



# CHEBOYGAN COUNTY PLANNING COMMISSION

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870 SOUTH MAIN ST. ■ PO BOX 70 ■ CHEBOYGAN, MI 49721  
PHONE: (231)627-8489 ■ FAX: (231)627-3646

**CHEBOYGAN COUNTY PLANNING COMMISSION MEETING & PUBLIC HEARING  
WEDNESDAY, SEPTEMBER 5, 2018 AT 7:00 PM  
ROOM 135 – COMMISSIONERS ROOM  
CHEBOYGAN COUNTY BUILDING, 870 S. MAIN ST., CHEBOYGAN, MI 49721**

## **AGENDA**

### **CALL TO ORDER**

### **PLEDGE OF ALLEGIANCE**

### **ROLL CALL**

### **APPROVAL OF AGENDA**

### **APPROVAL OF MINUTES**

### **PUBLIC HEARING AND ACTION ON REQUESTS**

1. **David Frame** - The applicant has requested site plan review approval of a proposed site condominium, pursuant to section 20.3.d. of the Zoning Ordinance for construction of Private Storage Buildings. The property is located at 1685 Orchard Beach Rd., Benton Township, section 29, parcel # 104-029-200-007-10 and is zoned Agriculture and Forestry Management (M-AF).
2. **Lawrence Hanson and Heritage Cove Farm, Inc.** – The applicants have requested and received a Special Use Permit and approval based upon a submitted site plan and other evidence as part of the record, with such approval being appealed by Plaintiff/Appellant Grandview Beach Association. Remaining matters pursuant to the Michigan Court of Appeals is a determination under Cheboygan County Zoning Ordinance Section 18.7.e. that reads as follows: “The proposed special land use will not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.” The property is located at 625 Grandview Beach Rd., Tuscarora Township, sections 5 and 6, parcel #162-005-300-002-00, #162-006-400-004-00 and #162-006-400-005-00 and are zoned Agriculture and Forestry Management District (M-AF) and Lake and Stream Protection District (P-LS).

### **UNFINISHED BUSINESS**

### **NEW BUSINESS**

### **STAFF REPORT**

### **PLANNING COMMISSION COMMENTS**

### **PUBLIC COMMENTS**

### **ADJOURN**



# CHEBOYGAN COUNTY PLANNING COMMISSION

870 SOUTH MAIN ST., ROOM 103 ■ PO BOX 70 ■ CHEBOYGAN, MI 49721  
PHONE: (231)627-8489 ■ TDD: (800)649-3777

## CHEBOYGAN COUNTY PLANNING COMMISSION MEETING & PUBLIC HEARING WEDNESDAY, AUGUST 15, 2018 AT 7:00 PM ROOM 135 – COMMISSIONER'S ROOM – CHEBOYGAN COUNTY BUILDING

**PRESENT:** Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon  
**ABSENT:** Borowicz, Jazdyk  
**STAFF:** Michael Turisk  
**GUESTS:** Eric Boyd, Roberta Matelski, John F. Brown, Carl Muscott, Cal Gouine, John Moore, Russell Crawford, Cheryl Crawford, Karen Johnson, Bob Lyon, David Meckstouth

The meeting was called to order by Chairperson Croft at 7:00pm.

### PLEDGE OF ALLEGIANCE

Chairperson Croft led the Pledge of Allegiance.

### APPROVAL OF AGENDA

The meeting agenda was presented. **Motion** by Mr. Churchill, seconded by Mr. Kavanaugh, to approve the agenda as presented. Motion carried. 7 Ayes (Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon), 0 Nays, 2 Absent (Borowicz, Jazdyk)

### APPROVAL OF MINUTES

The August 1, 2018 Planning Commission minutes were presented. **Motion** by Mr. Churchill, seconded by Mr. Bartlett, to approve the meeting minutes as presented. Motion carried. 7 Ayes (Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon), 0 Nays, 2 Absent (Borowicz, Jazdyk)

### PUBLIC HEARING AND ACTION ON REQUESTS

**Tuscarora Township** – An amendment of an approved Special Use Permit to include an outdoor recreational area (sports field), per Section 9.3.4. of the Zoning Ordinance. The property is currently unaddressed and located adjacent and to the east and south of Cooperation Park in Tuscarora Township, Section 35, parcel #161-035-200-031-03 (this parcel was recently created via combining parcel #s 161-035-200-030-00 and 161-035-200-031-02). The subject property is zoned Agriculture and Forestry Management (M-AF) and Commercial Development (D-CM).

Mr. Turisk reviewed the background information contained in the staff report.

Mr. Kavanaugh asked if there will be any additional irrigation wells. A representative for Tuscarora Township stated yes, but he does not know the proposed location of the well. Mr. Kavanaugh stated that this can be added to the site plan record. Mr. Turisk stated that a recommended condition of approval is that the township obtains any applicable permits from the Department of Building Safety. Mr. Turisk stated that Supervisor Ridley indicated that next year there will be dugouts and backstop installed. Ms. Croft stated that the proposed location for the dugouts and backstop are not indicated on the site plan. Mr. Turisk noted the location for the dugouts and backstop. Mr. Kavanaugh stated that if the Planning Commission approves this application, they will request that the site plan be updated to include the backstop and dugouts.

Ms. Croft asked for public comments. Mr. Muscott noted that there is a sign at Cooperation Park that states it was established in 1963. Mr. Muscott stated that Cooperation Park is a great asset. Mr. Muscott noted the application states that it does not include the dugouts and backstop and he believes it should be included as the township will not have to submit an application to amend the site plan. Discussion was held. Public comment closed.

**Motion** by Mr. Freese, seconded by Mr. Kavanaugh, to grant the topography waiver request. Motion carried. 7 Ayes (Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon), 0 Nays, 2 Absent (Borowicz, Jazdyk)

The Planning Commission reviewed and approved the General Findings. The Planning Commission reviewed and approved the Finding of Fact Under Section 18.7 and the Specific Findings of Fact Under Section 20.10. **Motion** by Mr. Kavanaugh, seconded by Mr. Freese, to approve the special use permit based on the General Findings, Finding of Fact Under Section 18.7 and the Specific Findings of Fact Under Section 20.10 with the following conditions:

1. Submit an amended site plan (to include backstop, dugouts, and water well) to Planning & Zoning Department
2. Meet District Health Department #4 requirements
3. Meet Department of Building Safety requirements

Motion carried. 7 Ayes (Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon), 0 Nays, 2 Absent (Borowicz, Jazdyk)

**David McDade** – A Special Use Permit request for a restaurant/bar, per Section 10.3.14. of the Zoning Ordinance. The subject property is zoned Lake and Stream Protection (P-LS) and Commercial Development (D-CM) and located at 3249 Gratiot St. in Tuscarora Township, Sections 18 and 19, parcel #162-019-100-032-00. The applicant has requested that this application be tabled until the October 3, 2018 Planning Commission meeting.

**Motion** by Mr. Freese, seconded by Mr. Kavanaugh, to table this special use permit request until the October 3, 2018 Planning Commission meeting. Motion carried. 7 Ayes (Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon), 0 Nays, 2 Absent (Borowicz, Jazdyk)

**Cheboygan County Planning Commission** – An Ordinance to amend Cheboygan County Zoning Ordinance #200 regarding removing automobile, boat, motorized and non-motorized recreational vehicles, farm machinery, sales, and repair and rental establishments from the list of Permitted Uses in the Commercial Development (D-CM) zoning districts, and adding these uses to the list of Special Uses in the D-CM zoning districts.)

Mr. Turisk stated that there is one word missing from the proposed amendment and that is “repair”. Mr. Turisk explained that it has been added to the proposed amendment and noted that it is highlighted in red. Discussion was held.

Ms. Croft asked for public comments. Mr. Brown asked if this language is more restrictive. Mr. Freese stated yes. Public comment closed.

**Motion** by Mr. Freese, seconded by Mr. Kavanaugh, to send the entire amendment to the Cheboygan County Board of Commissioners with a recommendation for approval to be considered at their earliest convenience. Motion carried. 7 Ayes (Bartlett, Freese, Kavanaugh, Croft, Ostwald, Churchill, Lyon), 0 Nays, 2 Absent (Borowicz, Jazdyk)

## **UNFINISHED BUSINESS**

### **Continued Discussion Regarding Draft Planned Unit Development Amendments**

Mr. Turisk stated that Mr. Graham recommends stating that a PUD would allow a mix of special or permitted uses listed in the district. Mr. Turisk stated that Mr. Graham also suggests identifying potential uses outside of the respective zoning district that may be appropriate. Mr. Turisk stated that this would address Mr. Graham’s concerns from a legal standpoint.

Mr. Freese stated that what Mr. Graham suggests, is the same as that which the Planning Commission is attempting to do. Mr. Kavanaugh asked if Mr. Turisk agrees with what the Planning Commission has tried to do by putting the uses into categories. Mr. Turisk stated that Mr. Graham suggests that we do not have to do this for the Planned Unit Development amendment. Mr. Turisk stated that is more of a formatting issue and should be tackled during a broader comprehensive update to the Zoning Ordinance. Mr. Turisk suggested the following language “the uses listed under permitted and special uses may be allowed as part of a PUD application in addition to the following uses:”. Mr. Turisk stated that the additional uses can be pulled from other zoning districts. Mr. Turisk stated that he prefers tables/matrixes, but in this case it should be reserved for a broader amendment effort. Mr. Turisk stated that Mr. Freese’s efforts on the matrix will be beneficial when we tackle the comprehensive update to the Zoning Ordinance. Mr. Turisk stated that he is conveying Mr. Graham’s recommendation and his agreement with the recommendation to the Planning Commission. Mr. Turisk stated that if the Planning Commission feels that they should take a different direction, it is open for discussion. Mr. Freese noted that there are 13 different terms for single family dwelling, two family dwelling and multi family dwelling in the Zoning Ordinance. Mr. Freese asked if it is acceptable to list only single family dwelling, two family dwelling and multi family dwelling. Mr. Turisk stated that Mr. Graham is suggesting that this be a broader amendment to the Zoning Ordinance. Mr. Freese proposed using the 20 categories that he created and that additional categories could be created. Mr. Freese noted that one term is agricultural activities and is a broad term. Mr. Freese stated that we would have to identify which existing terms fit these categories and this could be something that the Planning Commission could use. Discussion was held. Mr. Kavanaugh suggested that Mr. Turisk prepare an example of a

zoning district using the proposed language and uses outside of the zoning district that the Planning Commission may want to consider.

Mr. Turisk stated that Mr. Graham suggests that a PUD be approved under the special use permit process as opposed to a rezoning. Discussion was held.

Mr. Freese stated he will work on consolidation and refinement of definitions.

**NEW BUSINESS**

Mr. Freese stated that he talked with Lindsey Gardner, who is the MSU Extension Educator. Mr. Freese stated that she gave him sample regulations on governing livestock and the Planning Commission may want to incorporate it in the regulation. Discussion was held regarding amending the Zoning Ordinance.

**STAFF REPORT**

Mr. Turisk stated that Heritage Cove Farm will be on the September 5, 2018 Planning Commission agenda. Mr. Turisk stated that copies of the impact study have been distributed to the Planning Commission members.

Mr. Turisk stated that the solar array amendment is being reviewed by legal counsel.

Discussion was held regarding the Citizen Planner program that will be starting on October 1, 2018.

**PLANNING COMMISSION COMMENTS**

No comments.

**PUBLIC COMMENTS**

Mr. Gouine stated that the Cheboygan County Board of Commissioners voted and they want to have the final approval on PUD's.

**ADJOURN**

**Motion** by Mr. Kavanaugh to adjourn. Motion carried. Meeting was adjourned at 8:11pm.

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Charles Freese  
Planning Commission Secretary

# CHEBOYGAN COUNTY PLANNING COMMISSION

David Frame

## Exhibit List

1. Cheboygan County Zoning Ordinance
2. Cheboygan County Master Plan
3. Site Plan Review Application (6 Pages)
4. Project Narrative (3 Pages)
5. Stormwater Control (3 Pages)
6. Correspondence from County Road Commission (1 Page)
7. Site Plan Dated 07/30/18 (1 Page)
8. Warranty Deed Dated 08/13/18 (3 Pages)
9. Certificate Of Survey Dated 06/03/18 (2 Pages)
10. Photo of proposed pole barn (1 Page)
11. Elevation Views (2 Pages)
12. Plan View Multi-Unit Storage (1 Page)
13. Details on Entry Sign (1 Page)
14. Photo – Sign Location (1 Page)
15. Examples of Lighting Fixtures (1 Page)
16. Mailing List (2 Pages)
17. Staff Report (4 Pages)
- 18.
- 19.
- 20.

Note: Planning Commission members have exhibits 1 and 2.





# CHEBOYGAN COUNTY PLANNING & ZONING DEPARTMENT

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1. Describe all anticipated activities (e.g. type of business, hours of operation, number of employees, etc). Attach additional sheets if needed.

Site Condominium development for privately owned pole barns, to be used for private storage of boats and other items generally required at lake homes.

2. Site Plan Standards.

### PLEASE EXPLAIN HOW YOUR REQUEST MEETS EACH OF THE FOLLOWING STANDARDS

- a. The site plan shall be designed so that there is a limited amount of change in the overall natural contours of the site and shall minimize reshaping in favor of designing the project to respect existing features of the site in relation to topography, the size and type of the lot, the character of adjoining property and the type and size of buildings. The site shall be developed so as not to impede the normal and orderly development or improvement of surrounding property for uses permitted in this Ordinance.

See Attachment A, for site plan checklist and standards, for all items.

- b. The landscape shall be preserved in its natural state, insofar as practical, by minimizing tree and soil removal, and by topographic modifications which result in smooth natural appearing slopes as opposed to abrupt changes in grade between the project and adjacent areas.
- c. Special attention shall be given to proper site drainage so that removal of storm waters will not adversely affect neighboring properties.
- d. The site plan shall provide reasonable, visual and sound privacy for all dwelling units located therein. Fences, walls, barriers and landscaping shall be used, as appropriate, for the protection and enhancement of property and for the privacy of its occupants.
- e. All buildings or groups of buildings should be so arranged as to permit emergency vehicle access by some practical means.
- f. Every structure or dwelling unit shall have access to a public street, walkway or other area dedicated to common use.
- g. For subdivision plats and subdivision condominiums, there shall be a pedestrian circulation system as approved by the Planning Commission.
- h. Exterior lighting shall be arranged as follows:
- i. It is deflected away from adjacent properties. \_\_\_\_\_
  - ii. It does not impede the vision of traffic along adjacent streets. \_\_\_\_\_
  - iii. It does not unnecessarily illuminate night skies. \_\_\_\_\_

SITE PLAN REVIEW APPLICATION

# SITE PLAN REQUIREMENT CHECKLIST

(TO BE SUBMITTED WITH APPLICATION AND SITE PLAN)

ALL ITEMS LISTED BELOW MUST BE SUBMITTED IN ORDER FOR THIS APPLICATION TO BE DEEMED COMPLETE. INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED OR PROCESSED. EACH SITE PLAN SHALL DEPICT THE ITEMS LISTED BELOW, EXCEPT FOR THOSE ITEMS DETERMINED DURING THE PRE-APPLICATION CONFERENCE TO NOT BE APPLICABLE.

PLACE A CHECK MARK NEXT TO EACH REQUIREMENT TO SHOW THAT THE INFORMATION HAS BEEN SUPPLIED OR THAT A WAIVER IS BEING REQUESTED. IF A WAIVER IS BEING REQUESTED PLEASE NOTE ON THE NEXT PAGE THE REASON FOR THE WAIVER. SIGN AND DATE THIS CHECKLIST WHEN ALL ITEMS HAVE BEEN COMPLETED. PLEASE SUBMIT THIS CHECKLIST WITH YOUR APPLICATION.

INFORMATION SUPPLIED	WAIVER REQUESTED	REQUIREMENT
✓		a. North arrow, scale and date of original submittal and last revision. Site plan is to be drawn at a scale of 1 inch = 100 ft. or less.
✓		b. Seal of the registered engineer, architect, landscape architect, surveyor, planner, or other site plan preparer. Location of proposed and/or existing property lines, dimensions, legal descriptions, setback lines and monument locations.
✓		c. Location of existing and proposed public roads, rights-of-way and private easements of record and abutting streets.
	✓	d. Topography at maximum five foot intervals or appropriate topographic elevations to accurately represent existing and proposed grades and drainage flows.
	✓	e. Location and elevations of existing water courses and water bodies, including county drains and man-made surface drainage ways, stormwater controls, flood plains, and wetlands.
✓		f. Location of existing and proposed buildings and intended uses thereof.
✓		g. Details of entryway and sign locations should be separately depicted with an elevation view.
✓		h. Location, design, and dimensions of existing and/or proposed curbing, barrier free access, carports, parking areas (including indication of all spaces and method of surfacing), fire lanes and all lighting thereof.
✓		i. Location, size, and characteristics of all loading and unloading areas.
	✓	j. Location and design of all sidewalks, walkways, bicycle paths and areas for public use as approved by the Planning Commission.
✓		k. Location of all other utilities on the site including but not limited to wells, septic systems, stormwater controls, natural gas, electric, cable TV, telephone and steam and proposed utility easements.
✓		l. Proposed location, dimensions and details of common open spaces and common facilities such as community buildings or swimming pools if applicable.

# SITE PLAN REQUIREMENT CHECKLIST

(TO BE SUBMITTED WITH APPLICATION AND SITE PLAN)

INFORMATION SUPPLIED	WAIVER REQUESTED	REQUIREMENT
✓		m. Location and specifications for all fences, walls, and other screening features.
✓		n. Location and specifications for all existing and proposed perimeter and internal landscaping and other buffering features.
✓		o. Exterior lighting locations with area of illumination illustrated as well as the type of fixtures and shielding to be used.
	✓	p. Location, size and specifications for screening of all trash receptacles and other solid waste disposal facilities.
✓		q. Elevation drawing(s) for proposed commercial and industrial structures.
✓		r. Location and specifications for any existing or proposed above or below ground storage facilities for any chemicals, salts, flammable materials, or hazardous materials as well
✓		s. Floor plans, when needed to determine the number of parking spaces required.

PLEASE LIST THE REQUIREMENT FOR WHICH A WAIVER IS BEING REQUESTED. ALSO PROVIDE AN EXPLANATION/REASON FOR THE WAIVER REQUEST.

<u>SECTION</u>	<u>REASON FOR WAIVER REQUEST</u>
<u>d&amp;e</u>	<u>See Attachment A, pg 1</u>
<u>j&amp;p</u>	<u>See Attachment A, pg 2</u>

**AFFIDAVIT**

I CERTIFY THAT ALL SITE PLAN REQUIREMENTS (A THROUGH S) ARE DRAWN ON THE SITE PLAN, ATTACHED TO THIS APPLICATION AND/OR I AM REQUESTING A WAIVER. I CERTIFY THAT ALL INFORMATION AND DATA ATTACHED TO AND MADE PART OF THIS SPECIAL LAND USE PERMIT APPLICATION ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

David Frame  
SIGNATURE

8-15-18  
DATE



# CHEBOYGAN COUNTY PLANNING & ZONING DEPARTMENT

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i. The arrangement of public or common ways for vehicular and pedestrian circulation shall respect the pattern of existing or planned streets and pedestrian or bicycle pathways in the area. Streets and drives which are part of an existing or planned street pattern which serves adjacent development shall be of a width appropriate to the traffic volume they will carry and shall have a dedicated right-of-way equal to that specified in the Master Plan.

\_\_\_\_\_

j. Site plans shall conform to all applicable requirements of state and federal statutes and the Cheboygan County Master Plan, and approval may be conditioned on the applicant receiving necessary state and federal permits.

\_\_\_\_\_

3. Size of property in sq. ft. or acres: 23 acres

4. Present use of property: Ag / Forestry

5. Does the proposed use of the property include or involve either:

- Junk or salvage yard (Section 3.6)  YES  NO
- Mineral extraction (Section 17.17)  YES  NO

*If YES, this application must include a written plan as described in the Zoning Ordinance.*

6. Attach a copy of Warranty Deed or other proof of ownership.

7. Attach a copy of certified Property Survey or dimensioned property land plat.

### AFFIDAVIT

The undersigned affirms that the information and plans submitted in this application are true and correct to the best of the undersigned's knowledge.

Applicant's Signature David Frame Date 8-4-18

Does the property owner give permission for County zoning officials to enter his or her property for inspection purposes?

Yes  No

Owner's Signature David Frame Date 8-13-18

SITE PLAN REVIEW APPLICATION



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## FOR PLANNING / ZONING DEPT. USE ONLY

Date Received:	08/15/18	Notes:
Fee Amount Received:	\$ 170.00	
Receipt Number:	6386	
Public Hearing Date:	· 9/5/18	

Planning/Zoning Administrator Approval:

A handwritten signature in blue ink, appearing to be "J. D. ...", written over a horizontal line.

Signature

A handwritten date "8.21.2018" in blue ink, written over a horizontal line.

Date

SITE PLAN REVIEW APPLICATION

Site Plan Application for Site Condominium Development,

1685 Orchard Beach Road, Cheboygan, MI

The planned development of this 23 acre site is for a site condominium exclusively for pole barns for storage. The project includes a private road servicing all units, to be jointly owned by the private owners of the individual units. There are 13 private land units, and 4 multi-unit buildings planned as shown on the site plan prepared by Alan Granger. The private land units are to be sold to individuals who want to have a pole barn built to their specifications for storage use. There are also 4 multi-unit buildings with 6 units per building for storage that will be sold as private building units. The owners of the building units will jointly own the 3.9 acre land unit labeled F1. The master deed will prohibit by deed restriction the following; Retail businesses or dwelling units. There will also be deed restrictions on outside storage of materials and vehicles to insure the property is maintained properly. The primary usage will be for storage of boats and other items associated with lakefront property.

**Site Plan Requirement Checklist items;**

Item a thru c; See Site Plan prepared by Alan Granger

Item d; requesting waiver for this item. The existing property is covered by a very dense plantation of Scotch Pines planted 35 years ago and never harvested or thinned. It would be very difficult and expensive at the present time to do a topo on this property, and I don't believe it is necessary at this stage of the project. I have walked the property extensively 3 times and mapped the existing topography to the aerial map provided by the county website, and used this information to develop the basis for the site plan that is provided.

Item e; There are no bodies of water within 500 feet of the property lines, there are no streams or other waterways on the property. It is basically high and dry, and very well drained soils, with no outflow of water apparent to any neighboring properties.

Item f; There are no existing buildings on the property. Proposed buildings are shown on the color coded site plan.

Item g; Requesting approval for a sign appropriate for identifying the project, it's intended use, and contact information for the developer. See attachment G for this.

Items h; Parking Areas are shown on Attachment M. The minimum size shown is 30' x 30', for the privately owned pole barns, shown on land units L1 thru L13.

For the Multi-Unit storage buildings the parking and loading areas are shown as 30 feet by the width of the individual units, e.g. 30' x 24'. The location for additional parking is also shown for area F1, as 30' x 200'.

Item i; Loading and Unloading areas are shown on Attachment M, this is labeled parking area. The surface will be 5" of compacted crushed limestone road gravel, to be used for both parking, and loading area.

