit conference with the Licensee Designee, Tracey Hamlet and she agreed with my findings.

APPLICABLE RULE	
R 400.671	Resident care.
	(4) A licensee shall provide supervision, protection, and personal care as specified in a resident's assessment plan.

	<p>A hospice service plan, do-not resuscitate order, or any other advance directive must be included as an addendum to the resident assessment and maintained with the assessment plan in the resident's record.</p>
<p>ANALYSIS:</p>	<p>It was alleged that on 10/30/2025, Resident A arrived at the Crossroads Program wearing three adult protection garments and he was soiled with dried fecal material. In addition, on around 11/10/2025 Resident A came to the program wearing pants and underwear with a strong odor of urine and dried feces.</p> <p>Resident A's Primary Physician, Dr. Harland Holman, MD had written that Resident A has bowel concerns and he continues to "leak" stool and this is due to his Cerebral Palsy. Resident A has a toileting schedule every two hours. Resident A will refuse to use the toilet, and he cannot use the toilet independently. Resident A's assessment plan states staff will assist him Resident A with prompts for hygiene after toileting and managing his incontinence and they will prompt him to use the toilet every two hours.</p> <p>Crossroads staff Chaz Albright stated that on 10/30/2025, Resident A came to the program wearing three briefs, soaked in urine and had dried fecal material. He stated on 11/10/2025, Resident A arrived in pants and underwear with strong odor of old urine and his pants were dry, and he had feces.</p> <p>Crossroads staff Molly Gowen reported that on 08/25/2025, Resident A smelled of stale urine, and she reported that he had triple briefs on. Then on 10/28/2025, she found Resident A had dried waste in his brief and she found dried fecal material in his pubic area.</p> <p>Crossroads staff Azluyn Skiddy reported that on 10/28/2025, she found dried fecal material on Resident A's private parts. She reported that often Resident A has come to the program with three briefs on and dried fecal material.</p> <p>Direct Care Staff, Jessica Portillo reported she has changed Resident A and found him with three briefs along with a liner. No dates were reported.</p> <p>The Supervisor of the Community Supports, Jenny Shumarb confirmed the dates of 08/25/2025, 10/28/2025, 10/30/2025, and 11/10/2025, she had either received emails or had spoken with</p>

	<p>the staff directly that Resident A had had dried fecal material on him, soaked in urine and or dried urine with smells on Resident A and he was found with triple briefs on him many times.</p> <p>Direct Care Staff Heaven Amandou and Festua Metenge both stated that they showered Resident A, put clean clothes on him and changed his brief. They both denied that Resident A had dried fecal material on him, smelled of urine or was tripled briefed when he left the home for Crossroads programing.</p> <p>During this investigation it was found there was a preponderance of evidence to indicate Resident A was found wearing multiple briefs, soaked with urine, with fecal material, along with dried urine and old urine smells of urine. Resident A's assessment plan stated the staff will help with Resident A's hygiene and manage his incontinence with personal care but he has arrived at his day program with evidence that his hygiene has not been managed.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: On 10/16/2025, Resident A's lunch consisted of only two Jello's, 2 packs of cake and two fruit snacks.

INVESTIGATION: On 01/13/2026, I conducted a face-to-face interview with the Crossroads staff, Chaz Albright. He reported on 10/16/2025, Resident A's lunch consisted of two Jello's, two packs of cake and two fruit snacks. He said there was no protein, no whole gains, and no vegetables and no fruit. He said he had to find some protein in their refrigerator for Resident A.

On 01/15/2026, I conducted a telephone interview with Crossroads staff Molly Gowen. She stated that she saw Resident A's lunch on 10/16/2025 and it was all sweet.

On 01/15/2026, I conducted a telephone interview with Crossroads staff Owen Shutz. He reported that one day Resident A's lunch was all cookies.

On 01/15/2026, I conducted a telephone interview with Crossroads staff Azlyn Skiddy. She reported on the days she picks up Resident A for their programing. She checks his back pack when she is back in the van, but because the staff of the home have missed so many essentials such as his wipes, briefs, a set of clean clothes, and his lunch she will now remain in the home when she checks his backpack before they go to the van. This way she can ask the staff about what is missing before she leaves the home. I asked her about Resident A's lunches and she said today 01/15/2026, she observed his lunch, and he had two pieces of bread, toasted

with one small slice of ham with nothing else on it. She asked him if he wanted her to warm up his sandwich and he agreed. She said she added some cream cheese to the sandwich. She said she heard him eating something crunchy, but she did not observe it, and he had a fruit cup. She reported that on 10/16/2025, she observed his lunch, and it was all sweets. She said the other day he came with a bag of cookies for his lunch. She said his lunch did not have a healthy option and there was no protein, no fruit, no vegetables, and no drink.

On 01/16/2026, I conducted a telephone interview with Crossroads staff, Jessica Portillo. She reported that one day Resident A's lunch had only had a "bag full of cookies." No sandwich or other food items, (fruit, vegetables, grains, protein or drink) were present.

