



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 6, 2019

Second Chance Counseling Center, SA0240044  
C/O Sabrina Spearman  
231 State St., Suite 6  
Petoskey, MI 49770

SUBJECT: Post-Licensure Survey Findings for Second Chance Counseling Center

Dear Sabrina Spearman:

A post-licensure survey was conducted on August 26, 2019 at Second Chance Counseling Center (SA0240044), pursuant to Michigan Public Health Code, Act 368 of 1978, Part 62, Section 333.6238.

Participants included:

- Sabrina Spearman, LLMSW, Counselor, Second Chance Counseling Center
- Chance Gawlinski, LLMSW, CADC, Counselor, Second Chance Counseling Center
- Andrew Schefke, State Health Care Surveyor, MDLARA

The survey identified non-compliance with the following requirements:

**R 325.1333 Complaint filed with program; policy and procedure for initiation, investigation, and resolution.**

(1) An applicant or licensee shall adopt written policies and procedures for the initiation, investigation, and resolution of complaints filed with the program. These policies and procedures shall be provided by the applicant or licensee to each recipient at the time of admission to the program and upon request. Program complaint policies and procedures shall contain, at a minimum, all of the following:

- (a) A statement that a recipient, or the recipient's legal guardian or designated representative when that person has standing, may file a complaint to the program, the department, or both; and, a statement that the person need not cite a specific violation of law or rule.
- (b) A complainant's contact information, unless the complainant wants to remain anonymous.
- (c) A process for filing a complaint with the program about potential violations of law or rule, including a process to assist the complainant with writing a complaint when an oral complaint is not resolved to the complainant's satisfaction.
- (d) A process to document when oral complaints are resolved and when investigation activities are discontinued.
- (e) If a standard complaint form is used, a copy of the form must be provided to each person at the time of admission or treatment and upon request.

- (f) The name, title, location, and contact information of the individual who is responsible for receiving complaints and conducting complaint investigations for the program, as well as the process for communicating with that individual.
- (g) A requirement that all program complaint investigations be started within 72 hours of receipt of a complaint or discovery of the allegation or allegations, whichever occurs first.
- (h) A requirement that all program complaint investigations be completed within 15 days of receipt of the complaint or discovery of the allegation or allegations, whichever occurs first.
- (i) A requirement that the program shall deliver to the complainant within 30 days of receipt of the program complaint or discovery of the allegation or allegations, whichever occurs first, the written results of the investigation or a written status report indicating when the written results of the investigation may be expected. The written results shall inform the complainant that the complainant may file a program complaint with the department and include the department's contact information. This subdivision does not apply to a complaint that is filed anonymously.

During the licensure survey, the program was unable to provide a policy and procedure that addressed the initiation, investigation, and resolution of complaints.

**R 325.1339 Emergency preparedness plan.**

An applicant or licensee shall have an all-hazard emergency preparedness plan to meet the health and safety needs of its recipient population and personnel. The emergency preparedness plan shall provide guidance on how to respond to emergency situations that could impact the operation of the program, such as natural, man-made disasters or other emergent situations. The emergency preparedness plan shall include all of the following components: (1) A risk assessment. (2) A written emergency response plan. (3) Written policies and procedures that support the successful execution of the emergency response plan. (4) A written communication plan. (5) A written training and testing plan.

During the licensure survey, the program was unable to provide an emergency preparedness plan.

**R 325.1359 Support and referral services.**

- (1) A licensee shall offer support services, either onsite or by referral, based upon its assessment of the service categories offered and recipient needs. The assessment shall address all of the following support services:
  - (a) Support and rehabilitation services, including social, educational, and recreational.
  - (b) Job development and placement.
  - (c) Financial counseling.
  - (d) Legal counseling.
  - (e) Nutritional education and counseling.
- (2) A licensee shall maintain a current list of support services available onsite or by

referral. A licensee shall review the list with each recipient as part of the admission procedure and as part of ongoing treatment planning, management, and coordination.

During the licensure survey, the program was unable to provide a current list of support services.

**R 325.1397(4)(e) Program policy and procedures**

As part of the admission procedure to a program, a recipient shall receive all of the following: A form that indicates that the recipient understands the rights and consents to specific restrictions of rights based on program policy. The recipient shall sign this form. A copy of the form shall be provided to the recipient and also become a part of the recipient's record.

During the licensure survey, the program was unable to provide documentation of recipients' acknowledgment of receipt of the Department's recipient rights brochure.

Based upon the state licensure survey inspection findings, Second Chance Counseling Center (SA0240044) is in substantial non-compliance with MCL 333.6201 through MCL 333.6251 and/or the Michigan Administrative Rules R325.1301 through R325.1399 for Substance Use Disorder facilities, as applicable. Second Chance Counseling Center is required to provide a written plan of correction to the Department within 10 days of receipt of this report.



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