Item j; There are no public use areas in this project. The entire project is to be privately owned. A gateway will be built to keep access limited to the owners, or authorized contractors, other authorized persons, and emergency personnel and vehicles.

Item k; The only Utility to be provided to the project is electrical power. This will be run underground next to the planned road, within the 36' wide right-of-way. Connection boxes to individual properties will be within the right-of-way. The 36 foot wide right-of-way provides for a 16' wide road, plus 10' on each side for the electrical power lines run underground.

Item l; There are no common facilities or buildings in this project. The only common element in the project is the road, and gateway that is owned jointly by the property owners.

Item m & n; Location of fences, walls, and other screening; The color coded site plan shows a row of pine trees to be planted on the property lines between the buildings to provide a measure of separation and screening between individual buildings. Also shown is a 50' wide buffer of existing trees at the road frontage on Orchard Beach road. In addition, there is an area of existing White Birch and other existing trees between area F1 and unit L2. See attachment M for this.

Item o; Lighting. The master deed will limit the lighting to downward projecting fixtures on the building entrances only, and not allow any pole type lighting on the project. This limitation along with the 50' wide tree buffer, would limit any outside effect of lighting to the road and neighboring properties. Examples of the proposed lighting fixtures are shown in Attachment O.

Item p; No common waste receptacles are provided in the project. Owners are required to use their own waste receptacles and arrange for pickup or delivery to approved transfer station(s).

Item q; Elevation drawings, see Attachment Q, pages 1 thru 4

Item r; There are no common facilities in the project to house any chemicals, salts, flammable materials or hazardous materials. The master deed will require the owners to use an approved double wall steel cabinet for any fuel or flammable liquids stored inside the pole barns.

Item s; Floor Plans; See attachment Q, page 4.

## **SITE PLAN STANDARDS**

Item a; The site plan has been designed to minimize the need for any filling or reshaping of the existing land, giving each unit a relatively level building site near the private road.

Item b; The existing property is covered with a 35 year old plantation of Scotch Pines that were never harvested or thinned. The original intention was to harvest these for Christmas trees, but it never happened. The property in its current form is unusable for anything other than hunting, and is a fire hazard for all neighboring properties. The plan is to have the Scotch Pines clear cut and used as feed stock to the new particle board plant in Grayling to open this year. There are some areas covered with Aspens and White Birch trees that will be left for a buffer and for natural beauty of the site. In addition, there will be a 50' wide strip of trees left at the Orchard Beach road frontage for a screen, or buffer to road and neighboring properties. These areas are marked in green on the site plan labeled Attachment M.

Item c; Site Drainage; Requesting approval of the project with this item waived. However, my plan is to schedule a topo of the property once the Scotch Pine trees have been cleared and to have Alan Granger develop a drainage plan for the site before the road is built.

Item d; See Attachment M for this. Green shaded areas show location for existing and proposed buffers and screening.

Item e & f; The private road services all units, and is to be 16 foot wide, compacted crushed limestone road gravel. The end of the private road has a circle drive with radius large enough for emergency vehicles such as fire trucks to be able to easily turn around, and the road wide enough for 2 fire trucks to pass each other. The road easement is 36' wide, allowing 10' on each side for underground power lines. This private road will be owned in common by the owners of the condominium units, and will be maintained by the property owners association.

Item g; Streets and drives in this area do not have pedestrian walkways. Since this development is designated as private storage only, this item seems to be not applicable.

Item h; Lighting. The plan is to limit the lighting to downward projecting fixtures on the building entrances only, and not allowing any pole type lighting on the project. This limitation along with the 50' wide tree buffer, would limit any outside effect of lighting to the road and neighboring properties.

Item i; Since there are no dwelling units allowed in this project, this seems to be not applicable. There are no public use areas in this project. The entire project is to be privately owned. A gateway will be built to keep access limited to the owners, or authorized contractors, other authorized persons, and emergency personnel and vehicles.

## Orchard Beach Private Storage

Notes regarding; **Control of storm water runoff and erosion during the construction phase**

8-30-18

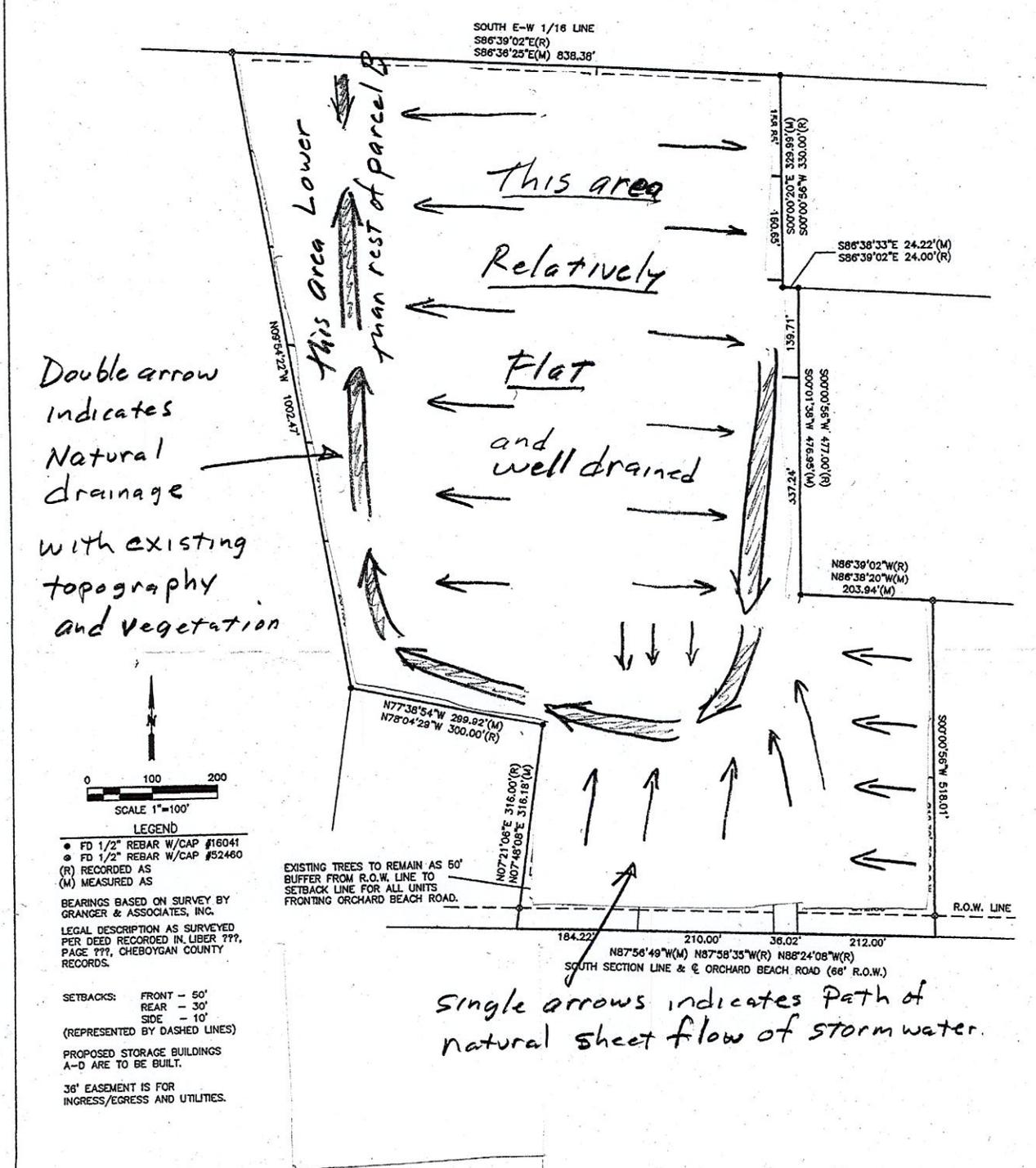
During the process of clearing the scotch pine plantation the logging equipment produces ground bark and branches into a mulch type material that is spread over the ground. This mulch will provide a ground cover, helping to absorb storm water and reduce erosion.

Also, due to the nature of the topography, any storm water runoff or erosion will be deposited on the 23 acre parcel (parcel B) under development in the lower area indicated on the drawing showing Existing Natural Drainage of Storm Water, and not affect adjacent parcels. The adjacent 12 acre parcel to the west of Parcel B is all wooded, and would absorb any remaining runoff water that left parcel B.

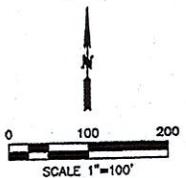
Because of this, I believe I can say with certainty that any storm water runoff or erosion would not affect any neighboring residential parcels, or county roadways or ditches.

David Frame

PART OF THE S1/2 OF THE SE1/4, SECTION 29, T37N, R1W,  
BENTON TOWNSHIP, CHEBOYGAN COUNTY, MICHIGAN



Double arrow indicates Natural drainage with existing topography and vegetation



- LEGEND**
- FD 1/2" REBAR W/CAP #16041
  - FD 1/2" REBAR W/CAP #52460
  - (R) RECORDED AS
  - (M) MEASURED AS
- BEARINGS BASED ON SURVEY BY GRANGER & ASSOCIATES, INC.
- LEGAL DESCRIPTION AS SURVEYED PER DEED RECORDED IN LIBER 777, PAGE 171, CHEBOYGAN COUNTY RECORDS.
- SETBACKS: FRONT - 50'  
REAR - 30'  
SIDE - 10'  
(REPRESENTED BY DASHED LINES)
- PROPOSED STORAGE BUILDINGS A-D ARE TO BE BUILT.
- 36' EASEMENT IS FOR INGRESS/EGRESS AND UTILITIES.

EXISTING TREES TO REMAIN AS 50' BUFFER FROM R.O.W. LINE TO SETBACK LINE FOR ALL UNITS FRONTING ORCHARD BEACH ROAD.

Single arrows indicates Path of natural sheet flow of stormwater.

DATE:	REVISIONS:	TITLE:	SCALE: 1"=100'
	EXISTING Natural Drainage of storm water	SITE PLAN	SHEET: 1 OF 1 DRAWN BY:
		CLIENT: DAVID FRAME	JOB NO. C6815-01

B-30-1B DF



## Deborah Tomlinson

---

**From:** Brent Shank <mgr@chcrc.com>  
**Sent:** Tuesday, August 28, 2018 11:17 AM  
**To:** Deborah Tomlinson  
**Subject:** Re: Site Plan Review Application For David Frame - 09/05/18 Planning Commission Meeting  
**Attachments:** mgr.vcf

Hello,

I have reviewed the proposed pole barn development for Mr. Frame. The driveway will be considered commercial by the Road Commission permit requirements. Commercial driveways require concrete curb and gutter and a hard surface (asphalt or concrete). A driveway permit will also be required for the proposed work. The sign that is proposed will also have to be located outside of the road right of way.

Thank you,

Brent Shank, P.E.  
Engineer/Manager  
Cheboygan County Road Commission  
[mgr@chcrc.com](mailto:mgr@chcrc.com)  
(231) 238-7775

On 8/28/2018 10:20 AM, Deborah Tomlinson wrote:

The following is a link to a site plan review application submitted by David Frame: <http://is0.gaslightmedia.com/cheboygancounty/ ORIGINAL /fs35-1534873121-34736.pdf>. This application will be reviewed at the 09/05/18 Planning Commission meeting. Please review the application/site plan and email me if you have any questions or comments for the Planning Commission.

Thank you!!!

Debbie

**Debbie Tomlinson**  
**Cheboygan County**  
**Planning & Zoning Department**  
PO Box 70, 870 South Main Street  
Cheboygan, MI 49721  
(231)627-8489 phone  
(231)627-3646 fax  
[debbiet@cheboygancounty.net](mailto:debbiet@cheboygancounty.net)

PART OF THE S1/2 OF THE SE1/4, SECTION 29, T37N, R1W,  
BENTON TOWNSHIP, CHEBOYGAN COUNTY, MICHIGAN

SOUTH E-W 1/16 LINE  
S86°39'02"E(R)  
S86°36'25"E(M) 838.38'

**P** indicates parking area  
at entrance to pole barn

Additional  
Parking  
Area

Legend notes

Multi Unit  
Storage Buildings  
Labeled A thru D

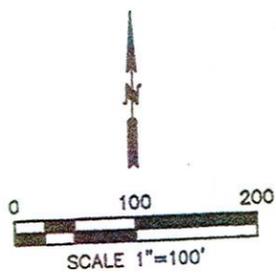
Shaded area  
indicates  
parking

50' WIDE BUFFER  
existing trees  
to be saved

Existing White  
Birch  
trees  
to be  
saved

Entrance  
Gate

Entrance  
Sign  
Location



LEGEND

- FD 1/2" REBAR W/CAP #16041
- FD 1/2" REBAR W/CAP #52460
- (R) RECORDED AS
- (M) MEASURED AS

BEARINGS BASED ON SURVEY BY  
GRANGER & ASSOCIATES, INC.

LEGAL DESCRIPTION AS SURVEYED  
PER DEED RECORDED IN LIBER ???,  
PAGE ???, CHEBOYGAN COUNTY  
RECORDS.

SETBACKS: FRONT - 50'  
REAR - 30'  
SIDE - 10'  
(REPRESENTED BY DASHED LINES)

PROPOSED STORAGE BUILDINGS  
A-D ARE TO BE BUILT.

36' EASEMENT IS FOR  
INGRESS/EGRESS AND UTILITIES.

EXISTING TREES TO REMAIN AS 50'  
BUFFER FROM R.O.W. LINE TO  
SETBACK LINE FOR ALL UNITS  
FRONTING ORCHARD BEACH ROAD.



*Alan J. Granger*

SOUTH SECTION LINE & Q ORCHARD BEACH ROAD (66' R.O.W.)

**Legend**

- Proposed location of privately owned pole barns. Barns shown in blue are approx 30' x 50' as an example
- Location of proposed Multi-Unit storage buildings which are planned as 40' x 148', 6 units/bldg
- Indicates existing or planned buffer or screening

Road Easement note; Right 10' and Left 10' of the 36' easement is utility easement for electrical service

DATE		REVISIONS	TITLE:	SCALE: 1"=100'
JULY 30, 2018		ORIGINAL ISSUE	SITE PLAN	SHEET: 1 OF 1
			CLIENT:	DRAWN BY: AJG
			DAVID FRAME	JOB NO. C6815-01
				Granger and Associates, Inc. Engineers • Surveyors 224 S. Main St., Cheboygan, MI 49721 Email: grangerandassociates@gmail.com 231-627-2763

Attachment M

## WARRANTY DEED

The Grantor, David Simmons,  
whose address is 2929 Cedar Beach Dr., Cheboygan, Michigan 49721  
conveys and warrants to Frame Land Holdings, LLC  
whose address is 740 N. Industrial Dr., Chelsea, MI 48118  
the following described premises situated in the Township of Benton,  
County of Cheboygan, and State of Michigan:

See legal description attached hereto on Exhibit A.

The consideration paid for this transfer is the sum of Forty Nine Thousand Five Hundred Dollars (\$49,500.00).

This transfer is subject to easements, reservations and restrictions of record including building and use restrictions of record and any other item of record.

Subject to rights of the public and of any governmental unit in any part of the land taken, used or deeded for street, road, or highway purposes.

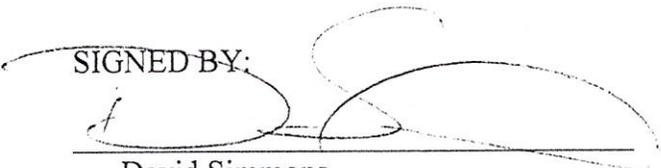
Subject to any provisions contained in any Instruments of record which provisions pertain to the transfer of divisions under Section 109(3) of the Subdivision Control Act of 1967, as amended.

This property may be located within the vicinity of farmland or a farm operation. Generally accepted agricultural and management practices which may generate noise, dust, odors and other associated conditions may be used and are protected by the Michigan right to farm act.

The Grantor also grants to the Grantee the right to make zero (0) divisions under Section 108 of the Land Division Act, Act No. 288 of P.A. of 1967.

DATE: August 13, 2018

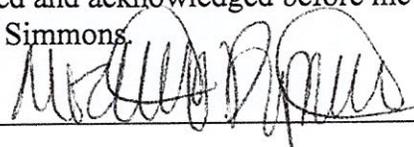
SIGNED BY:

  
David Simmons

STATE OF MICHIGAN

COUNTY OF CHEBOYGAN

The foregoing instrument was executed and acknowledged before me on August 13, 2018 in said County by David Simmons.

  
\_\_\_\_\_

Martina Dupertuis  
NOTARY PUBLIC-STATE OF MICHIGAN  
COUNTY OF CHEBOYGAN  
My Commission Expires 05/06/2024  
Acting in the County of Cheboygan

Notary Public  
State of Michigan, County of Cheboygan  
My Commission expires:  
Acting in the County of Cheboygan

DRAFTED BY:  
Robert C. Kerzka, Attorney  
P.O. Box 98  
Indian River, Michigan 49749  
(231) 238-8981

AFTER RECORDING RETURN TO:  
Frame Land Holdings, LLC  
740 N. Industrial Dr. ✓  
Chelsea, MI 48118

PARCEL NUMBER: Out of tax code #104-029-200-007-10

## Exhibit A

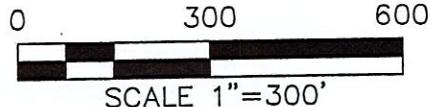
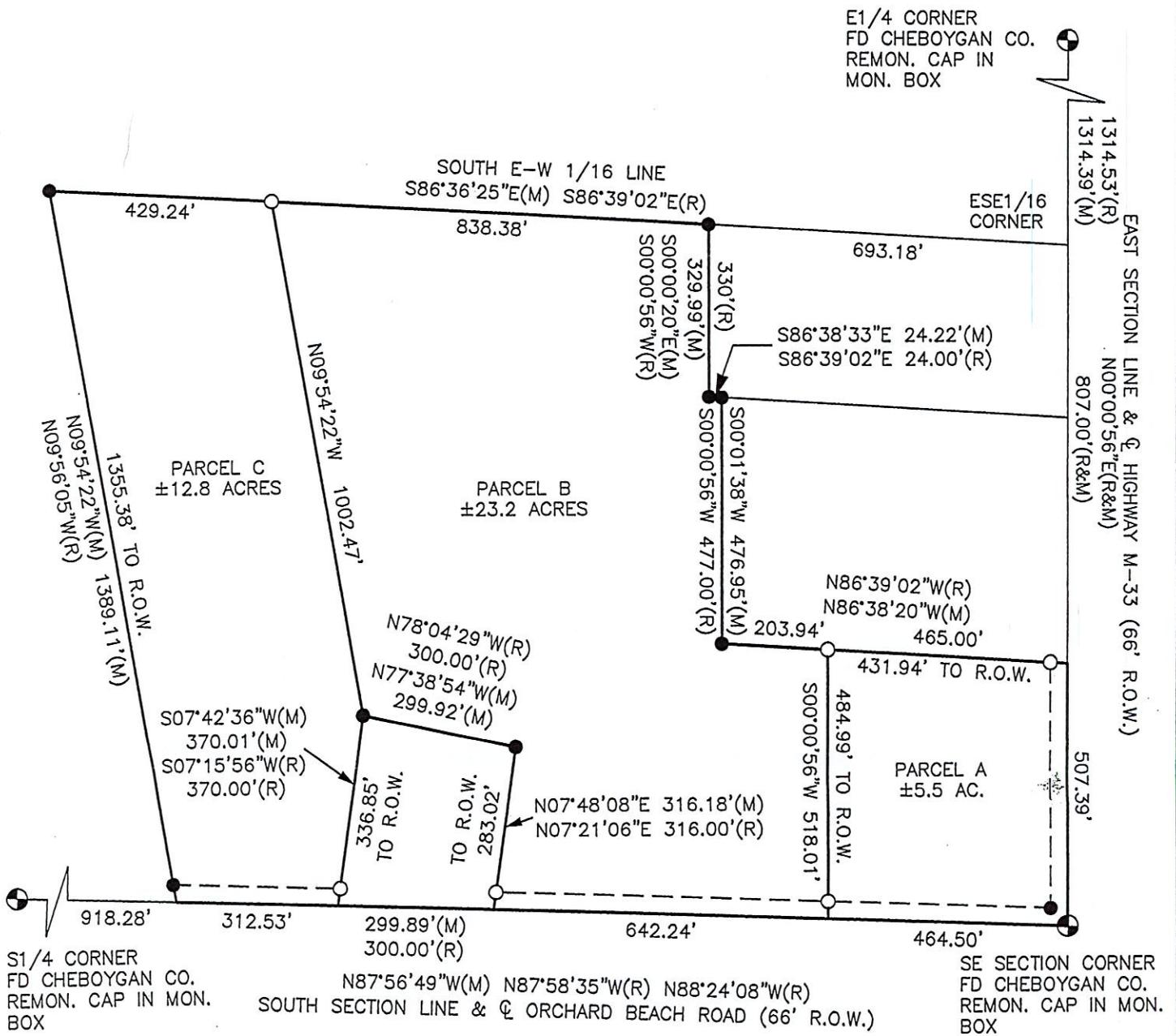
Situated in the Township of Benton, Cheboygan County, Michigan:

Parcel B: Part of the South  $\frac{1}{2}$  of the Southeast  $\frac{1}{4}$  Section 29, T37N, R1W, described as: Commencing at the Southeast corner of said Section; thence North  $87^{\circ} 56' 49''$  West (previously recorded as North  $87^{\circ} 58' 35''$  West and North  $88^{\circ} 24' 8''$  West) along the South line of said Section, a distance of 464.50 feet to the Point of Beginning; thence continuing North  $87^{\circ} 56' 49''$  West (previously recorded as North  $87^{\circ} 58' 35''$  West and North  $88^{\circ} 24' 8''$  West) along said South line 642.24 feet; thence North  $7^{\circ} 48' 8''$  East 316.18 feet (previously recorded as North  $7^{\circ} 21' 6''$  East 316.00 feet); thence North  $77^{\circ} 38' 54''$  West 299.92 feet (previously recorded as North  $78^{\circ} 4' 29''$  West 300.00 feet); thence North  $9^{\circ} 54' 22''$  West 1002.47 feet to the South East-West 1/16 line as monumented; thence South  $86^{\circ} 36' 25''$  East (previously recorded as South  $86^{\circ} 39' 2''$  East) along said 1/16 line 838.38 feet; thence South  $0^{\circ} 0' 20''$  East 329.99 feet (previously recorded as South  $0^{\circ} 0' 56''$  West 330.00 feet); thence South  $86^{\circ} 38' 33''$  East 24.22 feet (previously recorded as South  $86^{\circ} 39' 2''$  East 24.00 feet); thence South  $0^{\circ} 1' 38''$  West 476.95 feet (previously recorded as South  $0^{\circ} 0' 56''$  West 477.00 feet); thence South  $86^{\circ} 38' 20''$  East (previously recorded as South  $86^{\circ} 39' 2''$  East 203.94 feet); thence South  $0^{\circ} 0' 56''$  West parallel to the East line of said Section, a distance of 518.01 feet to the Point of Beginning.

