



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF HEALTH CARE SERVICES

MIKE ZIMMER  
DIRECTOR

February 27, 2015

Narconon Freedom Center, SA0130110  
John Walser, Program Director  
809 West Erie Street  
Albion, MI 49224

SUBJECT: Investigation Regarding a Complaint

Dear Mr. Walser:

An inspection was conducted on January 5, 2015 at Narconon Freedom Center, located at 809 West Erie Street, MI 49224, pursuant to a complaint that was filed with the Department of Licensing and Regulatory Affairs Bureau of Health Services.

Participants included:

- John Walser, Director, Narconon Freedom Center
- Valerie Buck, Narconon Freedom Center
- Jay Calewarts, Manager, LARA, State Licensing Section
- James Hoyt, Regulatory Officer, LARA, State Licensing Section

A complaint was received by LARA regarding a client contracting scabies while at the facility and not being treated, insurance being billed for detox and the program not refunding the money they paid upfront for detox services and lack of required staff in the facility. During an interview with the program on January 5, 2015 it was revealed that the facility had agreed to refund and both the facility and party you provided payment for the client signed an agreement on October 27, 2014 to refund the \$9000 dollars. As of the day of the complaint survey the program had not issued a refund. When asked why the program did not issue the refund yet, the program stated that they were a non-profit and were waiting until they had sufficient funds. However the program agreed to issue the refund and mail it out the next business day.

The clients chart was reviewed in regards to the scabies complaint and the physician diagnosed the client with severe acne on back and chest and prescribed Doxycycline. No records of scabies were in the client file. The client stated that his itching symptoms continued and said that he was treated for scabies after leaving the facility and is severe itching symptoms went away. Allegation could not be substantiated.

On the day of the inspection adequate staff members were onsite. The allegation of not having proper staff could not be substantiated.

During the survey the program was asked what their relapse rate was for clients that complete the program. The facility could not provide recent data in regards relapse rate after completion of the program. This data, which should be obtained during contact between the client and program through the aftercare program, must be available during an inspection per R325.14113.

Per R325.14113, the program is also required to set up measurable goals and objectives and at least annually prepare an evaluation progress report which would contain details on how the program can improve its performance in areas that need improvement. During interview with the director the program was not able to provide any recent data on goals and objectives set or an evaluation progress report stating the person that previously did this had recently resigned.

At the completion of investigation it was determined that this program is not in compliance with the state administrative R325.14113. The program must correct the above deficiency within 60 days of the date of this report. Pursuant to rule 325.14205 (2), your program will have follow-up survey to verify corrections have been made.



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