



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

Deanna Robinson
775 Territorial Rd
Benton Harbor, MI 49022

March 6, 2024

RE: License #: AF110393297
Investigation #: 2024A0579012
Rodgers Facility

Dear Ms. Robinson:

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 (616) 356-0183.

Sincerely,

Cassandra Duursma, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(269) 615-5050
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF110393297
Investigation #:	2024A0579012
Complaint Receipt Date:	01/17/2024
Investigation Initiation Date:	01/18/2024
Report Due Date:	03/17/2024
Licensee Name:	Deanna Robinson
Licensee Address:	775 Territorial Rd Benton Harbor, MI 49022
Licensee Telephone #:	(269) 927-3315
Administrator:	N/A
Licensee Designee:	N/A
Name of Facility:	Rodgers Facility
Facility Address:	775 Territorial Rd Benton Harbor, MI 49022
Facility Telephone #:	(269) 927-3315
Original Issuance Date:	06/12/2018
License Status:	REGULAR
Effective Date:	12/12/2022
Expiration Date:	12/11/2024
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED, AGED, MENTALLY ILL

ALLEGATION(S)

Resident A is not receiving adequate care.	Yes
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II. METHODOLOGY

01/17/2024	Special Investigation Intake 2024A0579012
01/18/2024	Special Investigation Initiated - Letter Deanna Robinson, Licensee
01/24/2024	Contact- Face to Face Resident A Deanna Robinson, Licensee
01/24/2024	Contact- Document Sent APS Referral
03/6/2024	Exit Conference Deanna Robinson, Licensee

ALLEGATION:

Resident A is not receiving adequate care.

INVESTIGATION:

On 1/17/24, I received this referral which alleged Ms. Robinson does not empty Resident A's bedside commode or clean it. The commode pan has not been emptied or cleaned in five days. There is a strong odor in Resident A's room due to this.

On 1/18/24, I contacted Ms. Robinson who had previously emailed me regarding Resident A. She previously informed me that she could not provide the level of care Resident A needs and inquired about appropriately discharging Resident A from the home. Ms. Robinson informed me she had verbally requested Resident A find a new placement and discussed options with Resident A. She stated she will be issuing a written 30-day discharge notice soon. She stated she feels that Resident A's assessment plan was not completed correctly, or she would not have admitted Resident A into her home because she does not provide the level of care Resident A needs in her home.

On 1/24/24, I completed an unannounced on-site investigation at the home. I interviewed Resident A and Ms. Robinson. Upon entering Resident A's room, I observed her bedside commode pan to be nearly completely full of urine and feces. There was a very strong odor in her room.

Resident A stated Ms. Robinson will not provide care for her. She stated she toilets herself using her bedside commode, but she cannot clean it herself. She stated the urine and feces observed in the pan has been there at least 24 hours and the last time it was emptied Relative A was the one who emptied it. She stated she also cannot control her urine so she will urinate on the bed and the floor and Ms. Robinson will not clean it. She stated Ms. Robinson does not speak to or respond to her. She stated she is making efforts to find a new placement with the assistance of Adult Protective Services (APS), but it is not a quick process. She stated she wishes Ms. Robinson would acknowledge her and assist her with toileting until she can find her new placement.

Ms. Robinson stated she does not provide the level of care in her home that Resident A needs. She stated she was told by Lakeland Hospital that Resident A could primarily care for herself, use the restroom, and did not need toileting assistance. She stated when Resident A arrived at the home, she learned Resident A needed toileting assistance and will urinate in her bed as well. She stated Resident A refuses hygiene care from her bath aide and will no longer comply with medical treatment. She stated none of this was listed on her assessment plan, or she would not have admitted Resident A to the home knowing she does not provide that level of care. She stated she did give Resident A the written 30-day notice, she knows Resident A is working with APS to move from the home, and she will pursue eviction after the 30-day notice period is up if Resident A does not move because she cannot care for Resident A.