Parcel ID No. \*\*OUT OF\*\* 104-029-200-007-10

# CERTIFICATE OF SURVEY

PART OF THE S1/2, OF THE SE1/4 SECTION 29, T37N, R1W,  
BENTON TOWNSHIP, CHEBOYGAN COUNTY, MICHIGAN



### LEGEND

- FD IRON W/CAP #16041
- SET 1/2" REBAR W/CAP #52460
- (R) RECORDED AS
- (M) MEASURED AS

BEARINGS BASED ON SURVEY BY GRANGER & ASSOCIATES, INC.

LEGAL DESCRIPTION AS SURVEYED PER DEED RECORDED IN LIBER 728, PAGE 58, CHEBOYGAN COUNTY RECORDS.

I hereby state that I have surveyed and mapped the above parcel of land and that the error of closure is no greater than 1 in 5000 and that all requirements of PA 132, 1970, as amended, have been met.

COPYRIGHTED GRANGER & ASSOCIATES INC. 2018

*Alan J. Granger*  
 ALAN J. GRANGER P.S. No. 52460

CLIENT: DAVE SIMMONS  DATE: JUNE 3, 2018	<b>Granger and Associates, Inc.</b> Engineers • Surveyors 224 S. Main St., Cheboygan, MI 49721 Email: grangerandassociates@gmail.com 231-627-2763	SEC. 29, T37N, R1W		
		DRAWN	AJG	SHEET 1 OF 2
		JOB NO. C7678-00		

# CERTIFICATE OF SURVEY

PART OF THE S1/2, OF THE SE1/4 SECTION 29, T37N, R1W,  
BENTON TOWNSHIP, CHEBOYGAN COUNTY, MICHIGAN

PARCEL A  
SITUATED IN THE TOWNSHIP OF BENTON, COUNTY OF CHEBOYGAN, STATE OF MICHIGAN:  
PART OF THE SOUTH 1/2 OF THE SOUTHEAST 1/4, SECTION 29, T37N, R1W, DESCRIBED AS BEGINNING AT THE SOUTHEAST CORNER OF SAID SECTION; THENCE N 00°00'56" E, ALONG THE EAST LINE OF SAID SECTION, 507.39 FT.; THENCE N 86°38'20" W (PREVIOUSLY RECORDED AS N 86°39'02" W) 465.00 FT.; THENCE S 00°00'56" W, PARALLEL TO SAID EAST LINE, 518.01 FT., TO THE SOUTH LINE OF SAID SECTION; THENCE S 87°56'49" E (PREVIOUSLY RECORDED AS S 87°58'35" E AND S 88°24'08" E), ALONG THE SOUTH LINE OF SAID SECTION, 464.50 FT., TO THE P.O.B. CONTAINS 5.5 ACRES, MORE OR LESS. SUBJECT TO THE RIGHT OF WAY OF ORCHARD BEACH ROAD AND HIGHWAY M-33. SUBJECT TO RESTRICTIONS, RESERVATIONS, AND EASEMENTS OF RECORD, IF ANY.

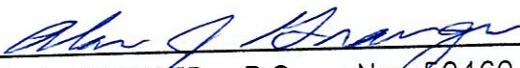
PARCEL B  
SITUATED IN THE TOWNSHIP OF BENTON, COUNTY OF CHEBOYGAN, STATE OF MICHIGAN:  
PART OF THE SOUTH 1/2 OF THE SOUTHEAST 1/4, SECTION 29, T37N, R1W, DESCRIBED AS COMMENCING AT THE SOUTHEAST CORNER OF SAID SECTION; THENCE N 87°56'49" W (PREVIOUSLY RECORDED AS N 87°58'35" W AND N 88°24'08" W), ALONG THE SOUTH LINE OF SAID SECTION, 464.50 FT., TO THE POINT OF BEGINNING; THENCE CONTINUING N 87°56'49" W (PREVIOUSLY RECORDED AS N 87°58'35" W AND N 88°24'08" W), ALONG SAID SOUTH LINE, 642.24 FT.; THENCE N 07°48'08" E 316.18 FT. (PREVIOUSLY RECORDED AS N 07°21'06" E 316.00 FT.); THENCE N 77°38'54" W 299.92 FT. (PREVIOUSLY RECORDED AS N 78°04'29" W 300.00 FT.); THENCE N 09°54'22" W 1002.47 FT., TO THE SOUTH E-W 1/16 LINE AS MONUMENTED; THENCE S 86°36'25" E (PREVIOUSLY RECORDED AS S 86°39'02" E), ALONG SAID 1/16 LINE, 838.38 FT.; THENCE S 00°00'20" E 329.99 FT. (PREVIOUSLY RECORDED AS S 00°00'56" W 330.00 FT.); THENCE S 86°38'33" E 24.22 FT. (PREVIOUSLY RECORDED AS S 86°39'02" E 24.00 FT.); THENCE S 00°01'38" W 476.95 FT. (PREVIOUSLY RECORDED AS S 00°00'56" W 477.00 FT.); THENCE S 86°38'20" E (PREVIOUSLY RECORDED AS S 86°39'02" E) 203.94 FT.; THENCE S 00°00'56" W, PARALLEL TO THE EAST LINE OF SAID SECTION, 518.01 FT., TO THE P.O.B. CONTAINS 23.2 ACRES, MORE OR LESS. SUBJECT TO THE RIGHT OF WAY OF ORCHARD BEACH ROAD. SUBJECT TO RESTRICTIONS, RESERVATIONS, AND EASEMENTS OF RECORD, IF ANY.

PARCEL C  
SITUATED IN THE TOWNSHIP OF BENTON, COUNTY OF CHEBOYGAN, STATE OF MICHIGAN:  
PART OF THE SOUTH 1/2 OF THE SOUTHEAST 1/4, SECTION 29, T37N, R1W, DESCRIBED AS COMMENCING AT THE SOUTHEAST CORNER OF SAID SECTION; THENCE N 87°56'49" W (PREVIOUSLY RECORDED AS N 87°58'35" W AND N 88°24'08" W), ALONG THE SOUTH LINE OF SAID SECTION, 1406.63 FT. (PREVIOUSLY RECORDED AS 1406.74 FT.), TO THE POINT OF BEGINNING; THENCE CONTINUING N 87°56'49" W (PREVIOUSLY RECORDED AS N 87°58'35" W AND N 88°24'08" W), ALONG SAID SOUTH LINE, 312.53 FT.; THENCE N 09°54'22" W (PREVIOUSLY RECORDED AS N 09°56'05" W) 1389.11 FT., TO THE SOUTH E-W 1/16 LINE AS MONUMENTED; THENCE S 86°36'25" E (PREVIOUSLY RECORDED AS S 86°39'02" E), ALONG SAID 1/16 LINE, 429.24 FT.; THENCE S 09°54'22" E 1002.47 FT.; THENCE S 07°42'36" W 370.01 FT. (PREVIOUSLY RECORDED AS S 07°15'56" W 370.00 FT.), TO THE P.O.B. CONTAINS 12.8 ACRES, MORE OR LESS. SUBJECT TO THE RIGHT OF WAY OF ORCHARD BEACH ROAD. SUBJECT TO RESTRICTIONS, RESERVATIONS, AND EASEMENTS OF RECORD, IF ANY.

**WITNESSES**

EAST 1/4 CORNER				SE SECTION CORNER				SOUTH 1/4 CORNER			
END 18" CMP	N59°E	44.33'		POWER POLE	N45°W	62.32'		8" SPRUCE	N16°E	33.79'	
POWER POLE	S44°E	48.95'		POWER POLE	N56°E	65.65'		6" CEDAR	N37°W	41.81'	
POWER POLE	S59°W	47.70'		POWER POLE	S38°E	99.95'		8" POPLAR	S52°E	39.23'	
FENCE POST	N85°W	38.61'		POWER POLE	S60°W	50.53'		6" BIRCH	S45°W	21.66'	

COPYRIGHTED GRANGER & ASSOCIATES INC. 2018

  
ALAN J. GRANGER P.S. No. 52460



CLIENT: DAVE SIMMONS	 <b>Granger and Associates, Inc.</b> Engineers • Surveyors 224 S. Main St., Cheboygan, MI 49721 Email: grangerandassociates@gmail.com 231-627-2763	SEC. 29, T37N, R1W		
		DRAWN	AJG	SHEET 2 OF 2
		JOB NO. C7678-00		

DATE: JUNE 3, 2018



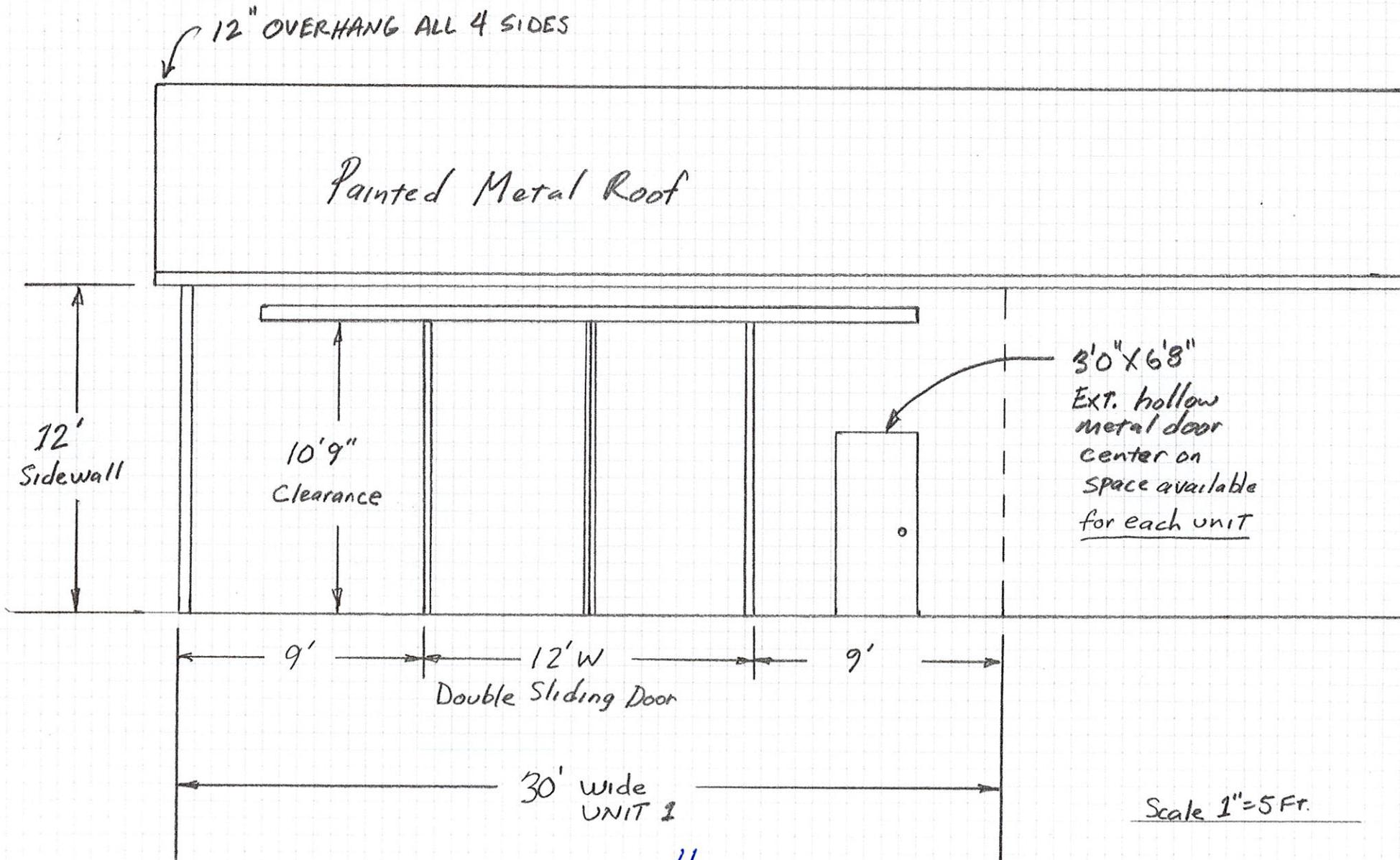
**Attachment Q, pg. 1**

Example of proposed privately owned pole barns, to be built on private land units L1 thru L13. Shows required 1 foot overhang all 4 sides, and correct use of trim to provide accents for architecturally pleasing storage buildings. Wainscoting shown is not required; it's only an option for the individual owners. Also note there are no gutters; instead there is a 3' wide band of crushed limestone to provide a buffer for rain water that will minimize runoff and erosion around the buildings.

Elevation View Unit 1 of Building A, Multi-Unit Storage Building

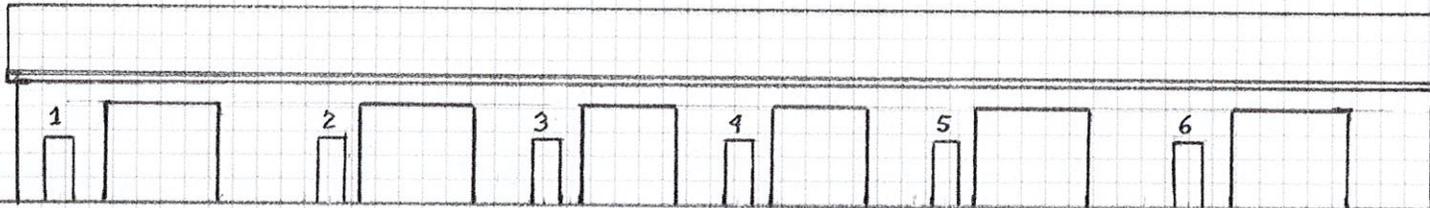
Standard engineered trusses, 12" overhang all 4 sides, no windows

Standard painted metal siding and roof, siding 1-color, roof & trim sec. color



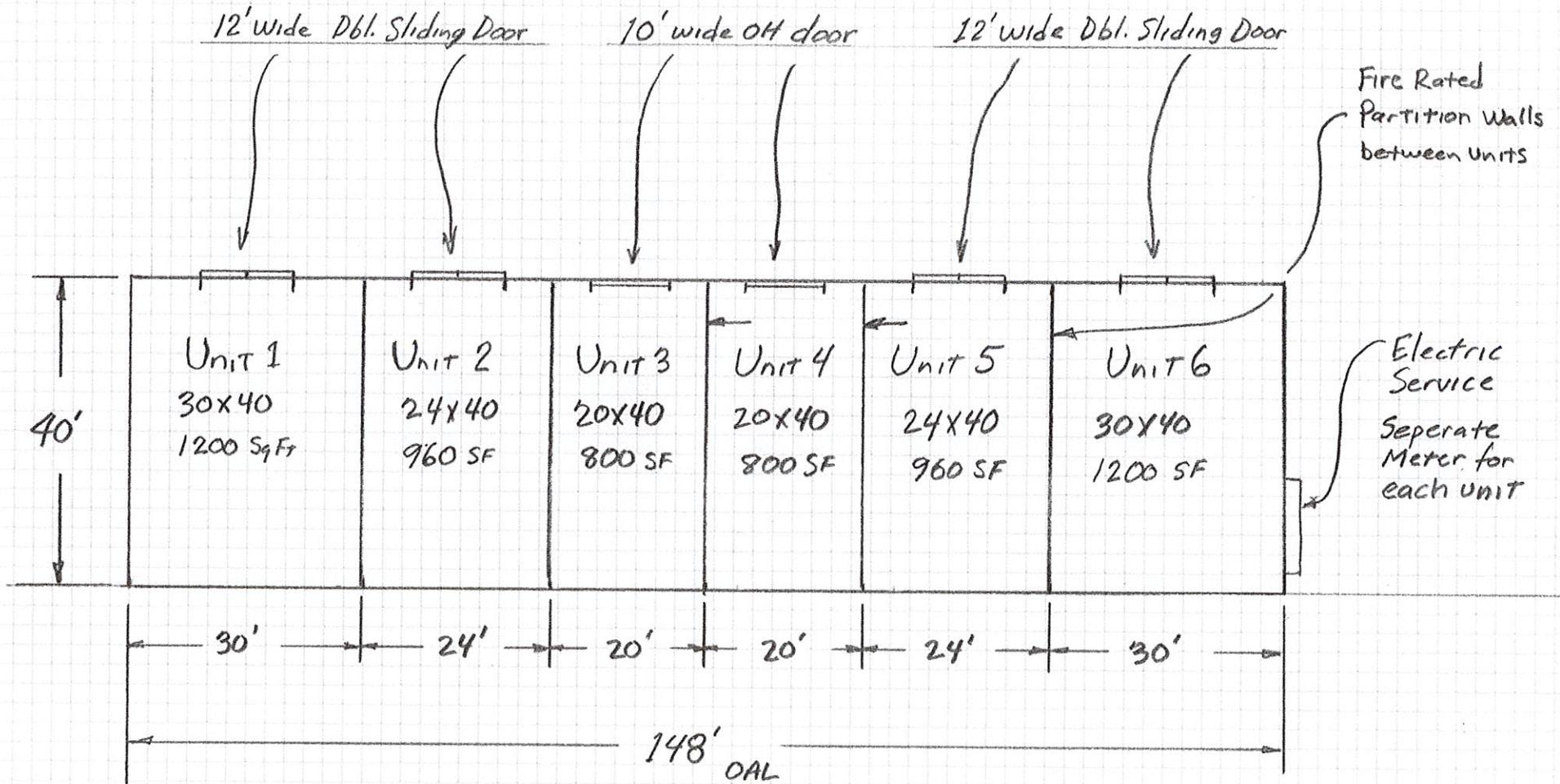
Elevation View Multi-Unit Storage Building

6 Units 800 to 1200 Sq Ft



Scale 1" = 20'

# Plan View Multi-Unit Storage Building A



Scale 1" = 20'

## Details on entry sign requested

Size of sign area; 5' wide x 4' high, *overall height 7'*  
Mounted between two wood poles, to be painted.  
Sign material, weather resistant backer panel  
with professionally cut vinyl letters

## Content of Sign

### Orchard Beach Private Storage

1 acre land units available 2019  
For privately owned pole barns

Turn-Key private storage  
units 800 to 1200 sq.ft.  
available for purchase  
starting in 2019



for more information see website;  
[OrchardBeachPrivateStorage.com](http://OrchardBeachPrivateStorage.com)

Attachment G



Private Road  
Entrance here

**Orchard Beach Private Storage**  
1 acre land units available 2019  
For privately owned pole barns

Turn-Key private storage  
units 600 to 1200 sq. ft.  
available for purchase  
starting in 2019



for more information see website;  
[Orchard@BeachPrivateStorage.com](mailto:Orchard@BeachPrivateStorage.com)

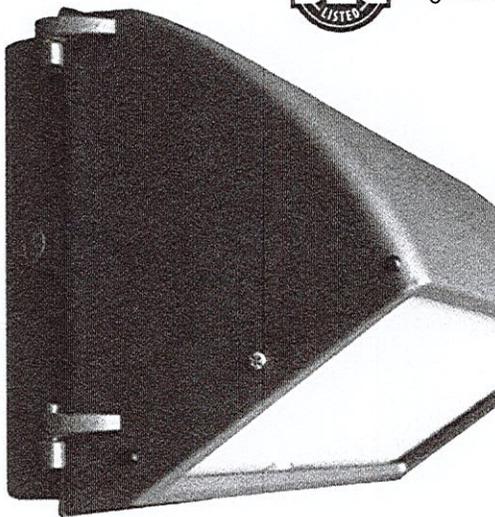
Orchard Beach Road

## Attachment O

Examples of Lighting Fixtures to be used at access doors for storage buildings.

Only downward projecting fixtures will be allowed in the master deed for the site condominium development. No pole lighting will be allowed.

120v-277v



### KLOO 44w LED Wall Pack 120-277v – 175w+ HID EQV, EXTREME LIFE

*The cost-effective KLOO 44w LED Wall Pack is popular for architectural lighting, commercial and industrial spaces, entries, and most public areas. This durable semi-cutoff fixture emits attractive, neutral white light. Call an Access Fixtures lighting specialist at 888-521-2582 for more information.*

In Stock

 **AccessF**  
High-Performance Li

### NOBA LED Wall Pack

- IP65-Rated, Die-Cast Aluminum Housing
- 50,000-Hour Lifetime
- Ships in Just 5-7 Business Days



### NOBA 25w LED Wall Pack 120-277v – 50,000-Hr. Life, IP65, Ships Quick

25w Exterior Wall Pack Lighting Fixtures are sleek, cutoff, low-profile LED fixtures built with sturdy, die-cast aluminum housings. Their IP65 rating means they are fully sealed against dust and water; they are also ETL listed. These units ship in just 5-7 business days and are backed by a 5-year warranty.