On 01/16/2026, I conducted a telephone call with Jenny Shumarb, Supervisor for Community Supports and she is over the Crossroads program. She confirmed she had been made aware of Resident A's lunch on 10/16/2025, and she had observed Resident A with a bag of cookies for his lunch with Christmas shaped cookies, so she assumed that it was around Christmas time. She said she saw some chocolates also along with a granola bar. No protein, or grains, or fruit, or vegetables. She reported that she has observed his lunches and she as well as her staff have reported Resident A often comes without any drink in his lunch.

On 01/16/2026, I conducted a telephone interview with Direct Care Staff, Heaven Amandou. She denied knowing anything about Resident A's lunch on 10/16/2025. She said when she makes his lunch she provides him with a sandwich, fruit, and vegetables and a snack along with a drink. Ms. Amandou explained that Resident A has two lunch boxes and there are times that the lunch box does not get cleaned by the time they need it for the next day. Therefore, the staff may have to use an alternative.

On 01/16/2025, I conducted a telephone interview with Direct Care Staff, Festus Mathange. He denied knowing anything about inadequate lunches for Resident A. He stated that he packs them correctly.

On 01/20/2026, I conducted a telephone interview with the Licensee Designee Tracey Hamlet and she agreed with my findings.

APPLICABLE RULE	
R 400.663	A licensee shall provide daily a minimum of 3 nutritious meals to residents.
ANALYSIS:	It was alleged that on 10/16/2025, Resident A's lunch consisted of only 2 Jello's, 2 packs of cake and 2 fruit snacks. On 10/16/2025, Crossroads staff, Chaz Albright, Molly Gownen, and Azlyn Skiddy, all witnessed Resident A's lunch which

	<p>consisted of 2 Jello's, 2 packs of cake and 2 fruit snacks. There were only sweets. No protein, no grains, no fruit, no vegetables.</p> <p>Crossroads staff, Owen Shutz, Jessica Portillo, and the Supervisor, Jenny Shumarb all reported Resident A's lunch was a bag of cookies one day. No protein, whole grain, vegetables, or fruit was included.</p> <p>Direct Care Staff, Heaven Amandou, denied that she was aware of Resident A's lunch on 10/16/2025. She reported that when prepares Resident A's lunch she packs his lunches correctly.</p> <p>Direct Care Staff, Festus Mathange denied knowing anything about inadequate lunches for Resident A.</p> <p>There is a preponderance of evidence that Resident A's lunch on 10/16/2025 consisted only of sweets, two Jello's, 2 packs of cakes and 2 fruit snacks. There was no protein, grains, fruit or vegetables. On another day Resident A only had a bag of cookies for his lunch. Therefore, Resident A was not provided with a nutritious meal for his lunch.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: On 01/15/2026, I conducted a telephone interview with Crossroads staff Azlynn Skiddy. She stated that she has transported Resident A to and from the Crossroads program many times. She reported on 01/15/2026, Resident A was dressed in a "wind braker" with the sleeves not reaching his wrists, because it was too small for him. She also stated that Resident A had on a short sleeve shirt under the wind braker. She reported that temperature was very cold. She explained that Crossroads staff Chaz Albright had provided Resident A with a fleece blanket for him to stay warm when he arrived at his program. She said that Mr. Albright had asked the home staff for his winter coat when he picked him up on 01/15/2026, and the staff explained that his winter coat was lost, and they could not find it. Ms. Skiddy reported Resident A attends Crossroads programing on Monday, Tuesday and Thursday.

On 01/15/2026, I reviewed Resident A's Assessment Plan. Under the section of Health Care Assessment, letter F, Susceptible to Hypothermia or Hyperthermia it was check with "Yes." The plan read *"(Resident A) needs assistance with choosing weather appropriate clothing."*

On 01/20/2026 I conducted an exit interview with the Licensee Designee, Tracey

Hamlet and she agreed with my findings.

APPLICABLE RULE	
R 400 671	Resident Care
	(4) A licensee shall provide supervision, protection, and personal care as specified in a resident's assessment plan. A hospice service plan, do-not resuscitate order, or any other advance directive must be included as an addendum to the resident assessment and maintained with the assessment plan in the resident's record.
ANALYSIS:	<p>During the investigation the staff of the home reported Resident A was sent to the Crossroads program in a too small wind braker, with a short sleeve shirt which was not appropriate for winter clothing.</p> <p>Resident A's assessment plan states that he requires assistance with choosing weather appropriate clothing.</p> <p>During this investigation the staff of the home failed to provide protection and personal care specified in Resident A's assessment plan by not providing him with a winter coat when he was going to Crossroads.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

I recommend the Licensee provide an acceptable plan of correction and the license remain the same.

Arlene B. Smith

01/21/2026

Arlene B. Smith
Licensing Consultant

Date

Approved By:

Jerry Hendrick

01/21/2026

Jerry Hendrick
Area Manager

Date