I reviewed Resident A's *Assessment Plan for AFC Residents*. The assessment plan was completed on Resident A's move-in date of 11/2/23. Regarding toilet, it was noted Resident A needs assistance and can use her commode most days "but won't most days." It was also noted on the assessment plan that Resident A is "barely mobile [and] has no control of [her] urine output, [she] just goes." It was noted Resident A refuses hygiene care, personal care, medications, and wearing clothing. The plan was signed by Resident A, who is her own guardian, Ms. Robinson, and Jan Matijevic from APS. Ms. Robinson acknowledged she signed the assessment plan.

Prior to leaving, I discussed the odor in the home with Mr. Robinson. She acknowledged the commode had not been emptied since the previous day, to her knowledge, and confirmed Relative A emptied it. I advised her that although Resident A's care needs are not the level of care she typically provides, she is responsible for providing the care specified in Resident A's assessment plan because she agreed to that when signing the plan and admitting Resident A into the home. She expressed understanding and reported she would work with Resident A

to ensure her toileting needs are met and she will acknowledge Resident A when Resident A requests her assistance.

On 1/24/24, I exchanged emails with APS worker Ms. Matijevic who confirmed she is working with Resident A to find a new placement.

APPLICABLE RULE	
R 400.1407	Resident admission and discharge criteria
	(2) A licensee shall not accept or retain a resident for care unless and until a resident assessment plan is made and it is determined that the resident is suitable pursuant to the following provisions: (a) The amount of personal care, supervision, and protection required by the resident is available in the home.
ANALYSIS:	<p>Resident A's assessment plan noted Resident A has a commode for toileting, although she does not regularly use it, and she cannot control her urine output. Ms. Robinson signed the assessment plan on the day of Resident A's admission to the home.</p> <p>Ms. Robinson reported she does not provide the level of care Resident A needs in her home. She stated she was not made aware of Resident A's commode use, incontinence, and refusal to engage with personal care, or she would not have accepted Resident A into her home.</p> <p>I observed Resident A's commode pan to be nearly full of feces and urine.</p> <p>Resident A and Ms. Robinson confirmed Resident A's commode was not emptied for approximately 24 hours prior to my on-site investigation.</p> <p>Based on the interviews completed and observations made, there is sufficient evidence that Ms. Robinson accepted and retained Resident A for care without confirming the level of personal care, supervision, and protection Resident A needs were available in the home.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.1409	Resident rights; licensee responsibilities.
	<p>(1) Upon a resident's admission to the home, the licensee shall inform and explain to the resident or the resident's designated representative all of the following resident rights:</p> <p>(o) The right to be treated with consideration and respect, with due recognition of personal dignity, individuality, and the need for privacy.</p>
ANALYSIS:	<p>The odor in Resident A's room was extremely strong due to the nearly full pan of urine and feces that was near Resident A's bed.</p> <p>Resident A reported Ms. Robinson does not acknowledge her or clean Resident A's commode.</p> <p>Ms. Robinson and Resident A reported the commode in Resident A's room had not been emptied for approximately 24 hours. She agreed to acknowledge Resident A and clean her commode after I advised her that she must meet Resident A's care needs. She initially was refusing stating she does not provide the level of care Resident A needs.</p> <p>Based on the interviews completed and observations made, there is sufficient evidence that Ms. Robinson did not treat Resident A with consideration and respect with concern for her personal dignity by Resident A being unable to clean her own commode and being left in a room that had an odor of urine and feces regularly for periods of approximately 24 hours.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.1426	Maintenance of premises.
	1)The premises shall be maintained in a clean and safe condition.

ANALYSIS:	<p>Resident A's commode pan was observed to be nearly full of urine and feces.</p> <p>Ms. Robinson and Resident A reported the commode had not been emptied in approximately 24 hours.</p> <p>Resident A reported she will also urinate on the bed and the floor and Ms. Robinson will not clean it.</p> <p>There was a very strong odor in Resident A's room due to the commode pan not being emptied appropriately.</p> <p>Based on the interviews completed and observations made, there is sufficient evidence that the premises are not maintained in a clean condition.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On 3/6/24, I completed an exit conference with Ms. Robinson who did not dispute my findings or recommendations.

III. RECOMMENDATION

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

Cassandra Duursma 2/29/24

Cassandra Duursma
Licensing Consultant

Date

Approved By:

Russell Misiak

3/6/24

Russell B. Misiak
Area Manager

Date