104-033-103-021-00  
BOROWICZ, JASON & JODIE H/W  
6950 N M-33 HWY  
CHEBOYGAN, MI 49721

104-029-200-007-10  
SIMMONS, DAVID  
2929 CEDAR BEACH LN  
CHEBOYGAN, MI 49721

104-029-200-007-04  
PRESTON, ROBERT & JUDITH, TRUSTEES  
1680 HOLLYWOOD  
GROSSE POINTE WOODS, MI 48236

105-037-000-036-00  
ENGLE, MAUREEN, TRUSTEE  
7172 W SHANE LN  
CHEBOYGAN, MI 49721

105-037-000-032-00  
JUILLET, DOMINIC & TAMARA H/W  
7102 N M-33 HWY  
CHEBOYGAN, MI 49721

104-032-200-002-20  
ARNETT, ALICE J TRUSTEE  
6773 N M-33 HWY  
CHEBOYGAN, MI 49721

104-029-200-007-05  
LAFRINERE, MICHAEL & JOAN H/W  
7285 M-33  
CHEBOYGAN, MI 49721

104-033-101-001-00  
CUENY, EDWARD B  
3741 LAKELAND DRIVE  
CHEBOYGAN, MI 49721

104-029-401-001-00  
FISH, BRENDA  
214 CASS ST  
CHEBOYGAN, MI 49721

104-032-200-002-05  
RUNSTROM, RICHARD & DANIELLE H/W  
1914 ORCHARD BEACH RD  
CHEBOYGAN, MI 49721-9287

105-037-000-035-00  
PORTEOUS, LISA ANN  
7140 W SHANE LN  
CHEBOYGAN, MI 49721

105-037-000-031-00  
PORTMAN, GEORGE & LOIS H/W  
7050 N M-33 HWY  
CHEBOYGAN, MI 49721

104-032-200-002-01  
ESLICK, WILLIAM R ET UX  
6050 GOFF  
STERLING HEIGHTS, MI 48314

104-029-200-007-06  
SPITZLI, DAVID, TRUSTEE  
PO BOX M  
PETOSKEY, MI 49770

104-032-200-002-04  
BOUCARD, PAUL F, TRUSTEE  
1618 CENTER  
CHEBOYGAN, MI 49721

104-029-200-007-02  
LAFRINERE, MICHAEL ET UX  
7285 N M-33 HWY  
CHEBOYGAN, MI 49721

104-032-200-004-00  
DEETER, DOUGLAS & AMY, TRUSTEES  
8949 GARNER LN  
FREELAND, MI 48623

105-037-000-033-00  
URSU, CHARLES & LEONA H/W  
PO BOX 5055  
CHEBOYGAN, MI 49721

105-037-000-030-00  
PHILLIPS, DONALD & BECKY H/W  
2069 ORCHARD BEACH RD  
CHEBOYGAN, MI 49721

104-029-200-007-09  
CRAWFORD, JASON & MINDY H/W  
9943 CRAWFORD LN  
CHEBOYGAN 49721

104-032-200-003-00  
GAHN, JAMES R III & CHRISTA H/W  
1792 ORCHARD BEACH RD  
CHEBOYGAN 49721

104-033-103-021-00

Occupant

6950 N M-33 HWY

CHEBOYGAN, MI 49721

104-033-101-001-00

Occupant

, MI 49721

104-032-200-002-04

Occupant

, MI 49721

104-029-200-007-10

Occupant

1685 ORCHARD BEACH RD

CHEBOYGAN, MI 49721

104-029-401-001-00

Occupant

7497 N M-33 HWY

CHEBOYGAN, MI 49721

104-029-200-007-02

Occupant

7285 N M-33 HWY

CHEBOYGAN, MI 49721

104-029-200-007-04

Occupant

1775 ORCHARD BEACH RD

CHEBOYGAN, MI 49721

104-032-200-002-05

Occupant

1914 ORCHARD BEACH RD

CHEBOYGAN, MI 49721

104-032-200-004-00

Occupant

1834 ORCHARD BEACH RD

CHEBOYGAN, MI 49721

105-037-000-036-00

Occupant

7172 W SHANE LN

CHEBOYGAN, MI 49721

105-037-000-035-00

Occupant

7140 W SHANE LN

CHEBOYGAN, MI 49721

105-037-000-033-00

Occupant

7112 N M-33 HWY

CHEBOYGAN, MI 49721

105-037-000-032-00

Occupant

7102 N M-33 HWY

CHEBOYGAN, MI 49721

105-037-000-031-00

Occupant

7050 N M-33 HWY

CHEBOYGAN, MI 49721

105-037-000-030-00

Occupant

ORCHARD BEACH RD

CHEBOYGAN, MI 49721

104-032-200-002-20

Occupant

6773 N M-33 HWY

CHEBOYGAN, MI 49721

104-032-200-002-01

Occupant

1700 ORCHARD BEACH RD

CHEBOYGAN, MI 49721

104-029-200-007-09

Occupant

, MI 49721

104-029-200-007-05

Occupant

CHEBOYGAN, MI 49721

104-029-200-007-06

Occupant

7127 N M-33 HWY

CHEBOYGAN, MI 49721

104-032-200-003-00

Occupant

1792 ORCHARD BEACH RD

CHEBOYGAN, MI 49721



# CHEBOYGAN COUNTY COMMUNITY DEVELOPMENT DEPARTMENT

CHEBOYGAN COUNTY BUILDING ■ 870 S. MAIN STREET, PO BOX 70 ■ CHEBOYGAN, MI 49721  
PHONE: (231) 627-8489 ■ FAX: (231) 627-3646  
www.cheboygancounty.net/planning/

## STAFF REPORT

<p><b>Item:</b> Site Plan Review for a site condominium to construct private storage buildings in an Agriculture and Forestry Management (M-AF) zoning district.</p>	<p><b>Prepared by:</b> Michael Turisk</p>
<p><b>Date:</b> August 29, 2018</p>	<p><b>Expected Meeting Date:</b> September 5, 2018</p>

### GENERAL INFORMATION

**Owner:** Frame Land Holdings, LLC

**Applicant:** David Frame

**Contact person:** Same

**Phone:** 734.216.1126

**Requested Action:** Approval of a Site Plan Review for a site condominium to construct private storage buildings pursuant to section 20.3.d. of the Zoning Ordinance.

**Current Zoning:** Agriculture and Forestry Management (M-AF)

### BACKGROUND INFORMATION

The project is proposed for an approximately 23-acre vacant property zoned Agriculture and Forestry Management (M-AF), addressed as 1685 Orchard Beach Rd., and located just west of the intersection of Orchard Beach Rd. and M-33 in Benton Township. The subject property was split in August 2018 from the larger parcel shown in the graphic on p. 2. and is largely covered with a comparatively dense stand of pine monoculture.

The proposed site condominium contains 13 private land units, each to include a single private storage building of approximately 30-ft. x 50-ft. and with dedicated parking. In addition, one (1) roughly four-acre land unit that would include four, 40-ft. x 148-ft., six-unit buildings with dedicated parking are proposed on a portion of the project site. This land unit would be jointly owned.

Private storage buildings are permitted uses in the M-AF zoning districts, per section 9.2.14. and the only use proposed for the site condominium. Article 2 (Definitions) of the Zoning Ordinance defines a private storage building as follows:

*A building or structure that is used for private non-commercial storage of materials that are owned by the property owner and used only by the property owner and does not have permanent facilities for living, sleeping, cooking, and/or sanitation including but not limited to a toilet facility.*

A 50-ft. wide row of existing trees along the Orchard Beach Rd. frontage would remain for the purpose of screening and separation. No common area is proposed, and a secured, gated entry would limit site access to owners.

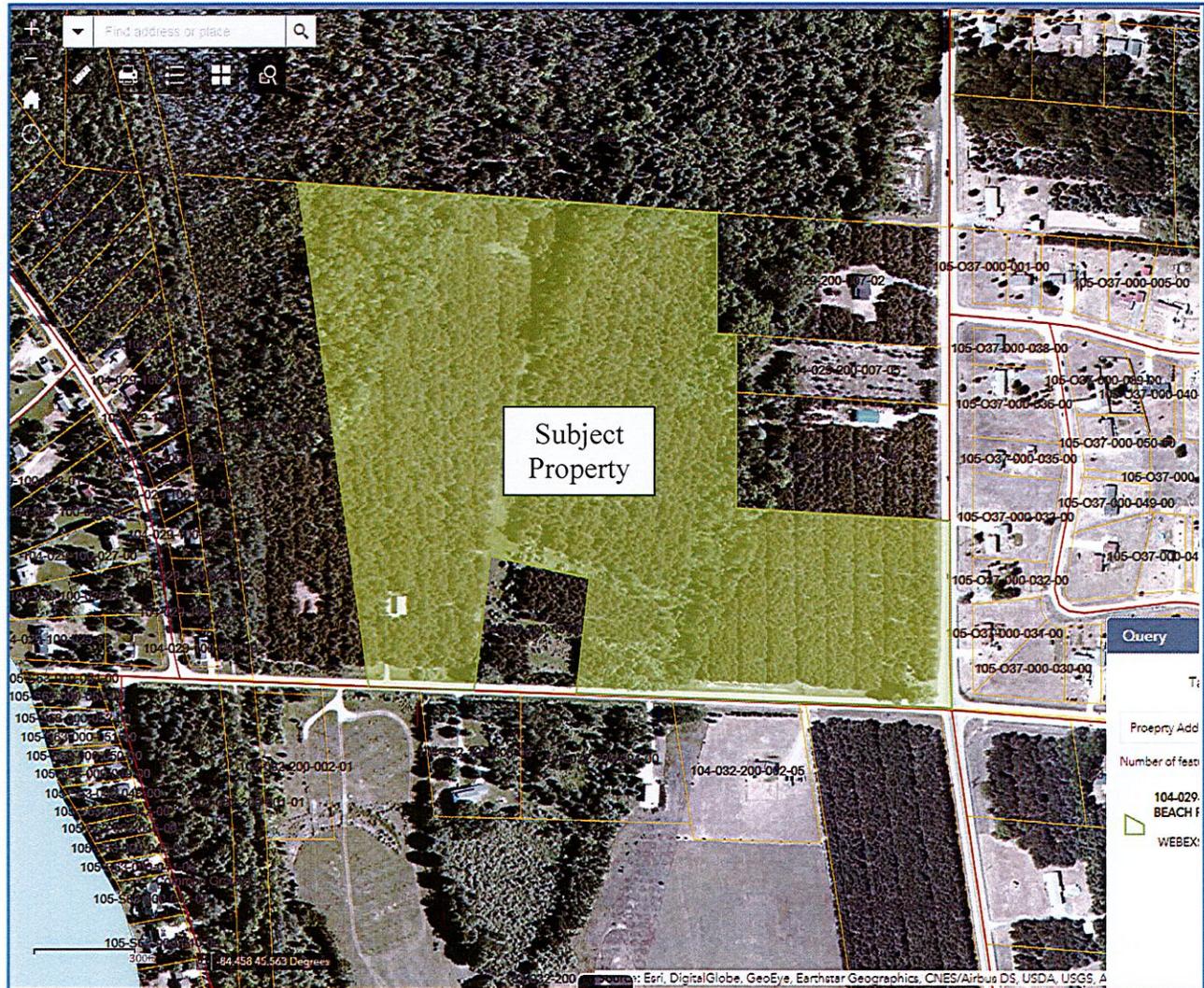


Fig. 1. Location of property near to the northwest corner of M-33 and Orchard Beach Rd., Benton Twp.

Although Section 17.23.1 of the Zoning Ordinance provides standards for private storage buildings, those standards are applicable only to the Residential (D-RS), Rural Character/Country Living (D-RC) and Lake and Stream (P-LS) zoning districts. However, although zoned M-AF, private storage must follow all other applicable standards such as minimum lot size and setbacks for the respective zoning district in which private storage is proposed. Per Section 17.1., a minimum lot size of one (1) acre is required in the M-AF zoning districts.

The site condominium as submitted indicates that each lot would comply with this standard. The submitted site condominium suggests, too, that compliance with the minimum required setbacks for the M-AF zoning districts would be achieved.

**Surrounding Land Uses:**

Largely vacant to the north with low-density residential uses immediately east. Residential zoning and uses east and across M-33. Residential uses to the south and west (particularly adjacent to Mullet Lake).

**Environmentally Sensitive Areas (steep slopes, wetlands, woodlands, stream corridor, floodplain):**

No known environmentally sensitive areas are on the subject property.

**Historic Buildings/Features:**

There are no known historic features on the site.

**Traffic Implications:**

Traffic impacts are anticipated to be negligible.

**Parking:**

There no parking requirements for private storage buildings noted in the Zoning Ordinance, so the Planning Commission will need to make an adequate parking determination, per section 17.4.1. The site plan does, however, indicate dedicated 30-ft. x 30-ft. parking would be provided for each single-unit and 30-ft. x 24-ft. parking for the multi-unit private storage buildings. There is also a 30-ft. x 200-ft. parking area shown on the plan intended to serve the multi-unit buildings. Parking would also serve as loading/unloading spaces.

**Access and street design: (secondary access, pedestrian access, sidewalks, residential buffer, ROW width, access to adjacent properties):**

The project would be served by a 36-ft. wide private access north from Orchard Beach Rd. This access would terminate at a cul-de-sac that would facilitate reasonable turning movements for emergency service vehicles, namely fire apparatus.

**Signs:**

Per Section 17.19.2F., signs approved in conjunction with a valid site plan do not require a zoning permit. The proposed project includes a seven-foot (in height), freestanding sign with 20 sq.-ft. of face area. Although freestanding signs are permitted in the M-AF zoning districts and as proposed the sign would comply with the maximum height standard, freestanding signs in the M-AF zoning districts are limited to 18 sq.-ft. of face area. (The applicant, however, has verbally communicated that the proposed sign face would be reduced to meet the maximum standard.) The proposed sign would also be required to be sited outside of the Orchard Beach Rd. right-of-way.

**Fence/Hedge/Buffer:**

The application indicates that a 50-ft. row of existing trees would remain as a buffer and provide separation from the Orchard Beach Rd. frontage. Pines would be planted between buildings for separation and aesthetic.

**Lighting:**

The submitted application packet indicates that each unit would include security lighting with downward facing fixtures to minimize light trespass.

**Stormwater management:**

Note that the applicant has requested a waiver of the requirement to provide topography. The subject property is not proximate to any bodies of water, including any identified perennial streams. However, exhibits showing existing drainage patterns and a conceptual drainage plan post construction are attached to this memorandum. A number of existing trees would be chipped and spread throughout to provide a measure of erosion and sheet flow mitigation, particularly during construction.

**Review or permits from other government entities:**

The County Road Commission will require the driveway to be improved with asphalt or concrete and has identified the need for concrete curb and gutter. Building permits would be required by the Department of Building Safety.

**Recommendations (proposed conditions):**

1. Contractor's yards, contractor's equipment storage and materials handling operations and other commercial- and/or industrial storage activities shall be prohibited.
2. Prior to permit issuance, review and approval of the applicable Master Deed by legal counsel to ensure that provisions of the site plan, findings of fact and all conditions of approval are included.
3. Prior to construction, approval of applicable permits from the Planning and Zoning Department, Department of Building Safety and the County Road Commission.

**CHEBOYGAN COUNTY PLANNING COMMISSION**  
**SITE PLAN REVIEW**

Wednesday, September 5, 2017  
7:00 PM

Applicant

David Frame  
1503 Orchard Beach Rd.  
Cheboygan, MI 49721

Owner

Frame Land Holdings,  
LLC  
740 W. Industrial Way  
Chelsea, MI 48118

Parcel

Benton Township  
104-029-200-007-10

**GENERAL FINDINGS**

1. The applicant is seeking site plan review for a proposed site condominium pursuant to section 20.3.d. for Private Storage Building use only.
2. Fourteen (14) land units are proposed for the site condominium.
3. The property is located in a Agriculture and Forestry Management (M-AF) zoning district.
4. Private Storage Buildings are a permitted use in the M-AF zoning districts, per Section 9.2.14.

**SPECIFIC FINDINGS OF FACT UNDER SECTION 20.10 OF THE ZONING ORDINANCE**

The Planning Commission makes the following findings of fact as required by section 20.10 of the Zoning Ordinance for each of the following standards listed in that section:

- a. The site plan shall be designed so that there is a limited amount of change in the overall natural contours of the site and shall minimize reshaping in favor of designing the project to respect existing features of the site in relation to topography, the size and type of the lot, the character of adjoining property and the type and size of buildings. The site shall be developed so as not to impede the normal and orderly development or improvement of surrounding property for uses permitted in this Ordinance.
  1. The site plan and application propose comparatively minimal change to the natural contours of the subject site. (see Exhibits 4, 5, 7 and 17)
  2. The normal and orderly development or improvement of surrounding property would not be impeded. (see Exhibits 3, 4, 7 and 17)
  3. Standard has been met.
- b. The landscape shall be preserved in its natural state, insofar as practical, by minimizing tree and soil removal, and by topographic modifications which result in smooth natural appearing slopes as opposed to abrupt changes in grade between the project and adjacent areas.
  1. Changes relative to soil disturbance and removal, topographic modifications and vegetative thinning would occur; however, mitigation measures have been proposed by the applicant. (see Exhibits 4, 5 and 17)
  - 2.
  - 3.
  4. Standard has been met.
- c. Special attention shall be given to proper site drainage so that removal of storm waters will not adversely affect neighboring properties.
  1. The applicant has proposed methods of stormwater management. (see Exhibits 5 and 17)
  2. Application states that drainage will be retained on site. (see Exhibit 3)
  - 3.
  4. Standard has been met.

- d. The site plan shall provide reasonable, visual and sound privacy for all dwelling units located therein. Fences, walls, barriers and landscaping shall be used, as appropriate, for the protection and enhancement of property and for the privacy of its occupants.
  - 1. Not applicable. No dwelling units are proposed.
- e. All buildings or groups of buildings should be so arranged as to permit emergency vehicle access by some practical means
  - 1. Emergency vehicle access is provided via a thirty-six (36) feet wide private easement that extends to the Orchard Beach Rd. frontage. (see Exhibits 4, 7 and 17)
  - 2.
  - 3. Standard has been met.
- f. Every structure or dwelling unit shall have access to a public street, walkway or other area dedicated to common use.
  - 1. Each unit is provided access via a thirty-six (36) feet wide private easement that extends to the Orchard Beach Rd. frontage and dedicated driveways/parking areas. (see Exhibits 4, 7 and 17)
  - 2.
  - 3. Standard has been met.
- g. For subdivision plats and subdivision condominiums, there shall be a pedestrian circulation system as approved by the Planning Commission.
  - 1. The use of the proposed subdivision condominium is for Private Storage Buildings only. No dwelling units are proposed. A pedestrian circulation system is not proposed.
  - 2.
- h. Exterior lighting shall be arranged as follows: a. it is deflected away from adjacent properties, b. It does not impede the vision of traffic along adjacent streets and c. It does not unnecessarily illuminate night skies.
  - 1. The application and site plan indicates that security lighting will consist of downward-facing wall fixtures on order to mitigate light trespass. (see Exhibits 4, 15 and 17)
  - 2.
  - 3. Standard has been met.
- i. The arrangement of public or common ways for vehicular and pedestrian circulation shall respect the pattern of existing or planned streets and pedestrian or bicycle pathways in the area. Streets and drives which are part of an existing or planned street pattern which serves adjacent development shall be of a width appropriate to the traffic volume they will carry and shall have a dedicated right-of-way equal to that specified in the Master Plan.
  - 1. Access is provided via a thirty-six (36) foot wide easement which extends to Orchard Beach Rd. (see Exhibits 4, 7 and 17)
  - 2.
  - 3. Standard has been met.
- j. Site plans shall conform to all applicable requirements of state and federal statutes and the Cheboygan County Master Plan, and approval may be conditioned on the applicant receiving necessary state and federal permits.
  - 1. The site plan conforms to Cheboygan County Master Plan and shall meet state and federal requirements. (see Exhibit 7)
  - 2.
  - 3. Standard has been met

**DECISION**

**TIME PERIOD FOR JUDICIAL REVIEW**

State law provides that a person having an interest affected by the zoning ordinance may appeal a decision of the Planning Commission to the Circuit Court. Pursuant to MCR 7.101 any appeal must be filed within twenty-one (21) days after this Decision and Order is adopted by the Planning Commission.

**DATE DECISION AND ORDER ADOPTED**

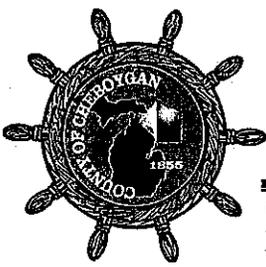
Wednesday, September 5, 2018

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Patty Croft, Chairperson

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Charles Freese, Secretary



# CHEBOYGAN COUNTY COMMUNITY DEVELOPMENT DEPARTMENT

CHEBOYGAN COUNTY BUILDING ■ 870 S. MAIN STREET, PO BOX 70 ■ CHEBOYGAN, MI 49721  
PHONE: (231)627-8489 ■ FAX: (231)627-3646  
[www.cheboygancounty.net/planning/](http://www.cheboygancounty.net/planning/)

## MEMORANDUM

**Date:** August 30, 2018  
**To:** Planning Commission  
**From:** Michael Turisk, Director, Planning and Zoning  
**Re:** September 5, 2018 Public Hearing for Heritage Cove Farm

The purpose of this public hearing is to hear comments about and to further review special use standard 18.7.e. per the Michigan Court of Appeals' Opinion dated January 16, 2018. 18.7.e. reads as follows:

e. The proposed special land use will not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.

Recall that at your regular meeting of July 18, 2018 the Planning Commissioners voted to table the scheduled Heritage Cove Farm public hearing per the request of the applicant. This request was to provide time for the applicant to retain consultant services to perform an impact analysis/study. Said study was completed, submitted to staff and provided to you last month. (Note, too, that it is included in your meeting packets.)

### Enclosures:

1. Impact Study dated 25 July 1018
2. Revised Findings of Fact

## Exhibit List – Revised 09/05/18

### Heritage Cove Farm, LLC Findings of Fact 09/05/18 Hearing

1. All previous exhibits as part of the Exhibits List from January 6, 2016
2. Letter dated March 20, 2018 from Cheboygan County Lt. Todd Ross to Cheboygan County Planning Commission
3. Letter dated March 7, 2018 from Cheboygan Life Support Systems, Inc., Dallas Hyde, to Cheboygan County Planning Department
4. Letter dated March 1, 2018 from Dave Carpenter, Tuscarora Volunteer Fire Department Chief, to Betsy Hanson
5. Letter dated March 6, 2018 from Tuscarora Township Police Department, Chief Gordon Temple, to Cheboygan County Planning Commission
6. Letter dated March 5, 2018 from Gould Farm (Monterey, Massachusetts), Lisanne Finston, Executive Director to Cheboygan County Planning & Zoning
7. Email dated May 23, 2018 from David Carpenter, Tuscarora Volunteer Fire Department Chief, to Debbie Tomlinson, Cheboygan County Planning & Zoning Department
8. Letter dated April 30, 2018 from Tuscarora Township Police Department, Chief Gordon Temple, to Cheboygan County Planning Commission

#### ***The following items were added to the exhibit list on 06/07/18:***

9. Email dated 06/04/18 from Tom Mangum to Debbie Tomlinson, Cheboygan County Planning & Zoning Department
10. Email dated 06/01/18 from Dave Lurie to Debbie Tomlinson, Cheboygan County Planning & Zoning Department
11. Email dated 06/03/18 from John Mandelaris to Cheboygan County Planning Commission
12. Email from David Lurie to Debbie Tomlinson, Cheboygan County Planning & Zoning Department
13. Email from Mark Andreae to Debbie Tomlinson, Cheboygan County Planning & Zoning Department
14. Mailing List
15. 06/26/18 Cheboygan County Planning Commission Notice Of Public Hearing

#### ***The following items were added to the exhibit list on 06/25/18:***

16. Letter received 06/25/18 from Susan Devick To Cheboygan County Planning Commission (3 Pages)

#### ***The following items were added to the exhibit list on 06/26/18:***

17. Heritage Cove Farm Study Regarding Cheboygan County Zoning Ordinance §18.7.e submitted by Larry & Betsy Hanson (5 Pages)

#### ***The following items were added to the exhibit list on 07/05/18:***

18. Email Dated 06/27/18 from Sue Devick To Debbie Tomlinson (3 Pages)
19. Email Dated 07/02/18 From Brent Shank To Michael Turisk (2 Pages)

#### ***The following items were added to the exhibit list on 07/11/18:***

20. Joint Statement Of The Department Of Housing And Urban Development And The Department Of Justice, State And Local Land Use Laws And Practices And The Application Of The Far Housing Act (20 Pages)
21. Audio Recording Of The 06/26/18 Planning Commission Meeting Submitted By David Lurie (Available For Review In The Planning & Zoning Department)

22. Letter Dated 06/10/18 From Lawrence And Betsy Hanson To Michael Turisk (3 Pages)
23. Email Dated 07/10/18 From Gretchen Monette to Sheriff Clarmont (Cheboygan County), Police Chief Temple (Tuscarora Township), Cheboygan County Planning & Zoning Department & Cheboygan County Board of Commissioners (3 Pages)
24. Letter Dated 07/11/18 From Scott W. Howard (Olson, Bzdok & Howard) to Cheboygan County Planning Commission (3 Pages)
25. Letter Dated 07/09/18 From Betsy Hanson (Heritage Cove Farm Director) to Dallas Hyde (Cheboygan Life Support Systems Inc. Director) (2 Pages)
26. Letter Dated 07/09/18 From Betsy Hanson (Heritage Cove Farm Director) to Gordon Temple (Tuscarora Township Police Chief) (2 Pages)
27. Letter Dated 07/09/18 From Betsy Hanson (Heritage Cove Farm Director) to Dave Carpenter (Tuscarora Township Volunteer Fire Chief) (2 Pages)
28. Letter Dated 07/09/18 From Betsy Hanson (Heritage Cove Farm Director) to Todd Rodd (Cheboygan County Sheriff Department Lieutenant) (2 Pages)
29. Letter Dated 07/10/18 From Thomas Mangum to Cheboygan County Planning Commission (4 Pages)
30. Undated Letter From David Lurie, Walt Czapiga, Judy Boyer, Roger Harris, Jolie Osterlund, Pat Monette, Bill Hahn, Tom Mangum, Chris Tucker and Steve Winchell (2 Pages)

