



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 11, 2026

Edward Lark
The Reach Foundation
1793 Charter
Lincoln Park, MI 48146

RE: License #: AS820289647
Investigation #: 2026A0121005
The Journey Home

Dear Mr. Lark:

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,

A handwritten signature in blue ink that reads "K. Robinson". The signature is written in a cursive style with a large, stylized "K" and a clear, legible "Robinson".

K. Robinson, MSW, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-0574

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
 BUREAU OF COMMUNITY AND HEALTH SYSTEMS
 SPECIAL INVESTIGATION REPORT
 THIS REPORT CONTAINS EXPLICIT LANGUAGE**

I. IDENTIFYING INFORMATION

License #:	AS820289647
Investigation #:	2026A0121005
Complaint Receipt Date:	01/23/2026
Investigation Initiation Date:	01/28/2026
Report Due Date:	03/24/2026
Licensee Name:	The Reach Foundation
Licensee Address:	1793 Charter, Lincoln Park, MI 48146
Licensee Telephone #:	(313) 608-1324
Administrator:	Edward Lark
Licensee Designee:	Edward Lark
Name of Facility:	The Journey Home
Facility Address:	14651 Horger Allen Park, MI 48101
Facility Telephone #:	(313) 608-1324
Original Issuance Date:	08/03/2007
License Status:	REGULAR
Effective Date:	06/13/2025
Expiration Date:	06/12/2027
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Direct care staff, Heavin screams and verbally abuses residents on a regular basis. Direct care staff, Vicki calls the residents obscenities such as “dumbass”, “fat ass”, etc.	No
Porch needs to be repaired; stairs are not safe.	Yes
Furniture inside is extremely dirty and needs to be cleaned.	No
Direct care staff, Angelica, does not sign the medication book.	No
Home manager, Cyndi smokes weed on the job, she keeps her weed pen in the office drawer sometimes.	No
<i>All allegations were not investigated as they are not rule related.</i>	

III. METHODOLOGY

01/23/2026	Special Investigation Intake 2026A0121005
01/23/2026	APS Referral (adult protective services)
01/23/2026	Referral - Recipient Rights
01/25/2026	Contact - Document Sent Email to Referral Source (RS); no response
01/28/2026	Special Investigation Initiated - Telephone Left message for RS; no response
02/03/2026	Contact - Telephone call made Left message for RS; no response
02/04/2026	Inspection Completed-BCAL Sub. Non-Compliance Interviewed Resident A-D and direct care staff (DCS), Heavin Pelletier
02/24/2026	Contact - Telephone call made Left message for home manager, Cynthia Dowling

02/24/2026	Contact - Telephone call made Ms. C. Williams-McCree with APS
02/26/2026	Contact - Telephone call received Return call from Ms. Dowling
03/02/2026	Contact - Telephone call made Left message for Edward Lark, licensee designee
03/03/2026	Exit Conference Edward Lark
03/03/2026	Contact - Telephone call made DCS, Melanie McDiarmid
03/03/2026	Contact - Document Sent Email to Dwight Snodgrass with Detroit Wayne Integrated Health Network (DWIHN)
03/05/2026	Contact - Document Received Email from Mr. Snodgrass
03/09/2026	Contact - Telephone call made Mr. Snodgrass
03/09/2026	Contact - Telephone call made April Dudley with DWHIN
03/09/2026	Contact - Telephone call made DCS, Angelica Dupui
03/10/2026	Contact – Telephone call made DCS, Vicki Tampa

ALLEGATION: Direct care staff, Heavin screams and verbally abuses residents on a regular basis. Direct care staff, Vicky calls the residents obscenities such as “dumbass”, “fat ass”, etc.

INVESTIGATION: On 2/4/26, I completed an unannounced onsite inspection at the facility. Direct care staff (DCS), Heavin Pelletier was on duty. Ms. Pelletier denied having ever yelled at or verbally abused the residents. Ms. Pelletier reported Vicki Tampa is a newer staff. Resident A-C all denied that Ms. Pelletier or Ms. Tampa yells at or verbally abuse them. However, Resident D reported Ms. Tampa used profanity when she first started working there, but she “doesn’t do it much” now.

According to Resident D, Ms. Tampa curses in a joking manner. Resident D said Ms. Pelletier does not verbally abuse or curse at residents. On 3/10/26, I interviewed Ms. Tampa by phone. Ms. Tampa stated she began working at the facility last September. Ms. Tampa stated, "That's never happened" when asked if she's ever cursed at or yelled at any resident. Ms. Tampa said it's possible that a resident lied on her in retaliation for receiving a negative write-up. On 2/24/26, I interviewed adult protective service (APS) investigator, Mrs. C. Williams-McCree. Mrs. Williams-McCree did not substantiate the abuse case because Resident A, B, and D informed her that the allegations were not true. Resident D's statements are not consistent. Therefore, I determined Resident D was not a credible witness. On 2/26/26, I interviewed home manager, Cynthia Dowling. Ms. Dowling stated, "I've never heard anybody talk out of character" to residents. Ms. Dowling suspects the complaint was launched by former direct care staff, Natasha Wagner, in retaliation for being fired. I made 3 attempts to contact the referral source on 1/25/26, 1/28/26, and 2/3/26 to no avail.