***The following items were added to the exhibit list on 07/17/18:***

31. Letter Dated 07/16/18 From Scott W. Howard to Cheboygan County Planning Commission (2 Pages)

***The following items were added to the exhibit list on 07/18/18:***

32. Letter Dated 07/10/18 From Lawrence and Betsy Hanson, Heritage Cove Farm, to Michael Turisk, Director of Planning & Zoning Department (3 Pages)

***The following items were added to the exhibit list on 07/30/18:***

33. 07/25/18 Impact Study Submitted By Lawrence and Betsy Hanson (14 Pages)

***The following items were added to the exhibit list on 08/06/18:***

34. Letter Dated 07/09/18 From Dale V. Clarmont (1 Page)

***The following items were added to the exhibit list on 08/07/18:***

35. Email Dated 08/03/18 From Lawrence and Sandra Drozdowski (1 Page)

***The following items were added to the exhibit list on 08/30/18:***

36. Memo Dated 8/26/18 from Thomas Magnum to Cheboygan County Planning Commission members (10 Pages)
37. Memo Dated 8/25/18 from Thomas Magnum to Cheboygan County Planning Commission members (3 Pages)
38. Letter Dated 08/30/18 From David and Kay Lurie (1 Page)

***The following items were added to the exhibit list on 09/05/18:***

39. Letter Dated 09/04/18 From Thomas Mangum to Peter Wendling (1 Page)
40. Email Dated 09/03/18 From Carl Muscott To Jeff Lawson and Debbie Tomlinson (1 Page)



# CHEBOYGAN COUNTY SHERIFF DEPARTMENT

**DALE V. CLARMONT**  
SHERIFF

870 S. Main St.  
Cheboygan, MI 49721

Brenda Beckwith  
Jail Administrator

TIMOTHY C. COOK  
UNDERSHERIFF

231-627-3155  
Fax: 231-627-8880  
[sheriff@cheboygancounty.net](mailto:sheriff@cheboygancounty.net)

Jodi Beauchamp  
Administrative Assistant

March 20, 2018

Cheboygan County Planning Commission  
Cheboygan County Building  
870 South Main Street  
P.O. Box 70  
Cheboygan, MI. 49721

RE: Heritage Cove Farms  
625 Grandview Beach Road  
Tuscarora Township  
Cheboygan County  
State of Michigan

Planning Commission,

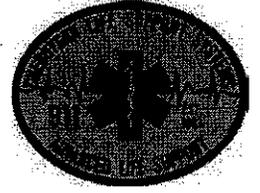
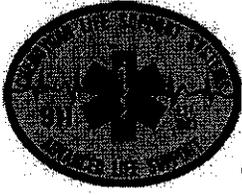
The Cheboygan County Sheriff Department is staffed 24/7/365 with both Road Patrol and Corrections Deputies. While the proposed site for Heritage Cove Farms falls within the borders of Tuscarora Township, which has its own 24/7/365 dedicated police department, The Cheboygan County Sheriff Department stands ready to assist should a request be received.

I have reviewed the plan for Heritage Cove Farm. I understand that Heritage Cove Farm will be modeled after Gould Farm. I have reviewed the correspondence from Gould Farm along with Gould Farm's website. Additionally, I have attended meetings held by Heritage Cove Farms and believe I have an understanding of their plan.

At this time I do not believe that Heritage Cove Farm will place any hardship on, nor will it cause any burden for the Cheboygan County Sheriff Department. Should a request for assistance come from either the Tuscarora Township Police Department or directly from Heritage Cove Farm, the Cheboygan County Sheriff Department stands ready to fulfill such request.

Sincerely,

Lieutenant Todd Ross  
Road Patrol and Operations Supervisor  
Cheboygan County Sheriff Department  
870 South Main Street, Cheboygan



# Cheboygan Life Support Systems Inc.

536 M.M Riggs Drive  
Cheboygan, Michigan 49721  
(231)627-9348

March 7, 2018

Jeff Lawson  
Cheboygan County Planning Department  
870 S. Main Street  
Cheboygan, MI 49721

Dear Mr. Lawson,

I have reviewed the Heritage Cove Farm project for the purpose of evaluating what impact the farm and its residents will have on our ambulance service capacity in Cheboygan County. Based on my review and discussion with Betsy Hanson, the addition of these residents and the staff will not impose a burden beyond the current capacity of Cheboygan Life Support System.

If you have any questions, please contact me at the above number.

Sincerely,

A handwritten signature in cursive script that reads "Dallas Hyde".

Dallas Hyde,  
Director of CLSS

March 1, 2018

Betsy Hanson  
Heritage Cove Farm  
PO Box 368  
Indian River, MI 49749

RE: Heritage Cove Farm

Dear Ms. Hanson,

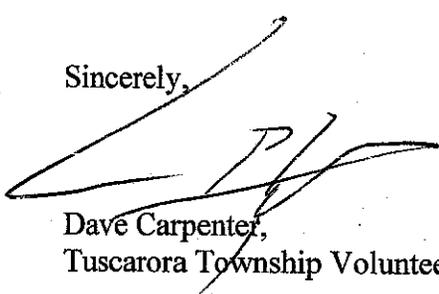
This letter is to outline the communication we had relating to the Special Use Permit Heritage Cove Farm submitted to Cheboygan County, and the impact this application and use would have on the services of Tuscarora Township's Volunteer Fire Department.

In the spring of 2015, you and I met in my office in Indian River. You provided me with the Special Use Permit application and we reviewed the site survey drawing you provided. As I recall, we discussed road access based on the site plan, and the potential use of the on-site pond as a water resource. I understood the application described up to 24 residents with mental illness residing on the site, with support staff also living on site. We also discussed some of the services our department has provided to local adult foster homes in the area regarding "walk-offs" of persons with dementia. You answered any questions I presented, and it was my opinion that Heritage Cove Farm would not impact our volunteer fire department beyond its capacity.

After you and I spoke I did receive the application from the County and responded back telling them that I didn't see any major concerns regarding the fire department.

Should you have any further questions, please feel free to contact me.

Sincerely,



Dave Carpenter,  
Tuscarora Township Volunteer Fire Chief



## Tuscarora Township Police Dept.

Chief Gordon M. Temple  
P.O. Box 208 - 3546 Sturgeon Avenue  
Indian River, Michigan 49749

March 6, 2018

Cheboygan County Planning Commission  
Cheboygan County Building  
870 S. Main St.  
Cheboygan, MI 49721

RE: Heritage Cove Farms

To Whom It May Concern:

The Tuscarora Township Police Department always has officers on duty. I do not believe that any incidents (requiring police assistance) at Heritage Cove Farms would overwhelm our resources.

On the rare occasion when additional law enforcement assistance may be needed, it is common practice in northern Michigan for police departments to request assistance from other area law enforcement agencies.

Based on the stated purpose of Heritage Cove Farms, I do not anticipate it creating an undue hardship on my police department.

Should you have any questions, please do not hesitate to contact me.

Sincerely:

A handwritten signature in black ink, appearing to read "Gordon Temple", written over a horizontal line.

Chief Gordon Temple



# GOULD FARM

Harvesting Hope • Promoting Recovery

March 5, 2018

Cheboygan County Planning & Zoning  
870 S. Main Street  
Cheboygan, MI 49721

Dear Friends,

I am writing in regards to Heritage Cove Farm, a therapeutic community being developed by Betsy and Larry Hanson in Indian River, Michigan. The founders of Heritage Cove Farm have sought counsel and been in dialogue with Gould Farm during the process of organizing and launching their residential treatment program for people living with mental illness.

Founded in 1913, Gould Farm has been helping adults with mental health challenges move toward recovery, health, and greater independence for over 100 years. We work with 40 adults in residence on the farm who are living with mental health conditions such as depression, bipolar and schizoaffective disorder and schizophrenia. Gould Farm provides a safe environment in which everyone feels accepted and trusted while also being held to high expectations as a productive, working member of the community. Guests are empowered to share their many talents with the community and are also given the opportunity to learn and practice new skills in a supported environment.

Guests work with the clinical team, including consulting psychiatrists, licensed clinical social workers and a registered nurse, to optimize their medications, build compensatory strategies to manage the symptoms of their illness, and create resiliency in work and social contexts. Through a stepped progression, symptoms improve, real-life skills are learned, and a sense of worth and hope is recovered that allows the individual to build the strength and confidence to move towards greater independence and recovery.

Gould Farm is respected and trusted in the community. We operate our own restaurant and bakery where our residents work. In addition to working on the farm, and in our community based businesses, our residents volunteer and work in the community, attend classes and worship services, visit the library, the gym and shop like anyone else. The people in the Berkshires are proud that Gould Farm is a part of this community, and we are grateful to be partners with so many wonderful, caring people, businesses and organizations.

Some of our most important community partners are emergency responders. While we rarely need to call upon emergency responders, like law enforcement, fire or medical personnel, we do have a good working relationship with them. It is more often the case that we call upon emergency responders for mundane issues like faulty smoke detectors that set off alarms periodically, or recently, a break in at our café. It is the rare instance that we have an elopement of a guest (once in the past 5 years), and occasionally we call for an ambulance to transport a guest to the hospital for a physical or mental health matter (maybe once every 2 years). In short, we make only occasional use of emergency services and often that is not related to our program or clients. More often it is the case that our relationships with local organizations and businesses are truly collaborative in nature, both serving our program and our guests and staff serving the community.

Heritage Cove Farm is positioned to create another wonderful opportunity for people living with mental illness to find the treatment, support and opportunities that enable a full and meaningful life. We are proud to be a support to their cause.

Sincerely,

Lisanne Finston  
Executive Director

6  
P.O. Box 157 • 100 Gould Road • Monterey, MA 01245-0157 • t 413-528-1804 • f 413-528-5051

The William J. Gould Associates, Inc.

www.gouldfarm.org



## Deborah Tomlinson

---

**From:** Dave Carpenter <dpcarpenter@voyager.net>  
**Sent:** Wednesday, May 23, 2018 9:07 AM  
**To:** Deborah Tomlinson  
**Subject:** Re: Heritage Cove Farm

Hi Deb,

I don't see any major concerns regarding the Fire Department for the Heritage Cove Farm project. Should you have any questions please feel free to contact me anytime at my office.

Respectfully,

David Carpenter  
Fire Chief

**From:** Deborah Tomlinson  
**Sent:** Tuesday, May 22, 2018 2:30 PM  
**To:** Brent Shank ([mgr@chcrc.com](mailto:mgr@chcrc.com)) ; Hobie Kirsch ; Kyle Keller ; Kyle Keller ; David Carpenter ([dpcarpenter@voyager.net](mailto:dpcarpenter@voyager.net))  
**Subject:** Heritage Cove Farm

The following is a link to the documents that will be reviewed at the 06/06/18 Planning Commission meeting regarding Heritage Cove Farm: <http://is0.gaslightmedia.com/cheboygancounty/ ORIGINAL /fs13-1527012821-53525.pdf>. Please review and call me or e-mail me if you have any questions or comments. Thank you!!!

Debbie

**Debbie Tomlinson**  
*Cheboygan County*  
*Community Development Department*  
PO Box 70, 870 South Main Street  
Cheboygan, MI 49721  
(231)627-8489 phone  
(231)627-3646 fax  
[debbiet@cheboygancounty.net](mailto:debbiet@cheboygancounty.net)



## Tuscarora Township Police Dept.

Chief Gordon M. Temple  
P.O. Box 208 - 3546 Sturgeon Avenue  
Indian River, Michigan 49749

April 30, 2018

Cheboygan County Planning Commission  
Cheboygan County Building  
P.O. Box 70  
Cheboygan, MI 49721

**RECEIVED**  
MAY 02 2018  
CHEBOYGAN COUNTY  
COMMUNITY DEVELOPMENT DEPT.

Re: Heritage Cove Farms

To Whom It May Concern:

The purpose of this letter is to clarify a statement I made in a previous letter dated March 6, 2018. In that letter addressed to you, one of my statements was "I do not believe that any incidents (requiring police assistance) at Heritage Cove Farms would overwhelm our resources". My statement was based on information provided that Heritage Cove Farms will be housing 24 residents. (The mental well-being of these residents is an unknown variable at this time.)

My previous letter was NOT based on an impact study, nor is this one. The previous letter was based on having an additional 24 residents in the township.

I have been requested by the Grandview Beach Association to complete a "proper analysis" of the proposed Heritage Cove Farms and its impact on available resources.

As far as I am concerned, it is your responsibility as the Planning Commission to conduct this "impact study".

To quote the Cheboygan County website:

"Cheboygan County zoning authority covers all township except Burt..."

"The Planning Commission's responsibilities include reviewing Special Use Permits, Planned Unit Developments and Site Plan Reviews...."

Sincerely:

A handwritten signature in black ink, appearing to read "Gordon Temple", written over a horizontal line.

Chief Gordon Temple

cc Dave Lurie-President Grandview Beach Association.

(231) 238-9481 • (231) 238-8311

Fax: (231) 238-0931

8

## Deborah Tomlinson

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**From:** Tom Mangum <mangum@roadrunner.com>  
**Sent:** Monday, June 04, 2018 8:28 AM  
**To:** Deborah Tomlinson  
**Cc:** Scott Howard  
**Subject:** Planning Commission - Heritage Cove Farm  
**Attachments:** HCF Impact Study 05-30-2018.pdf; Cheboygan PC Misconduct 05-30-2018.pdf

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Hi Debbie,

Please include the attached letters (2) regarding Heritage Cove Farm to the June 6th Planning Commission Packet and provide Scott Howard (copied) and me with a confirmation email that they have been added. You can also contact me at [REDACTED] with any questions. Thank you very much.

Tom Mangum

May 30, 2018

To: Cheboygan County Planning Commission Members

**RE: HERITAGE COVE FARM ("HCF") – WILLFULL NEGLECT OF DUTY & MISCONDUCT BY  
CHEBOYGAN COUNTY PLANNING COMMISSION MEMBERS**

Dear Cheboygan County Planning Commission Members,

Please do your job. As representatives of Cheboygan County, you are obligated to enforce the ZO, the purpose of which, is ***"to promote and safeguard the public health, safety, morals and general welfare of the people of the unincorporated portions of Cheboygan County."*** To date, your neglect of duty and willful misconduct has been driven by politics, intimidation and financial concerns regarding the threat of a (baseless) federal discrimination lawsuit by the Hansons. For example, (taken directly from Cheboygan PC meeting minutes):

- a) ***"Mr. Wendling stated this is new stuff and it is difficult to absorb and comprehend. Mr. Wendling stated it is difficult politically when there is the potential litigation and all the damages that come along with a federal case."***
- b) ***"Mr. Wendling stated there are plenty of findings in the original (application) that would result in a denial (of the special use application). Mr. Wendling stated there are legal issues that surround this particular application."***
- c) ***"Mr. Jazdyk stated if this (special use application) is not approved by the PC, then there will be a legal problem that will cost money."***

Since the possibility of litigation obviously motivates you, perhaps you should consider what will happen to Cheboygan County and each of you (individually) when the unthinkable occurs. Consider the following scenario:

- a) You, the PC members, were presented with evidence and studies (recently and in the original record) that clearly indicate that HCF increases dangers, risks and other hazards to the subject property and surrounding properties due to the nature of HCF's operations (therapy for patients diagnosed with bi-polar, schizophrenia and other mental illnesses). For example, a study by the American Psychiatric Association (referenced in the attached article), indicates that ***"the risk of violence is six to seven times higher among people with major depression or schizophrenia"***. The same article indicates that another study concluded ***"There is now robust evidence demonstrating that both men and women with schizophrenia are at elevated risk when compared to the general population to be convicted of non-violent criminal offenses, at higher risk to be convicted of violent criminal offenses, and at an even higher risk to be convicted of homicide (Wallace et al)."*** As you know, Section 18.7(e) of the ZO states, ***"The proposed***

*special land use will not place demands on fire, police or other public resources in excess of current capacity **nor increase hazards from fire or other dangers to the subject property or adjacent properties**".*

- b) You deliberately chose to ignore these facts because you were intimidated by the Hansons and their attorneys and didn't want to incur the costs associated with defending a (baseless) federal discrimination lawsuit threatened by them.
- c) A future HCF patient diagnosed with bi-polar disorder and schizophrenia rapes and murders a 6-year-old girl residing in the residential neighborhood in which HCF is located;
- d) Cheboygan County and each of you (individually) are charged criminally and sued by the family for deliberately ignoring these risks and putting adjacent residents in danger. You go to prison.

If you think it can't happen to you, you are severely misinformed. Just ask the Flint, MI officials that are charged with Manslaughter for intentionally ignoring the health risks related to the lead contaminated water which ultimately killed many people. They face up to 20 years in prison for failing to do their job and ignoring the facts. One of the attached articles indicates, **"Before Wednesday, the criminal charges had focused mainly on the lead contamination and, in counts like misconduct in office and willful neglect of duty, on ways that state and city workers had failed to do their jobs."** The article goes on to say that the Flint crisis was and is a "failure of leadership" and that **"A cause of the breakdown in state governmental management was a fixation, a preoccupation, with data, finances and costs, instead of placing the health, safety and welfare of citizens first."** Sound familiar?

Fortunately, you have an opportunity to protect yourself, the County and its residents and make the right decision, albeit a little late. On the other hand, should you choose to ignore the evidence (again), you should be prepared for the legal consequences when (not if) the unthinkable occurs in connection with this ill-conceived facility located in the middle of a residential neighborhood that is not zoned for such uses.

Again, please do your job. HCF's special use application should be denied/revoked for failing to satisfy all of the requirements in Section 18.7(e) of the ZO.

Sincerely,

*Thomas Mangum*

Thomas Mangum  
Grandview Beach Drive

cc: Scott Howard



**The New York Times** | <https://nyti.ms/2tlQgDn>

U.S.

# 5 Charged With Involuntary Manslaughter in Flint Water Crisis

By SCOTT ATKINSON and MONICA DAVEY JUNE 14, 2017

FLINT, Mich. — By the time Robert Skidmore, an 85-year-old former auto industry worker, died in late 2015, officials had seen signs for months that Flint was wrestling with outbreaks of Legionnaires' disease, prosecutors say. Yet despite a wave of such cases in 2014 and 2015, no public warning was issued until early 2016.

By then, it was too late for Mr. Skidmore and 11 others: a failing so egregious, prosecutors say, that it amounted to involuntary manslaughter.

Five officials in Michigan, including the head of the state's health department, were charged on Wednesday. It is the closest investigators have come to directly blaming officials for the deaths and illnesses that occurred when a water contamination crisis enveloped this city.

The tainted water has been tied to lead poisoning in children and prompted officials to begin a costly, yearslong process of replacing pipes all over the city. Even now, officials recommend that only filtered tap water be consumed, and many residents say they can trust only bottled water, given false assurances they once received from state and local officials.

The latest charges reached farther than before into Michigan's state government, affecting two cabinet-level officials in the administration of Gov. Rick

Snyder and leaving open the possibility that the investigation would go higher still.

Nick Lyon, the director of the Michigan Department of Health and Human Services, was charged with involuntary manslaughter and misconduct in office, felonies that could lead to as much as 20 years in prison. Dr. Eden V. Wells, the chief medical executive for the department, was charged with obstruction of justice and lying to a peace officer, and could face up to seven years if convicted. They are among 15 current and former state and local officials facing criminal charges as a 17-month investigation into Flint's tainted water supply continues.

Before Wednesday, the criminal charges had focused mainly on the lead contamination and, in counts like misconduct in office and willful neglect of duty, on ways that state and city workers had failed to do their jobs.

"The Flint water crisis was and is a failure of leadership," said an investigative report issued on Wednesday by Bill Schuette, Michigan's attorney general. "A cause of the breakdown in state governmental management was a fixation, a preoccupation, with data, finances and costs, instead of placing the health, safety and welfare of citizens first."

Besides, the report found, a solution for Flint's essential water problem was maddeningly simple, and cheap: The addition of common anti-corrosion chemicals could have cost the financially struggling city only \$200 a day.

But officials failed to take that step when they switched the city's water supply in early 2014, the investigators said, partly to save money. Residents began complaining of puzzling colors, putrid odors and an array of rashes and illnesses, which eventually included Legionnaires' disease.

In charging Mr. Lyon, and four others who already faced other charges in the water case, with involuntary manslaughter, Mr. Schuette said they had failed to properly alert the public about increases in Legionnaires' cases, allowing the problem to continue and withholding crucial information from residents, who might have avoided the water had they known.

An examination of government emails from 2014, 2015 and 2016 revealed that officials were aware of the pattern of Legionnaires' cases, but that they failed to act swiftly on the revelations and tended to become mired in jurisdictional battles over protocol and responsibility.

Mr. Lyon knew of the Legionnaires' outbreak by late January 2015, court documents claim, but did not notify the public for another year. At one point, the documents allege, he said that "he can't save everyone" and that "everyone has to die of something."

The charging documents pointed in particular to the death of Mr. Skidmore, the former autoworker, on Dec. 13, 2015. Mr. Schuette said that Mr. Skidmore had been tending to his ailing wife in mid-2015 when he grew ill, apparently from the water.

According to the charges, Mr. Lyon's "acts and failure to act resulted in the death of at least one person," Mr. Skidmore. The documents asserted that Mr. Lyon "willfully disregarded the deadly nature" of the Legionnaires' outbreak and "exhibited gross negligence when he failed to alert the public about the deadly outbreak and by taking steps to suppress information illustrating obvious and apparent harms that were likely to result in serious injury."

Defense lawyers for Mr. Lyon called the claims baseless and said they were confident in their client's case. One challenge for prosecutors may be proving a direct link between Flint's corroding water pipes and Legionnaires' disease, legal experts said. Some scientists have suggested that the corrosion may have allowed Legionella bacteria to thrive in the water supply during warm summer months.

"The true facts simply do not support the prosecution's claims," the defense lawyers, Chip Chamberlain and Larry Willey, said in a statement. "This case appears to be a misguided theory looking for facts that do not exist."

Governor Snyder, too, issued a statement of support for Mr. Lyon and Dr. Wells, and appeared to criticize the legal process, noting that other state employees had been charged more than a year ago but had yet to be tried in court.

“That is not justice for Flint, nor for those who have been charged,” Mr. Snyder said. “Director Lyon and Dr. Wells have been and continue to be instrumental in Flint’s recovery. They have my full faith and confidence, and will remain on duty at D.H.H.S.”

Mr. Schuette, a Republican, is widely seen as a possible candidate for governor in 2018. He declined to say whether the investigation might lead to charges against Mr. Snyder, though he emphasized that it was continuing and that the investigative report issued on Wednesday was an “interim” look at the Flint case. He said investigators had tried unsuccessfully to interview Mr. Snyder, who is barred by term limits from running for re-election, but he would not elaborate.

“We only file criminal charges when evidence of probable cause to commit a crime has been established, and we are not filing charges at this time,” Mr. Schuette said.

Mr. Snyder’s lawyer said that the governor has always been willing to be interviewed — but under oath, like other witnesses, to avoid any appearance of special treatment.

“We have repeatedly told the Office of Special Counsel that when they provide an investigative subpoena the governor will provide additional testimony under oath,” the lawyer, Brian Lennon, said in a written statement.

Mr. Skidmore, whose death is at the center of the five counts of involuntary manslaughter issued on Wednesday, was found to have Legionnaires’ disease in June 2015, after he went to a hospital with pneumonialike symptoms.

“It’s a very tragic story,” Mr. Schuette said, adding later, “The family had to bury their mother and their father.”

Mr. Skidmore’s wife of more than six decades died only weeks after he became ill, and Mr. Skidmore continued to fight his symptoms on top of grief, his family said.

“Grandma died. Six months later, after bouncing between the hospital, home care and back, he passed away,” said Megan Skidmore Cuttitta, his granddaughter. “Each time he went to the hospital, he’d get better, but each time he came home, he got worse.”

Scott Atkinson reported from Flint, Mich., and Monica Davey from Chicago. Susan C. Beachy contributed research from New York.

A version of this article appears in print on June 15, 2017, on Page A1 of the New York edition with the headline: Manslaughter Is Charge for 5 In Flint Crisis.

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# Flint water crisis: 5 officials now face manslaughter charges

Elisha Anderson, John Wisely and Paul Egan, Detroit Free Press Published 11:16 a.m. ET June 14, 2017 | Updated 5:32 p.m. ET June 15, 2017



(Photo: Ryan Garza, Detroit Free Press)

Michigan Attorney General Bill Schuette today filed new, more serious charges in the Flint Water Crisis investigation, but also said the case is shifting to a new phase.

"We will turn to the prosecution of this investigation," Schuette said at a news conference in Flint this morning. "We are confident that the charges that we have filed will be upheld in the courts."

Schuette's statement came after he announced involuntary manslaughter charges against Nick Lyon, director of the Michigan Department of Health, as well as Darnell Earley, Flint's former emergency manager; Howard Croft, the city's former director of public works; Liane Shekter-Smith, the state's former top drinking water official and water supervisor Stephen Busch of the Department of Environmental Quality.

Those charges, felonies punishable by up to 15 years in prison, stem from the death of 85-year-old Robert Skidmore, whose December 2015 death is tied to the Legionnaire's Disease outbreak in Flint.

State officials, they said, knew about the outbreak but refused to sound a public alarm that could have saved lives. At least 12 people died from complications related to the outbreak.

In all, 15 people have been charged with 51 counts. Two have plead no contest to lesser charges and agreed to help with the investigation, but none of the cases have gone to court yet.

Todd Flood, a former Wayne County Prosecutor who is serving as special counsel in the investigation, said today's charges stem from the deadly inaction of government officials.

"There are two types of people: those who give a damn and those who don't," Flood said. "I have run across many public servants who do care, but this is a case where there is willful disregard."

Andrew Arena, a former head of the Detroit FBI branch who is serving as lead investigator, said he began the probe thinking perhaps people just made mistakes, but concluded otherwise as the investigation continued.

"Many people attempted to do what is right," Arena said. "People didn't just make mistakes, they willfully and intentionally failed to do what they were supposed to do."

And Schuette said that while no charges currently are planned against Gov. Rick Snyder, his investigation continues, and "we have attempted to interview the governor," but "we were not successful."

### More Flint water crisis coverage:

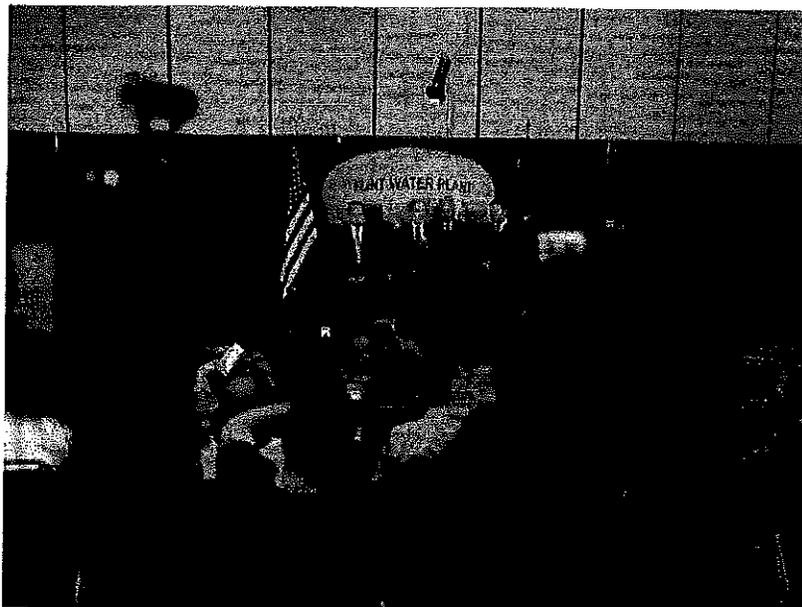
[Michigan health director Nick Lyon, 4 others charged with involuntary manslaughter over Flint water \(/story/news/local/michigan/flint-water-crisis/2017/06/14/charges-flint-water-crisis-nick-lyon/395267001/\)](#)

[Flint water crisis: 5 officials face manslaughter charges \(/story/news/local/michigan/flint-water-crisis/2017/06/14/flint-water-crisis-manslaughter-charges/396075001/\)](#)

[Criminal charges against top Michigan officials extremely rare \(/story/news/local/michigan/2017/06/14/criminal-charges-michigan-officials/395575001/\)](#)

[Watch: Manslaughter charges announced in Flint water crisis probe \(/story/news/local/michigan/2017/06/14/criminal-charges-michigan-officials/395575001/\)](#)

Buy Photo



Attorney General Bill Schuette announces new charges against two high-ranking state health officials in the fourth round of criminal charges in the Flint drinking water crisis on Wednesday June 14, 2017 during a press conference at Riverfront Banquet Center in downtown Flint. (Photo: Ryan Garza, Detroit Free Press)

**Here are the list of additional charges announced today:**

Michigan Health and Human Services Director Nick Lyon is charged with involuntary manslaughter and misconduct in office, both felonies.

Chief Medical Executive Eden Wells is charged with obstruction of justice and lying to a police officer.

Four defendants charged earlier -- former Flint emergency manager Darnell Earley, former Michigan Department of Environmental Quality drinking water chief Liane Shekter-Smith; DEQ drinking water official Stephen Busch; and former City of Flint Water Department manager Howard Croft -- were each charged with involuntary manslaughter.

All of the new charges are in connection with the Legionnaires' disease outbreak in the Flint area that led to 12 deaths after the city's water supply was switched to the Flint River in April 2014.

**Read more Free Press coverage of the Legionnaires' disease outbreak:**

[Read the Free Press investigation from April 2016: Why were officials silent on Legionnaires' in Flint? \(/story/news/local/michigan/flint-water-crisis/2016/04/09/flint-water-crisis-legionnaires/82397428/\)](#)

[Here are all the victims of the Legionnaires' disease outbreak in Flint \(/story/news/local/michigan/flint-water-crisis/2016/04/09/biographies-legionnaires-disease-flint-area/82478182/\)](#)

[Database: Search all of the Legionnaires' disease cases by county \(/story/opinion/contributors/raw-data/2016/04/09/legionnaires-disease-cases-michigan-flint/82761264/\)](#)

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**EDITOR'S NOTE:** Here is the full news release sent by Michigan Attorney General Bill Schuette this morning regarding five people charged with involuntary manslaughter in the Flint water crisis.

**FLINT** – Michigan Attorney General Bill Schuette today announced that he has charged Michigan Department of Health and Human Services Director Nick Lyon, former Flint Emergency Manager Darnell Earley, former City of Flint Water Department Manager Howard Crof as well as Michigan Department of Environmental Quality's Drinking Water Chief Liane Shekter-Smith and Water Supervisor Stephen Busc with involuntary manslaughter related to their alleged failure to act in the Flint Water Crisis.

Involuntary manslaughter is punishable by up to 15 years in prison, and/or a \$7,500 fine.

In addition to the involuntary manslaughter charges, Schuette also charged Lyon with Misconduct in Office, a felony, subject to 5 years in prison and/or a \$10,000 fine.

MDHHS Chief Medical Executive Eden Wells has also been charged with lying to a peace officer and obstruction of justice related to an alleged attempt to stop an investigation into the health crisis in Flint and later misleading investigators as to her actions.

Schuette was joined at the announcement by Genesee County Prosecutor David Leyton, Flint Water Investigation Special Prosecutor Todd Flood, and Chief Investigator Andrew Arena.

#### **INVESTIGATION INTERIM REPORT**

With more than a dozen people now having been charged, and pre-trial hearings and other legal proceedings occurring, Schuette released the initial results of the more than yearlong investigation. Included in the report is a comprehensive look at today's and past charges made, as well as a review of the facts and evidence in the case.

**NOTE: The report is attached to this press release.**

#### **DEFENDANTS**

Multiple Flint-area residents died of Legionnaires' disease in the time immediately following the switch from Detroit Water and Sewer Department to the Flint River. All defendants charged with involuntary manslaughter are charged in relation to the death of Robert Skidmore, 85, of Mt. Morris, Michigan. Skidmore died of Legionnaires' disease after many others had been diagnosed with the illness, yet no public outbreak notice had been issued. The charges allege failure to notify and lack of action to stop the outbreak allowed the disease to continue its spread through Flint's water system.

#### **NICK LYON**

As the Director of the Michigan Department of Health and Human Services, a position whose duties are outlined in the Michigan Constitution, Lyon has a duty to protect public health. The investigation has shown that Lyon allegedly received notice of a deadly Legionnaires' Disease outbreak in Genesee County nearly one year before he informed the public. After being informed about a potentially fatal health risk, Lyon allegedly deliberately failed to inform the public of a deadly Legionnaires' Disease outbreak, which resulted in the death of Robert Skidmore. Furthermore, Lyon allegedly participated in covering up the source of Genesee County's Legionnaires' Disease outbreak by repeatedly attempting to prevent an independent researcher from looking into the cause of the outbreak.

#### **Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] **FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.**

**COUNT 2 – MISCONDUCT IN OFFICE** Did between February 2015 and May 2017, commit misconduct in office, an indictable offense at common law, in violation of his duty to protect the health of the citizens of the County of Genesee, State of Michigan and to protect the public health enjoined upon him by the Michigan Public Health Code, MCL 333.5111(1); MCL 333.5111(2)(f); MCL 333.2251(1); MCL 333.2251(3); and MCL 333.20531 and the Critical Health Problems Reporting Act; contrary to MCL 750.505. [750.505] **FELONY: 5 Years and/or \$10,000.00.**

#### **EDEN WELLS**

As the Chief Medical Executive of the Michigan Department of Health and Human Services, Dr. Eden Wells has a responsibility to protect the health and welfare of Michigan residents. During the course of the investigation of the Flint Water Crisis, it is alleged that Wells

attempted to withhold funding for programs designed to help the victims of the crisis, and then lied to an investigator about material facts related to the investigation.

**Charges:**

**COUNT 1 – OBSTRUCTION OF JUSTICE** Did commit the common law offense of obstruction of justice by knowingly providing false testimony to a Special Agent and by threatening to withhold funding for the Flint Area Community Health and Environment Partnership if the partnership did not cease its investigation into the source of the Legionnaires' Disease outbreak in Flint, Michigan; contrary to MCL 750.504 FELONY: 5 Years or \$10,000. DNA to be taken upon arrest.

**COUNT 2 – LYING TO A PEACE OFFICER – 4 YEAR OR MORE CRIME INVESTIGATION** After being informed by Special Counsel Todd Flood, in the presence of Special Agent Arthur Wimmer, that they were conducting a criminal investigation, did knowingly and willfully make a statement or statements to the officer that he or she knew was false or misleading regarding the following material fact or facts relating to the investigation: the date she knew of the Legionnaires' Disease outbreak in Flint, Michigan, and the officer was conducting a criminal investigation regarding involuntary manslaughter; contrary to MCL 750.479c(2)(c). [750.470C2C]. HIGH COURT MISDEMEANOR: 2 Years and/or \$5,000.00.

**STEPHEN BUSCH**

Stephen Busch served as the Michigan Department of Environmental Quality District 8 Water Supervisor, a position which would have allowed him to order the Flint Water Treatment Plant be shut down because it was not producing safe water. In January of 2015, Busch was made aware of the Legionnaires' Disease outbreak, yet he allegedly represented to the public that Flint's drinking water was safe.

Busch was previously charged with felony Misconduct in Office, Tampering with Evidence, Conspiracy to Tamper with Evidence, and two misdemeanor counts for both a treatment and monitoring violation of the Michigan Safe Water Drinking Act.

**Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**LIANE SHEKTER-SMITH**

As the Chief of the Office of Drinking Water and Municipal Assistance at the Department of Environmental Quality, Shekter-Smith had the ability to order the Flint Water Treatment Plant shut down for failure to produce safe water.

Shekter-Smith was previously charged with a felony of Misconduct in Office and a misdemeanor charge of Willful Neglect of Duty.

**Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**HOWARD CROFT**

As Director of Public Works for the City of Flint, Croft had the ability to mandate changes to the treatment processes at the WTP to ensure proper disinfection was occurring, or switch back to DWSD. Mike Glasgow, former Flint Water Treatment Plant Operator, was allegedly pressured by Croft to start using the Flint Water Treatment Plant. Croft's alleged failure to treat the water properly contributed to the bacterial outbreaks found in Flint, including the legionella in the spring of 2015.

Croft was previously charged with felony False Pretenses and Conspiracy to Commit False Pretenses.

**Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**DARNELL EARLEY**

As an appointed Emergency Manager for the City of Flint, Earley was tasked with ensuring the health and welfare of the City. During his terms as Emergency Manager, Earley contributed to the decisions that allegedly caused the death of Robert Skidmore by keeping the City on the water source even as it became obvious the source should be switched back to Detroit Water & Sewer.

Earley was previously charged with felony False Pretenses, Conspiracy to Commit False Pretenses, Misconduct in Office and a misdemeanor charge of Willful Neglect of Duty.

**Charges:**

COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur, contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**A criminal charge is merely an accusation and the defendants are presumed innocent until proven guilty.**

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*Philos Trans R Soc Lond B Biol Sci.* 2008 Aug 12; 363(1503): 2505–2518.  
Published online 2008 Apr 23. doi: [10.1098/rstb.2008.0034](https://doi.org/10.1098/rstb.2008.0034)

PMCID: PMC2606714  
PMID: [18434282](https://pubmed.ncbi.nlm.nih.gov/18434282/)

## Violent behaviour among people with schizophrenia: a framework for investigations of causes, and effective treatment, and prevention

Sheilagh Hodgins\*

Department of Forensic Mental Health Science, Institute of Psychiatry, King's College London, De Crespigny Park, Denmark Hill, London SE5 8AF, UK

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### ABSTRACT

Go to:

Robust evidence has accumulated showing that individuals who develop schizophrenia are at elevated risk when compared to the general population to engage in violence towards others. This violence impacts negatively on victims as well as perpetrators and poses a significant financial burden to society. It is posited that among violent offenders with schizophrenia there are three distinct types defined by the age of onset of antisocial and violent behaviour. The early starters display a pattern of antisocial behaviour that emerges in childhood or early adolescence, well before illness onset, and that remains stable across the lifespan. The largest group of violent offenders with schizophrenia show no antisocial behaviour prior to the onset of the illness and then repeatedly engage in aggressive behaviour towards others. A small group of individuals who display a chronic course of schizophrenia show no aggressive behaviour for one or two decades after illness onset and then engage in serious violence, often killing, those who care for them. We hypothesize that both the developmental processes and the proximal factors, such as symptoms of psychosis and drug misuse, associated with violent behaviour differ for the three types of offenders with schizophrenia, as do their needs for treatment.

**Keywords:** violence, schizophrenia, aggression

### 1. VIOLENT CRIMINAL OFFENDING AMONG PERSONS WITH SCHIZOPHRENIA

Go to:

There is now robust evidence demonstrating that both men and women with schizophrenia<sup>1</sup> are at elevated risk when compared to the general population to be convicted of non-violent criminal offences, at higher risk to be convicted of violent criminal offences, and at even higher risk to be convicted of homicide (Wallace *et al.* 2004). For example, we examined a birth cohort composed of all the 358 180 persons born in Denmark from 1944 to 1947 followed until they were in their mid-forties. We excluded those who had died or emigrated before the end of the follow-up period. The official

criminal records of cohort members who had been admitted to a psychiatric ward at least once with a discharge diagnosis of schizophrenia were compared with those with no psychiatric admissions. The risk of a violent crime was elevated 4.6 (3.8–5.6) times among the men and 23.2 (14.4–37.4) times among the women with schizophrenia when compared with those with no admissions to a psychiatric ward (Brennan *et al.* 2000). Similar elevations in risk have been documented among persons with schizophrenia identified in other birth and populations cohorts (Hodgins 1992; Tiihonen *et al.* 1997; Arseneault *et al.* 2000; Wallace *et al.* 2004). While fewer women than men, with and without schizophrenia, are convicted of crimes, schizophrenia confers a greater risk for offending among women than among men.

This association between schizophrenia and violent offending is robust: it has been observed by different research teams who recruited samples from countries with different cultures and health and justice systems, and who measured the association of schizophrenia and offending using different experimental designs including longitudinal investigations of birth and population cohorts, comparisons of people with schizophrenia and their neighbours, and diagnostic studies of random samples of convicted offenders. There is no evidence to suggest that the elevated rates of violent offending among persons with schizophrenia when compared to the general population result from discrimination on the part of the criminal justice systems in the different countries where these investigations have been conducted (for a discussion, see Hodgins & Janson 2002). It is important to note that these convictions result from crimes that have been committed in the community and not in psychiatric wards, where aggressive behaviour towards others rarely, if ever, leads to criminal prosecution.

Results of the epidemiological investigations are consistent in showing that the proportions of persons with schizophrenia who commit crimes vary from one study to another, while the elevations in risk among those with schizophrenia when compared to the general population are similar (Hodgins 1998). In countries with high rates of violent crimes, proportionately more individuals with schizophrenia have convictions for violent crimes than in a country with lower rates of violent crimes. This observation suggests that at least some of the factors that contribute to violent crime in the general population also influence violent crime among persons with schizophrenia. The proportions of persons with schizophrenia who acquire convictions for violent crimes also varies by time period, reflecting differences in policies regarding diversion of mentally ill persons accused of crimes from the justice system to the health system (for further discussion, see Hodgins & Janson 2002). Most violent offences committed by persons with schizophrenia are assaults. While homicides attract much attention from the media, they are rare. In some countries, all persons accused of homicide undergo thorough psychiatric evaluations prior to trial. These evaluations have been used to estimate the proportion of homicides that are committed by individuals with schizophrenia and estimates vary from 6 to 28%, indicating substantial variation from one country to another and within countries by time period (Erb *et al.* 2001). Because the number of homicides varies greatly from one country to another while the prevalence of schizophrenia is relatively stable at just less than 1%, the numbers of persons with schizophrenia who commit homicides differs across countries. Thus, the proportion of persons with schizophrenia who engage in violence varies by place and time period, but evidence shows that it always remains higher than the proportion of offenders in the general population.

May 30, 2018

To: Cheboygan County Planning Commission Members

cc: Tuscarora Township Fire Chief  
Tuscarora Township Police Department  
Cheboygan County Life Support Systems  
Cheboygan County Sherriff Department

RE: HERITAGE COVE FARM ("HCF") – FAILURE TO MEET STANDARD SECTION 18.7(e)

Dear Cheboygan County Planning Commission Members,

- 1) Section 1.2 of the Cheboygan County Zoning Ordinance ("ZO") states, "***The purpose of this Ordinance is to promote and safeguard the public health, safety, morals and general welfare of the people of the unincorporated portions of Cheboygan County***". This same section also states the ZO is intended to "***reduce hazards to life and property***".
- 2) It is an undisputed fact that Cheboygan County Planning Commission ("PC") determined that HCF does not meet the standard identified in Section 18.7(e) of the ZO. Section 18.7(e) states, "***The proposed special land use will not place demands on fire, police or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.***" (the latter part of this statement in bold being referred to the "Safety Standard").
- 3) As it relates to the requirements in Section 18.7(e), rather than enforcing such provisions and declining the special use application, the PC (improperly) made an accommodation and approved the application. Setting aside the fact that this accommodation was made improperly and with a complete disregard for the facts, accommodation guidelines and zoning laws, the State of Michigan Court of Appeals has confirmed in its Opinion, that such approval by the PC is "***conditioned on the results of a police, fire, and ambulance impact study to determine whether this standard (under 18.7(e)) has been met...***". Please note, HCF must meet all requirements under 18.7(e), including but not limited to the Safety Standard.
- 4) Betsy Hanson of HCF has submitted letters from the Tuscarora Township Fire Chief, Tuscarora Township Police Department, Cheboygan Life Support Systems and the Cheboygan County Sherriff Department to the PC under a letter dated March 26, 2018. She refers to these letters as the "Police, Fire and Ambulance Impact Study" (the "Hanson Study"). Unfortunately, the Hanson Study is not a "study" but rather a compilation of opinions that contain no facts, data or other meaningful analysis. Furthermore, **not one of the letters in the "Hanson Study" address "hazards or other dangers to the subject property or adjacent properties"** which is a critical component of Section 18.7(e).