On 3/3/26, I completed an exit conference with licensee designee, Edward Lark. Mr. Lark reported he has not witnessed Staff speak to residents in an abusive manner. In fact, Mr. Lark reported he takes resident abuse so serious that if found guilty, staff are automatically terminated from employment.

APPLICABLE RULE	
R 400.641	Resident behavior interventions.
	<p>(6) A licensee, staff, volunteers, or any person who lives in the facility shall not do any of the following:</p> <p>(f) Subject a resident to any of the following:</p> <ul style="list-style-type: none"> (i) Mental or emotional cruelty. (ii) Verbal abuse. (iii) Derogatory remarks. (iv) Threats.
ANALYSIS:	There is no evidence that DCS Heavin Pelletier or Vicki Tampa subjected residents to verbal abuse or derogatory remarks.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Porch needs to be repaired; stairs are not safe.

INVESTIGATION: On 2/4/26, I observed the porch railing is loose. Home manager, Cynthia Dowling acknowledged, "The railing on the front porch is a little wobbly." Per Ms. Dowling, the cold weather has prevented maintenance from completing the repair. Ms. Dowling also reported the steps were wobbly too, but those were repaired on or around 1/22/26 prior to my arrival. On 3/3/26, I completed

an exit conference with Mr. Lark who acknowledged the porch handrail is “wobbly”. Mr. Lark said his handyman will reinforce the railing today or tomorrow, so he’ll forward photos of the repair when finished. To date, I have not received said photos to verify the repair.

APPLICABLE RULE	
R 400.647	Safety and maintenance of premises.
	(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	On 2/4/26, I conducted an unannounced onsite inspection at the facility where I observed a loose handrail on the porch. Therefore, the facility wasn’t maintained to provide adequately for the health, safety, and well-being of occupants.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Furniture inside is extremely dirty and needs to be cleaned.

INVESTIGATION: On 2/4/26, I conducted an onsite inspection at the facility. I observed the home furnishings looked old and dated, but there were no obvious signs of dirt or unclean conditions. Ms. Williams-McCree reported she closed the APS case with no substantial violations. However, Recipient Rights Investigator (RRI), April Dudley cited the home for having dirty furniture in the common area of the house. On 3/9/26, Ms. Dudley described 2 chairs near the staircase as “filthy”. Ms. Dowling confirmed Recipient Rights cited the home for having 2 dirty “off white” chairs. To achieve compliance, Ms. Dowling reported staff rented an upholstery cleaner to shampoo each chair on or around 2/5/26. Ms. Dudley verified those chairs were later cleaned. On 3/3/26, Mr. Lark confirmed these findings.

APPLICABLE RULE	
R 400.647	Safety and maintenance of premises.
	(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.

ANALYSIS:	On 2/4/26, I observed the home furnishings and housekeeping standards in comfortable, clean, and orderly appearance which may be attributed to recent upholstery cleaning.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Direct care staff, Angelica, does not sign the medication book.

INVESTIGATION: On 2/4/26, I reviewed the January 2026 Medication Administration Records (MAR). I observed DCS Angelica Dupuie’s signature on the sheet several times. On 3/9/26, I interviewed Ms. Dupuie by phone. Ms. Dupuie indicated the allegation is false. Ms. Dupuie insisted that she signs both the MAR and the pharmacy supplied blister packs when administering resident medication. On 3/3/26, I completed an exit conference with Edward Lark. Mr. Lark said he has no knowledge of any medication errors involving Ms. Dupuie.

APPLICABLE RULE	
R 400.675	Resident medications.
	<p>(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:</p> <p>(b) Complete an individual medication log that contains all of the following:</p> <ul style="list-style-type: none"> (i) Medication name. (ii) Dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) Initials of the individual who administered the medication at the time given. (vi) Resident's refusal to accept prescribed medication or procedures at time of refusal.
ANALYSIS:	There is no evidence to support the allegation that DCS Angelica Dupuie failed to initial the medication log.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Home manager, Cyndi smokes weed on the job, she keeps her weed pen in the office drawer sometimes.

INVESTIGATION: I interviewed Cynthia Dowling (A.K.A. "Cyndi") by phone on 2/26/26. Ms. Dowling is adamant the allegation is false. Specifically, Ms. Dowling said she does not smoke weed on the job. In fact, Ms. Dowling indicated that she works at a different facility, so she only covers shifts at The Journey Home when they are short staffed. Resident C and D reported they've never seen Ms. Dowling smoke marijuana at the facility. Mr. Lark laughed at the allegation concerning Ms. Dowling smoking weed on the job. Mr. Lark reported Ms. Dowling "doesn't even smoke", nonetheless, inhale controlled substances. In addition, Mr. Lark stated he has not received any complaints about Ms. Dowling doing drugs since she's been employed with him for the past 21 years. Mr. Lark suspects the complaint was filed by disgruntled staff member, Natasha Wagner in retaliation for being fired.

APPLICABLE RULE	
R 400.629	Direct care staff; qualifications and training.
	(4) Direct care staff shall possess all of the following qualifications before working independently: (a) Be capable of meeting the physical, emotional, intellectual, and social needs of each resident.
ANALYSIS:	There is no evidence to suggest home manager, Cynthia Dowling, uses marijuana on the job causing her to be incapable of meeting the physical, emotional, intellectual, and social needs of each resident.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

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

03/10/26

Kara Robinson
Licensing Consultant

Date

Approved By:

A. Hunter

03/11/26

Ardra Hunter
Area Manager

Date