- a) Dictionary.com defines a “study” as, “research or a detailed examination and analysis of a subject, phenomenon, etc.” and “a written account of such research, examination, or analysis”. The letters included in the Hanson Study, include no data, no statistics, no facts, and make no reference to research, investigation, examination or analysis.
- b) The letter from Lieutenant Todd Ross of the Cheboygan County Sherriff Department states, “*At this time I do not believe that Heritage Cove Farm will place any hardship on, nor will it cause any burden for the Cheboygan County Sherriff Department.*” With all due respect to Lieutenant Todd Ross, his “belief” hardly constitutes a “study”. Furthermore, his letter does not attempt to address the Safety Standard. Lieutenant Ross is simply stating his opinion which he is certainly entitled to. However, the requirement is for a “study” to be conducted.
- c) Similarly, the letter from Chief Gordon Temple states “*I do not believe that any incidents (requiring police assistance) at Heritage Cove Farms would overwhelm our resources.*” With all due respect to Chief Temple, his “belief” does not constitute a “study”. I respect Chief Temple’s opinion but a study, it is not. Furthermore, his letter does not attempt to address “hazards” or “other dangers” (the Safety Standard) associated with HCF.
- 5) Considering the foregoing, enclosed hereto are 33 articles, studies and other reports that provide substantial evidence, data, facts, analysis, and investigation produced by independent third parties (that’s 33 more than what the Hanson Study includes). This evidence clearly indicates that HCF would be a burden on existing resources. More importantly, it is very clear that **HCF would create additional “hazards” and “other dangers” to the subject property and adjacent residential properties due to the nature of its operations (patients with bipolar disorder and schizophrenia).** A few examples are below.
- ◆ *Families of mentally ill pay terrible toll: Psychiatric patients are killing and assaulting their families at an alarming rate*
  - ◆ *Violent behavior among people with schizophrenia: ...the proportion of person with schizophrenia who engage in violence varies by place and time period, but evidence shows that it always remains higher than the proportion of offenders in the general population.*
  - ◆ *Violence in schizophrenia and bipolar disorder: Results: There were statistically significant increases in risk of violence in schizophrenia and in bipolar disorder in comparison with general population.*
  - ◆ *Mental Health Calls Stretch Police Resources*
  - ◆ *Violent behavior among people with schizophrenia: There is now robust evidence demonstrating that both men and women with schizophrenia are at elevated risk when compared to the general population to be convicted of non-violent criminal offenses, at higher risk to be convicted of violent criminal offences and at even higher risk to be convicted of homicide.*

- ◆ *Fatal run-ins between cops, mentally ill raise worries*
- ◆ *Why police calls involving the mentally ill often end in tragedy*

6) For the record, I have no doubt the Hansons and their attorneys will twist my words and take my comments out of context. They will label this as discrimination and stereotyping, despite the fact that I am simply relying on 3<sup>rd</sup> party studies and data. I expect nothing less - that has been their strategy since before even receiving a decision from the PC on its application because they knew HCF doesn't meet the zoning requirements otherwise. To be clear, I understand that not all people diagnosed with schizophrenia and/or bi-polar disorder will commit crimes or violent crimes. **The point is however, these studies clearly indicate that there is an increased risk for such hazards and therefore, HCF fails to meet the criteria of Section 18.7(e).**

In one of the attached articles published on [Schizophrenia.com](http://Schizophrenia.com), Dr. John Bradford, a leading Canadian expert on Criminal insanity and head of forensic psychiatry at Royal Ottawa Hospital states, ***"Unfortunately there is a correlation between severe mental illness and violence"***. Dr. Baker goes on to state that historically, ***"psychiatrists played down the fact there was a relationship because we were worried about the stigma to patients."*** If doing the right thing and protecting the citizens of Cheboygan County by enforcing the ZO is offensive or causes Cheboygan County to expend financial resources, so be it.

**As members of the Cheboygan County Planning Commission and representatives of the citizens of Cheboygan County, you MUST consider this evidence, do your job and decline/revoke the HCF application for failure to meet Section 18.7(e) of the ZO.**

Thank you.

Sincerely,

*Thomas Mangum*

Thomas Mangum  
Grandview Beach Drive

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**Families of mentally ill pay terrible toll: Psychiatric patients are killing and assaulting their families at an alarming rate**

**Schizophrenia Update, December 2002**

Vancouver Sun  
October 7, 2002 Monday Final Edition

advertisement

By: Veronique Mandal

The sturdy oak bar snaps snugly across the door leading to Robbi-Lynn Jessop's bedroom. Her parents, Bob and Pamela, place it there each night to prevent their daughter from killing them.

Once a gifted student at Riverside secondary school in Windsor, Ont., Robbi, 18, has for two years spiralled into the deepest abyss of schizophrenia. In 2000, she tried to set the family home on fire. Last year, she admitted to visions of stabbing her parents and two sisters, arranging their bodies liked toppled dominoes in a pool of their own blood.

Unable to find a residential treatment centre for their daughter, the Jessops took the extraordinary step of barricading Robbi's bedroom each night and taking turns standing watch. Where once they lovingly tucked her in, now they fearfully lock her in. "Right now there are nights when I am so mentally tired I want to say, 'Here Robbi, here's a knife, just to put an end to it,' " says Pamela Jessop. "If only we could get proper help for her, things might be different. But the system sucks and if you're mentally ill, God help you."

And God help your parents, siblings, husbands and wives.

Forced to provide their children with the love and sanctuary no longer available in institutions, the families of Canada's mentally ill are paying with their lives.

Assembling court transcripts, coroner's inquest reports and other archival records, a Windsor Star investigation has documented more than 130 murders and murder-suicides across Canada since 1997 in which mental illness played a prominent role. They occurred in a five-year period while Ontario, B.C. and other provinces were stepping up campaigns to close mental institutions and treat patients in the community.

Psychiatric patients are assaulting and murdering their loved ones at an alarming rate, with family members the victims in three out of four killings committed by the mentally ill, the Star has found.

The six-month Star investigation into mental illness in Canada, particularly schizophrenia, the most chronic and debilitating of the diseases, uncovered:

- Critical gaps in institutional care, particularly 24-hour emergency psychiatric care, undermined by a lack of psychiatrists and delays in psychiatrists responding to calls.
- Deficiencies in provincial laws aimed at forcing the dangerously mentally ill to take medication.
- A staggering increase of mental illness in the criminal justice system, with a commensurate rise in the use of the insanity defence, particularly in Quebec.
- Restricted access for many schizophrenics to the most effective, and costly, anti-psychotic drugs.
- Inadequate training for most law enforcement officers confronting the mentally ill, who die at the hands of police at the rate of about two per year.

Four years ago, Ruth Millar, 49, of Victoria, couldn't find suitable treatment for her schizophrenic son Aaron, 24, so she took him into her home. One night, as Ruth was doing the supper dishes, Aaron, tormented by voices which told him Ruth was going to harm the family, plucked a ceremonial sword off the wall and drove it through her heart.

A coroner's jury, created for the inquest into Millar's death, called for immediate funding for a day hospital in Victoria for psychiatric patients and that money should be provided to staff an assertive outpatient and outreach program.

Although charged with second-degree murder, Aaron was found not criminally responsible by a B.C. Supreme Court justice and he spent more than two years in the Forensic Psychiatric Centre in Coquitlam.

In a 1993 case predating The Star's investigation, a 79-year-old Vancouver woman was murdered by the son of her nephew after she took him because he had nowhere else to go.

Mark Andrew Bottomley, then 24, was charged with second-degree murder after Kathleen O'Sullivan's partially clad body was found in the lane behind her basement suite early Christmas Day. He pleaded guilty to manslaughter in September, 1994.

Mental illness was unequivocally established as the cause in 108 of the killings since 1997 examined by The Star. These included murders in which a court

found the accused not criminally responsible due to a mental disorder -- the former insanity defence -- and murder-suicides in which mental illness was found to be a determining factor. In these cases, 80 of the 108 victims were related to their killers by blood or marriage.

A further 23 victims were friends, neighbours, employees, roommates or fellow residents of an apartment or rooming house, meaning that in 103 of the 108 killings, the assailant and victim knew each other. A scant five cases were random.

The most recent case occurred about two weeks ago in Lorraine, Que. Andre Letellier, 30, whom neighbours said had a history of schizophrenia and roamed the neighbourhood singing and talking to himself, killed his parents and hanged himself.

Many of the victims had opened their homes and hearts so their troubled loved ones could get well. Twenty-seven of the victims were parents or grandparents, ranging from middle-class Montreal suburbanites to the town historian in Smoky Lake, Alta. Their killers often led deceptively routine lives -- honour-roll students, gifted athletes, kids who paddled canoes and peddled newspapers.

"He was cheerful, witty, unassuming," mourner Perry Anglin said of Geoff Fertuck, a 35-year-old schizophrenic who stabbed to death his parents, Ed and Margaret, before throwing himself in front of a freight train in the Montreal suburb of Beaconsfield. "He was so tender and gentle and full of self-doubt that he didn't realize what a terrific person he was."

A report recently issued by the Quebec coroner's office said Fertuck was found to be schizophrenic in August 2000 while he was being treated for depression. In January 2001, a psychiatrist told Fertuck's parents it would be dangerous to keep him at home. But they decided to keep looking after him while his condition was monitored by a psychiatrist and a social worker.

On May 16 of that year, the three were found dead.

A 911 call on the night of June 13, 1997 captured the horror of 11-year-old Kenny Meehan as he witnessed his father Joseph, 43, nearly dismember his younger brother Michael, 8, in their Toronto home. Suffering what psychiatrists called either bipolar disorder or a form of schizophrenia, Joseph Meehan fell under the delusion that his son was the devil.

"My dad's killing my brother," Kenny told the 911 operator. "He's got blood all over him ... I'm gonna die. He looks so sick. He was strangling him. Oh, my God ... I think he's not alive."

Two years ago, a Toronto court ruled that mental illness rendered truck driver David Patten, 45, not criminally responsible for the bludgeoning death of his parents Manus, 81, a retired garbage man, and Clare, 73, a retired nurse, with

whom Patten lived. He beat them in their driveway with a red-handled spade.

Patten thought he was the "leader of the British Army" heading into the Third World War and could avert the conflict by killing the devil possessing his parents, according to court records.

"He thought he was killing the devil inside his father and that his father was still alive and the devil was then transferred to his mother, so he killed her," testified Dr. Graham Glancy, a psychiatrist who estimated Patten suffered from mental illness for more than 20 years, perhaps since Grade 8.

Schizophrenics often perceive their caregivers as enemies because they enforce difficult rules. Under a new Ontario law, designated decision-makers -- typically parents -- can obtain the legal authority to hospitalize their children or force them to take medication that often carries unpleasant side effects such as weight gain.

Many of the killers in The Star's investigation were defying court orders to take their meds, often in the belief that because their symptoms had subsided, they were cured. Typically, the assailant experienced a quick snap into psychoses, striking out as if in a trance. Many heard non-existent voices which cast their victims as NASA spies, satanic agents or seven-foot monsters.

"It's a very common story to hear that the victims have been parents or someone close to the mentally ill person" said Dr. James Young, Ontario's chief coroner. "Family members are seen as the enemy, the people who call the police, take them to hospital or seek a court-ordered admission."

The cases involved some of the most brutal attacks this country has seen -- bizarre acts of dismemberment, decapitation and cannibalism. In a 1997 murder in Toronto, Gregory Workman, 44, said he stabbed his mother Noel, 77, five times in the neck, chest and back because he believed he was a surgeon carrying out a medical procedure.

"I lost my mind, and two people lost their lives," Brian Eugene Wessel, 30, told a Regina courtroom in January 2001 after pleading guilty to manslaughter in the deaths of his wife and brother-in-law in Fort Qu'Appelle, Sask. Four days after his supply of anti-psychotic medication ran out, Wessel cleaved the pair in their sleep.

It's the nature of psychosis that the mere act of killing isn't enough; a ritualistic climax is also required to quiet the voices, said Dr. John Bradford, a leading Canadian expert on criminal insanity.

"The mind is so disordered the person acts in a frenzied rage, often with amazing strength," said Bradford, head of forensic psychiatry at Royal Ottawa Hospital. "If the mind is convinced the victim is a demon you can imagine how desperate the person is to get rid of such a threat. It's very sad but not

unusual."

Family peril was the key finding of a Star investigation into mental illness in Canada -- particularly schizophrenia and its close cousin, bipolar disorder -- prompted by the April 9 killing of Windsor heart specialist Dr. Percy Demers. Earlier that day, Demers was unable to get his mentally ill son Thomas, who had stopped taking his medication, admitted to hospital.

Thomas Demers is charged with murdering his dad.

The mental health establishment has long asserted that psychiatric patients pose no greater threat than the general population. However, a growing body of evidence suggests that those not taking their medications -- and the estimated 10 to 15 per cent who do not respond to treatment -- are prone to violence.

A recent study by the American Psychiatric Association, cited by Bradford, showed the risk of violence is six to seven times higher among people with major depression or schizophrenia. The risk rises to six to 12 times higher in schizophrenics who drink alcohol and 35 to 40 times higher for those on cocaine.

"Unfortunately there is a correlation between severe mental illness and violence," said Bradford. "Up until the early '90s psychiatrists played down the fact there was a relationship because we were worried about the stigma to patients."

Clearly, families and friends are shouldering more of the burden of caring for the mentally ill. Over the past 30 years the number of mental-health beds in Canadian hospitals has dropped by more than two-thirds, to 15,011 from 47,633.

Meanwhile, the mentally ill represent the fastest growing segment of Canada's prison population, with estimates that by 2020, more than 60 per cent of people with schizophrenia will have a criminal record.

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(4)

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Psychiatr Danub. 2013 Mar;25(1):24-33.

## Violence in schizophrenia and bipolar disorder.

Volavka J<sup>1</sup>.

### Author information

### Abstract

**BACKGROUND:** Although most psychiatric patients are not violent, serious mental illness is associated with increased risk of violent behavior. Most of the evidence available pertains to schizophrenia and bipolar disorder.

**METHODS:** MEDLINE data base was searched for articles published between 1966 and November 2012 using the combination of key words 'schizophrenia' or 'bipolar disorder' with 'aggression' or 'violence'. For the treatment searches, generic names were used in combination with key words 'schizophrenia' or 'bipolar disorder' and 'aggression' No language constraint was applied. Only articles dealing with adults were included. The lists of references were searched manually to find additional articles.

**RESULTS:** There were statistically significant increases of risk of violence in schizophrenia and in bipolar disorder in comparison with general population. The evidence suggests that the risk of violence is greater in bipolar disorder than in schizophrenia. Most of the violence in bipolar disorder occurs during the manic phase. The risk of violence in schizophrenia and bipolar disorder is increased by comorbid substance use disorder. Violence among adults with schizophrenia may follow at least two distinct pathways-one associated with antisocial conduct, and another associated with the acute psychopathology of schizophrenia. Clozapine is the most effective treatment of aggressive behavior in schizophrenia. Emerging evidence suggests that olanzapine may be the second line of treatment. Treatment adherence is of key importance. Non-pharmacological methods of treatment of aggression in schizophrenia and bipolar disorder are increasingly important. Cognitive behavioral approaches appear to be effective in cases where pharmacotherapy alone does not suffice.

**CONCLUSIONS:** Violent behavior of patients with schizophrenia and bipolar disorder is a public health problem. Pharmacological and non-pharmacological approaches should be used to treat not only violent behavior, but also contributing comorbidities such as substance abuse and personality

disorders. Treatment adherence is very important for successful management of violent behavior.

PMID: 23470603

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Philos Trans R Soc Lond B Biol Sci. 2008 Aug 12; 363(1503): 2505–2518.  
Published online 2008 Apr 23. doi: [10.1098/rstb.2008.0034](https://doi.org/10.1098/rstb.2008.0034)

PMCID: PMC2606714  
PMID: [18434282](https://pubmed.ncbi.nlm.nih.gov/18434282/)

## Violent behaviour among people with schizophrenia: a framework for investigations of causes, and effective treatment, and prevention

Sheilagh Hodgins\*

Department of Forensic Mental Health Science, Institute of Psychiatry, King's College London, De Crespigny Park, Denmark Hill, London SE5 8AF, UK  
\*[s.hodgins@iop.kcl.ac.uk](mailto:s.hodgins@iop.kcl.ac.uk)

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### ABSTRACT

Go to:

Robust evidence has accumulated showing that individuals who develop schizophrenia are at elevated risk when compared to the general population to engage in violence towards others. This violence impacts negatively on victims as well as perpetrators and poses a significant financial burden to society. It is posited that among violent offenders with schizophrenia there are three distinct types defined by the age of onset of antisocial and violent behaviour. The early starters display a pattern of antisocial behaviour that emerges in childhood or early adolescence, well before illness onset, and that remains stable across the lifespan. The largest group of violent offenders with schizophrenia show no antisocial behaviour prior to the onset of the illness and then repeatedly engage in aggressive behaviour towards others. A small group of individuals who display a chronic course of schizophrenia show no aggressive behaviour for one or two decades after illness onset and then engage in serious violence, often killing, those who care for them. We hypothesize that both the developmental processes and the proximal factors, such as symptoms of psychosis and drug misuse, associated with violent behaviour differ for the three types of offenders with schizophrenia, as do their needs for treatment.

**Keywords:** violence, schizophrenia, aggression

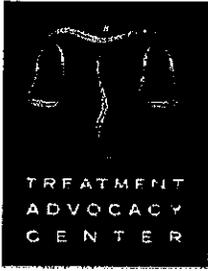
### 1. VIOLENT CRIMINAL OFFENDING AMONG PERSONS WITH SCHIZOPHRENIA

Go to:

There is now robust evidence demonstrating that both men and women with schizophrenia<sup>1</sup> are at elevated risk when compared to the general population to be convicted of non-violent criminal offences, at higher risk to be convicted of violent criminal offences, and at even higher risk to be convicted of homicide (Wallace *et al.* 2004). For example, we examined a birth cohort composed of all the 358 180 persons born in Denmark from 1944 to 1947 followed until they were in their mid-forties. We excluded those who had died or emigrated before the end of the follow-up period. The official



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## Eliminating Barriers to the Treatment of Mental Illness

Fixing the System (/fixing-the-system) Evidence & Research (/evidence-and-research)

Key Issues (/key-issues) Who We Are (/about-us) What You Can Do (/what-you-can-do)

# Public Service Costs

The failure of our mental health system is a nationwide crisis, with impacts felt far beyond those with a severe mental illness.

When our sickest citizens aren't able to get care, they frequently end up in systems that weren't designed for front-line mental health care. This relatively small group cycles repeatedly through courts, jails, hospital emergency rooms and homeless shelters. The care they receive is fragmented and uncoordinated, coming at great cost to taxpayers, often with poor outcomes.

What do these inefficiencies look like?

ERs across the country fill with acutely ill patients waiting for a bed to open, sometimes for days or even weeks. One study (<https://www.acep.org/uploadedFiles/ACEP/newsroom/NewsMediaResources/StatisticsData/schu2010surveyPDF.pdf>) found that at least 70% of ER administrators held mentally ill patients for 24 hours or longer waiting for a bed. Police and fire responders are increasingly diverted to mental health calls, and forced to expend enormous resources and personnel transporting psychiatric patients for evaluation or care. Individuals with diseases like schizophrenia and bipolar disorder are 10 times more likely to be in a jail or prison than a hospital bed.

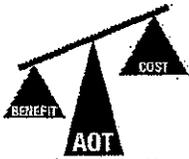
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**Advocates**  
(<http://www.cqrcengage.com/tr>)

**Family and Loved Ones (/family-  
Media (/press-room)**

### Key Issues



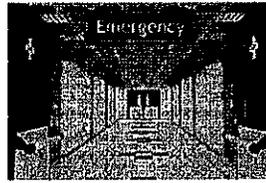
**Saving Lives - Saving Money**  
(/storage/documents/aot-cost-study.pdf)

**State and Community Considerations for Demonstrating the Cost Effectiveness of AOT Services**  
(/storage/documents/aot-cost-study.pdf)



**The High Cost of Schizophrenia**  
(/fixing-the-system/features-and-news/3599-research-weekly-the-high-cost-of-schizophrenia)

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**Anosognosia** (/key-issues/anosognosia)  
**Consequences of Non-Treatment** (/key-issues/consequences-of-non-treatment)  
**Criminalization of Mental Illness** (/key-issues/criminalization-of-mental-illness)

**Public Service Costs** (/key-issues/public-service-costs)

**Bed Shortages** (/key-issues/bed-shortages)

**Violence** (/key-issues/violence)

## State Map

The Treatment Advocacy Center has documented the laws and standards in each state. State data also includes psychiatric bed availability and the number of people with severe mental illness in jails and prisons in each state.  
(/browse-by-state)

## BROWSE BY STATE

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## News

**RESEARCH WEEKLY: September 2017 Research Roundup** (/fixing-the-system/features-and-news/3921-research-weekly-september-2017-research-roundup)

September 26, 2017

**Read More** (/fixing-the-system/features-and-news/3921-research-weekly-september-2017-research-roundup)

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**Statement on Senate healthcare reform proposal** (/fixing-the-system/features-and-news/3919-statement-on-graham-cassidy-heller-johnson-healthcare-reform-proposal)

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## Research

**RESEARCH WEEKLY: The High Cost of Schizophrenia** (/key-issues/public-service-costs/3599-research-weekly-the-high-cost-of-schizophrenia)

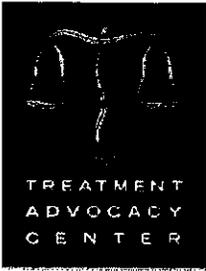
August 09, 2016

**RESEARCH WEEKLY: Money and Mental Health** (/key-issues/public-service-costs/3597-research-weekly-money-and-mental-health)

August 02, 2016

**People with Untreated Mental Illness 16 Times More Likely to Be Killed By Law Enforcement** (/key-issues/public-service-costs/2976-people-with-untreated-mental-illness-16-times-more-likely-to-be-killed-by-law-enforcement-)

December 09, 2015



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[t \(http://twitter.com/treatmentadvctr\)](http://twitter.com/treatmentadvctr)

[FOR THE MEDIA \(/PRESS-ROOM\)](#)

## Eliminating Barriers to the Treatment of Mental Illness

[Fixing the System \(/fixing-the-system\)](#) [Evidence & Research \(/evidence-and-research\)](#)

[Key Issues \(/key-issues\)](#) [Who We Are \(/about-us\)](#) [What You Can Do \(/what-you-can-do\)](#)

# Mental Health Calls Stretch Police Resources

(Nov. 10, 2014) Police have received a twenty-five percent increase in calls from people in a psychiatric crisis in the last two years reports KTVU News in Berkeley, California ("Mental health calls increase, while resources still slim, (http://www.ktvu.com/story/27294545/2-investigates-mental-health-calls-to-police-increase-but-resources-are-still-slim) Nov. 6).



Responding to these mental health emergencies are "part of a growing portfolio of duties that are required in today's world by today's cops," said Officer Chris Scott, part of the Berkeley Police Department's Crisis Intervention Team (CIT).

"You couple homelessness with a severe mental illness and the fact that they are not on medication, often times that spells danger for us," Scott continued. "It's a kind of red zone."

### Resources For

[Policymakers \(/policymakers\)](#)

[Advocates \(http://www.cqrcengage.com/tr\)](http://www.cqrcengage.com/tr)

[Family and Loved Ones \(/family-](#)

[Media \(/press-room\)](#)

Sometimes, the officers are responding to one person multiple times in one day or several times over the course of a few months, draining time and resources.

In fact, in one case earlier this year, officers responded to one man nine times over a four-month period. The man was reportedly experiencing suicidal thoughts, displaying psychotic behavior and was even placed on a psychiatric hold two times in one day, the Berkeley Police Department reports.

By the end of this year, police in Berkeley will have responded to more than 1,000 calls from people in a psychiatric crisis this year.

It is no surprise then that earlier this month the world's largest law enforcement group, the IACP, endorsed assisted outpatient treatment (<http://www.prweb.com/releases/2014/11/prweb12293987.htm>) (AOT) for people with severe mental illness.

"AOT (<http://www.treatmentadvocacycenter.org/solution/assisted-outpatient-treatment-laws>) will help those treatment the most, which will improve outcomes for this population and reduce the burden on law enforcement," said Chief of Police Richard Beary, IACP's president.

"Untreated severe mental illness is highly associated with arrest and incarceration," said Chief of Police Michael Biasotti, a member of the Treatment Advocacy Center board of directors. "A disproportionate number of these individuals are ending up in the criminal justice system when they should be receiving treatment."

We couldn't agree more.

Terms: Criminalization of Mental Illness (</component/taxonomy/term/list/25/472>), Public Service Costs (</component/taxonomy/term/list/11/472>)

## State Map

The Treatment Advocacy Center has documented the laws and standards in each state. State data also includes psychiatric bed availability and the number of people with severe mental illness in jails and prisons in each state. ([browse-by-state](#))

### BROWSE BY STATE

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[{/BROWSE-BY-STATE}](#)

Don't Box Them In.  
Give Them A Bed Instead.

Support More Access to Inpatient  
Beds

**PLEDGE (/A-BED-**

**INSTEAD/PLEDGE-**

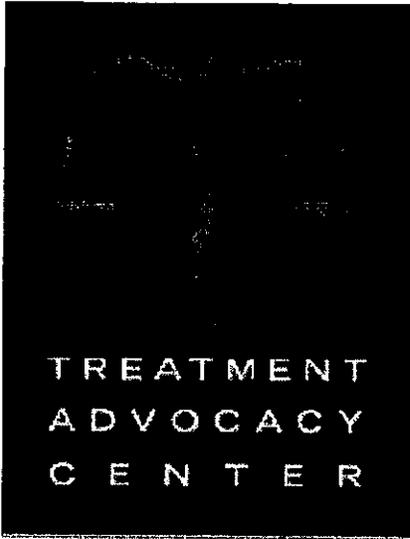
**TO-INCREASE-**

**ACCESS-TO-**

**INPATIENT-BEDS)**

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8



- GET HELP

- SIGN UP

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OVER  
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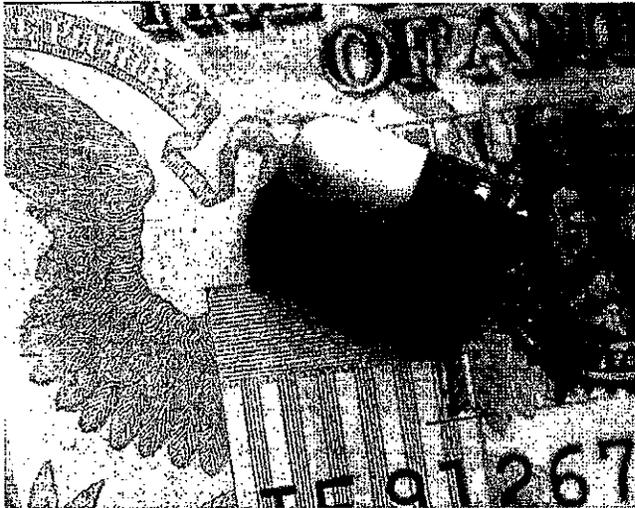
- FOR THE MEDIA

Eliminating Barriers to the Treatment of Mental Illness

- Fixing the System
- Evidence & Research
- Key Issues
- Who We Are
- What You Can Do



(Oct. 11, 2017) Serious mental illness has a dramatic impact on those who suffer from it and their loved ones, but it also affects those who may not be touched first hand. When people suffering from untreated mental illness do not get care because they are unable to or because they do not know they are sick, they end up in places that are not designed for their needs. This leads to major public service costs.



Law enforcement are called upon more and more to answer mental health crisis calls, often using enormous resources and personnel in transporting psychiatric patients for evaluation or care. This often occurs without law enforcement being trained to develop skills necessary to diffuse a crisis situation. This situation is dangerous for both law enforcement and individuals with untreated serious mental illness being, who are 16 times more likely to be killed by law enforcement during an encounter compared to those without a serious mental illness.

People with untreated serious mental illness can remain in emergency rooms for days or even weeks while they wait for a psychiatric hospital bed to open. This doesn't help the patient in psychiatric crisis, and it certainly does not help emergency room physicians who say that mental health care systems are not working for the patients in their region. This in turn leads to more psychiatric patients in hospital ERs waiting longer to see doctors.

Assisted outpatient treatment (AOT) has been shown to cut costs through reducing incidences in which law enforcement, ERs and other public servants interact with those who are untreated. According to a study by the Treatment Advocacy Center and Health Management Associates, AOT reduced direct costs such as outpatient services for non-mental health issues and administrative costs for serving individuals. Through the effective use of AOT, it is possible to lessen the burden on all public services.

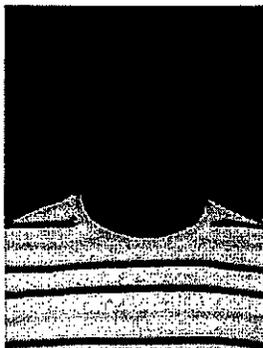
by **Heather Carroll**



# Schizophrenic man gets life in Christmas Eve murder

Cris Barrish, The News Journal

Published 11:35 a.m. ET July 1, 2015 | Updated 2:43 p.m. ET July 1, 2015



(Photo: Police photo)

A 30-year-old mentally ill Wilmington man ([/story/news/crime/2015/01/22/murder-christmas-eve-delaware-convicted/22190179/](https://www.delawareonline.com/story/news/crime/2015/01/22/murder-christmas-eve-delaware-convicted/22190179/)) will spend the rest of his life behind bars for shooting his sister's boyfriend to death on Christmas Eve 2012 while her 6-year-old son was in the house.

Joshua Stephenson, who was indicted on first-degree murder and other charges for killing 29-year-old Myron J. Ashley, was convicted in January of second-degree murder, firearm offenses and child endangerment. Ashley lived with Stephenson's sister and their son in the 1200 block of West Second Street.

Stephenson has been held since shortly after Christmas day arrest at the Delaware Psychiatric Center's Jane E. Mitchell Building, a 42-bed locked facility for people charged with crimes and awaiting psychiatric evaluation, prisoners serving sentences, and those deemed criminally insane.

His public defender, Kathryn van Amerongen, said he is under the care of state psychiatrists and that both prosecutors and Superior Court Judge John E. Parkins Jr. acknowledged he has serious mental health issues.

"With Joshua it's very apparent," van Amerongen said.

Ashley's mother, Robin Harris, said she is satisfied that Stephenson will never be free again. "It was time for him to pay his price. He betrayed us because we were good to him," Harris said Wednesday. "I was devastated over this and was very close to my son. He was a good father."

Not long before the killing, Stephenson's sister had kicked him out of the house because he had schizophrenia, bipolar disorder and had been acting erratically and not taken his medication, court records show. He had shown up at their door the night before Christmas and was "rambling and speaking irrationally," the documents said.

About 10 p.m. his sister took the child upstairs to go to bed while Ashley and Stephenson spoke. She heard two gunshots and ran downstairs to find Ashley on the living room floor, bleeding from a gunshot wound to his chest, court records indicate.

Her brother was opening the door to leave, so she grabbed his arm and asked him what had happened, but he punched her in the face and fled, according to the documents. Ashley was rushed to Christiana Hospital where he died.

The boy told detectives he heard a gunshot, went down the steps and saw his mother and "Uncle Josh" fighting, and also saw Stephenson hide a gun in the couch, where police said they found a .45-caliber handgun, records showed.

On Christmas morning, city police found Stephenson in the basement of his grandparents' home in the 3200 block of North Van Buren Street, where he was arrested without incident and held without bail. A judge ordered him evaluated several days later at his preliminary hearing, and he has been at the state psychiatric hospital near Minquadale for the last 2 1/2 years, van Amerongen said.

In the years before the killing, Stephenson had several brushes with the law, with convictions for second-degree assault, offensive touching, resisting arrest, terroristic threatening and other crimes.

During the weeklong trial earlier this year, Stephenson did not testify and van Amerongen did not call any witnesses on his behalf. The assistant public defender said she asked Judge Parkins to let the jury consider self-defense in the shooting, but that Parkins declined. She plans to appeal on that basis and perhaps once the record is studied, she said.

She would not discuss her conversations with Stephenson about the killing, citing lawyer-client confidentiality, but said Stephenson "said that regardless of what happened he did apologize."

At his June 17 sentencing, Parkins Jr. gave Stephenson life in prison for the killing, 10 years for possession of a firearm during the commission of a felony, 10 years for possession of a firearm by a person prohibited, and one year of probation for child endangerment.

Contact senior investigative reporter Cris Barrish at (302) 324-2785, [cbarrish@delawareonline.com](mailto:cbarrish@delawareonline.com), on Facebook or Twitter @crisbarrish.

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# Bain was in manic state caused by bipolar disorder at time of shooting: psychiatrist

The Canadian Press

Published Wednesday, July 27, 2016 1:32PM EDT

Last Updated Wednesday, July 27, 2016 5:43PM EDT

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A psychiatrist who met with alleged murderer Richard Henry Bain nearly two weeks after his arrest in 2012 says it's clear to her he was in a manic state brought on by bipolar disorder.

Marie-Fredérique Allard took the stand Wednesday for the defence at Bain's first-degree murder trial.

Bain has pleaded not guilty to the murder charge, three counts of attempted murder and two arson-related charges in connection with a shooting on Sept. 4, 2012, the night the Parti Québécois won the provincial election.

## PHOTOS



Lighting technician Denis Blanchette was killed and fellow stagehand David Courage seriously injured after they were both struck by the same bullet outside the club where the PQ was celebrating its victory.

The Crown has argued the crime was premeditated and politically motivated, while the defence has countered Bain should be held not criminally responsible by way of mental disorder.

Allard, a forensic psychiatrist, said Bain's then-lawyer asked her to meet with the accused at a detention centre on Sept. 18, 2012, to evaluate his mental state.

"He was clearly psychotic with symptoms of mania," she told the jury of her first visit.

Allard called that meeting "difficult" as Bain was at times irritable, angry and arrogant.

He wouldn't speak much about the night of the shooting, mostly referring to dissatisfaction with his attorney, complaining about his detention conditions and alleging he was the victim of persecution.

Allard said he also didn't seem particularly preoccupied by the fact he was facing the most serious charge in the Criminal Code.

She testified he told her he was doing God's work.

"Whatever I'm doing is sanctioned by him," Allard quoted Bain as telling her before he reportedly said, "my God will judge me."

Allard testified it was clear to her following the three-hour session that Bain was psychotic but that it was impossible to say how long he'd been in a manic state.

She said it's not uncommon for a manic episode to last many weeks or months.

"I didn't know when the episode started, but I knew on the 18th, Mr. Bain was experiencing psychosis and this psychosis was related to bipolar disorder," she said.

The following day, Allard called Bain's treating psychiatrist to take him off his anti-depressant medication, which tends to induce such manic episodes.

That was the day Bain called radio station CJAD from jail and gave a 38-minute interview outlining his political vision for Montreal to split from Quebec.

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**The New York Times** | <https://nyti.ms/2FouLb1>

N.Y. / REGION

# Police Sergeant Who Killed Mentally Ill Woman Goes on Trial

By JAMES C. MCKINLEY Jr. JAN. 29, 2018

A police officer who shoots a person wielding a baseball bat is rarely prosecuted in the United States. Most states allow officers to use lethal force to counter an attack with a deadly weapon, like a knife, an ax or a club.

But after Deborah Danner, 66, a schizophrenic woman, was shot and killed by a police sergeant after picking up a bat, the mayor and police commissioner condemned the shooting, saying the officer failed to follow police protocols. Seven months later, the Bronx district attorney, Darcel D. Clark, convinced a grand jury to indict the sergeant, Hugh Barry, on murder and manslaughter charges.

On Tuesday, Sergeant Barry goes on trial in State Supreme Court in the Bronx, and a judge will have to determine if his actions were justified when he fired twice at Ms. Danner as she warded him off with the bat during a psychotic episode.

The pivotal question facing the judge will be whether Sergeant Barry had exhausted other options for safely containing Ms. Danner before he fired his pistol.

The death of Ms. Danner came amid a national debate over police shootings. It prompted protests in New York, led by elected leaders, including the former City Council speaker. These critics complained that mentally ill people too often die at the hands of the New York police and raised questions about how well officers are trained to deal with emotionally disturbed people.

Mayor Bill de Blasio called the shooting “tragic and unacceptable” and the police commissioner, James P. O’Neill, said flatly: “We failed.”

Ms. Danner’s family has sued the city in Federal District Court, claiming her civil rights were violated. Sergeant Barry has been suspended from the police force and faces the prospect of departmental charges after the criminal case against him is concluded.

For many New Yorkers, Ms. Danner’s death echoed the 1984 death of Eleanor Bumpurs, another mentally ill woman killed by the police during a confrontation in her Bronx apartment building.

Ms. Bumpurs’ shooting forced a reckoning within the Police Department that led to new rules for dealing with emotionally disturbed people, requiring officers, among other things, to try to contain them in a safe space and wait for a supervisor to arrive.

The police had been called at least twice before to Ms. Danner’s apartment in the Castle Hill neighborhood of the Bronx. One time she had barricaded herself inside, forcing the authorities to break down the door. Another time she had threatened to jump out a window.

She feared death at the hands of the police, her relatives said. She had even written a six-page essay about her illness to a lawyer that mentioned Ms. Bumpurs. “We are all aware of the all too frequent news stories about the mentally ill who come up against law enforcement instead of mental health professionals and end up dead,” she wrote.

The street protests and publicity surrounding the shooting prompted Sergeant Barry to ask a judge to move the trial to another town, but the motion was denied. Now he has waived his right to a jury and put his fate in the hands of Justice Robert A. Neary.

Sergeant Barry’s lawyers plan to argue he acted in self-defense. According to his account related in court papers, he arrived at the apartment on Pugsley Avenue

on Oct. 18, 2016, to find four officers standing in the living room and Ms. Danner, who was 5-foot-7 and 233 pounds, sitting on a bed in her room, snapping a pair of scissors and cutting paper. The police had learned from a 911 caller and from Ms. Danner's sister that she was a paranoid schizophrenic.

Sergeant Barry says he talked Ms. Danner into putting the scissors on a nightstand and coaxed her to the doorway of the room. But she refused to come further.

Then, he motioned to another officer and together they tried to grab her. She retreated into her room and pulled a baseball bat from under the blankets on her bed, according to his account. The sergeant and a second officer went into the room after her. She raised the bat as if she were stepping to the plate. Sergeant Barry pulled his gun and told her more than once to drop the bat. She swung it at his head. He fired twice into her torso.

For Sergeant Barry's lawyer, Andrew C. Quinn, the officer's narrative is a cut-and-dried case of self-defense under state law. Mr. Quinn has argued in court papers that seek to dismiss the indictment that the sergeant was trying to prevent Ms. Danner from grabbing the scissors again when he entered her bedroom. He could not retreat once she picked up the bat, the lawyer has argued.

Prosecutors do not agree with the sergeant's version of events, though Darcel A. Clark, the Bronx district attorney, has so far kept her cards close to her vest about what her investigators believe happened. The accounts the other officers who were with Sergeant Barry gave to the grand jury have not been made public, and their testimony is expected to be critical to the prosecution's case.

The lead prosecutor, Wanda Perez-Maldonado, has said in court papers that Sergeant Barry, 32, a nine-year veteran in the 43rd Precinct, was impatient to take Ms. Danner into custody and failed to devise a plan with the other officers for keeping her corralled.

Within minutes of arriving, he signaled to the other officers to rush Ms. Danner, the prosecutor wrote. Indeed he was only in the apartment eight minutes

before he fired the fatal shots. "It is telling that out of the six officers who were present in Ms. Danner's apartment, only the defendant drew and fired his weapon," she said.

Ms. Perez-Maldonado, who is the chief of office's Public Integrity Bureau, also has said in court papers that Sergeant Barry ignored his training. He failed to isolate Ms. Danner until officers from the specially trained Emergency Service Unit could arrive.

"Defendant's own testimony confirms that, without making or communicating any kind of plan, defendant rushed a paranoid schizophrenic who obviously did not want to leave her house and who in response grabbed a baseball bat," she wrote in one filing. "Contrary to defendant's assertions, it was eminently foreseeable that Ms. Danner might grab another weapon, as Ms. Danner had already brandished a pair of scissors."

Sergeant Barry faces a top charge of murder, but the jury will also consider the lesser charges of manslaughter, involuntary manslaughter and criminally negligent homicide, each with slightly different elements to prove.

Whatever the outcome for Sergeant Barry, the three-week trial will cast a harsh light on the police department's protocols, training and methods, said civil rights lawyers and advocates for other victims of police shootings.

"It should put police policies and practices under the microscope," said Donna Lieberman, the executive director of the New York Civil Liberties Union. "This isn't the first case that someone has died at the hands of the police for suffering a mental illness."

Ms. Lieberman said a conviction would not address the underlying need for better practices. The city should consider having social workers team up with police to help pacify mentally disturbed people, a practice other cities have adopted. "It's really not fair to expect the police to go it alone," she said.

The charges against Sergeant Barry have infuriated the Sergeants Benevolent

Association and other police unions, who have accused the district attorney of caving to pressure from politicians and activists riding a national wave of outrage over police shootings of minorities. (Ms. Danner was black; Sergeant Barry is white.) The union has mounted a public-relations campaign in support of Sergeant Barry and has plans to pack the court with police officers.

The union president, Ed Mullins, has insisted that Sergeant Barry did follow longstanding police procedures: He calmed Ms. Danner down and got her to drop the scissors before moving to subdue her.

“This was a political decision,” he said. “Everyone is afraid of protesters.”

*Follow James C. McKinley Jr. on Twitter: @jamesmckinleyjr*

A version of this article appears in print on January 30, 2018, on Page A19 of the New York edition with the headline: Murder Trial Begins for Officer Who Killed Mentally Ill Woman.

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# Man suffering from paranoid schizophrenia who killed his parents with axe is committed to Central Mental Hospital

(12)



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Julian Cuddihy believed mum was trying to poison him Photo: Margaret McLaughlin

Daniel Hickey and Eoin Reynolds

June 20 2016 1:32 PM

- 
- Email

A man suffering from paranoid schizophrenia who attacked his parents with an axe has been committed to the Central Mental Hospital in Dublin.

Julian Cuddihy (43) was accused of murdering his mother Kathleen (73) and father James (77) at their family home in Churchtown, Carndonagh, Co Donegal on October 22nd, 2014.

Earlier this month, he pleaded not guilty by reason of insanity and a jury delivered a unanimous verdict after less than an hour of deliberation at the Central Criminal Court.

Mr Cuddihy, who believed that by killing his parents he was sending them to heaven, was today committed to the Central Mental Hospital (CMH) in Dundrum for inpatient care.

Ms Justice Margaret Heneghan ordered his committal on foot of a report by Dr Sally Lenihan, Consultant Forensic Psychiatrist based at the CMH in Dublin.

Dr Lenihan told the court that Mr Cuddihy was first admitted to the CMH on October 31st, 2014, suffering from psychotic symptoms and delusional beliefs.

She assessed him as suffering from paranoid schizophrenia, a state of mind that affects his thinking, perception, emotion and judgement, and that impairs his mental function to the extent that he requires care or treatment.

She told the court that the kind of care Mr Cuddihy needs is available only at the CMH.

- *Read more: Family of paranoid schizophrenic wanted to get psychiatric help for him in the weeks before he killed his parents with an axe, court hears*
- *Read more: Paranoid schizophrenic believed he was sending his parents to heaven when he attacked and killed them*

Ms Justice Heneghan said she was satisfied that Mr Cuddihy was suffering from a mental disorder under the definition of the 2006 Criminal Law (Insanity) Act and was in need of inpatient care in “the only designated centre” - the Central Mental Hospital, Dundrum.

The judge ordered his committal to the CMH for inpatient care and treatment.

## Evidence

During the trial, Dr Damian Mohan said that Mr Cuddihy's mental health had deteriorated over several years.

In his 20s and 30s he had a successful career that brought him to the UK and America. He had numerous qualifications and was close to all his siblings. In his thirties he began suffering depression and his condition deteriorated to the point that in December 2013 his family considered having him committed involuntarily.

As the months went on his condition worsened. He suffered paranoid delusions and lost contact with his friends. He stopped eating at the family home because he believed his mother was trying to poison him and took to sleeping in an annexe of the house with an axe for protection.

During interviews with two consultant psychiatrists after the killings Mr Cuddihy revealed the full extent of his delusions at that time.

Dr Mohan said that Mr Cuddihy heard voices telling him what to do and believed that he was going to be taken away by aliens to the Matrix, referring to the Keanu Reeves film in which reality is simulated by a computer. He

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said his thoughts were confused and hard to piece together. He sometimes believed his mother could read his thoughts and communicate with him telepathically.

He had notions that the IRA was trying to recruit him and this somehow tied in with the idea that aliens were reading his mind and that he was going to be taken to the Matrix.

His paranoia led him to believe that people were conspiring against him and that his mother was trying to poison him. Two nights before the killing he had stayed out in one of the fields near their home believing that aliens were going to take him away to another dimension. He waited all night and was "greatly disappointed when the spaceship did not arrive".

On the night of the killing he said his mother had told him to eat his dinner and he then heard her voice in his head. She told him: "I want you to kill me and your father." He believed that by killing them he was sending them to heaven and when he attacked them with the axe he thought he was following his mother's commands.

- *Read more: Always seek help, says brother of man who killed parents*
- *Read more: Slain parents 'didn't want to have son committed'*

Later that night, as he wandered through fields near the family home he became convinced that he was in the matrix, an alternative reality, and that he therefore had not really killed his parents.

Six days prior to the killings Julian's sisters Maureen and Delilah and brother James decided it was time to have him committed.

However, Dr Mohan said their mother was concerned about the stigma associated with mental health. She was also worried that Julian would resent his parents for committing him against his will. James Cuddihy Snr, on the instructions of his wife, cancelled the appointment with mental health services. Six days later Julian killed both his parents with an axe.

Det Gda Bernard Mullins of Buncrana Garda Station had earlier confirmed details from the State Pathologist Professor Marie Cassidy's report into the deaths of both Kathleen and James. Professor Cassidy described multiple wounds to the head consistent with blows from an axe that caused severe head trauma.

She also discovered stab wounds to James' neck, chest and face that she believed could have been caused by a pair of scissors that were found close to his body. She said he had suffered multiple chop wounds to the head in quick succession. Mrs Cuddihy had suffered at least seven blows to the head, some of which she believed were inflicted while she was lying down unconscious or possibly already dead.

Ms Justice Heneghan described the trial as a "difficult case" and said she would like to extend her "deepest sympathies" to the entire family. She said they had conducted themselves "very appropriately" even when listening to particularly harrowing evidence.

Siblings Maureen, Delilah and James left the court together soon after the verdicts were read.

Statement read by James Cuddihy Jnr on behalf of the Cuddihy family, after the not guilty by reason of insanity verdict, read on June 9th:

"This is a tragedy for all our family, in particular our beloved parents, Jimmy and Kathleen, but also for our brother Julian.

"A major factor in all this is while we did take steps to try to get our brother to professional help, decisive actions were not taken by our family which would have prevented this tragedy.

"We hope that nothing like this will ever happen to another family. We would urge families with similar concerns about the mental well-being of a family member to seek timely assistance and intervention."

Online Editors

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## PROMOTED LINKS

by

|



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GlassesUSA



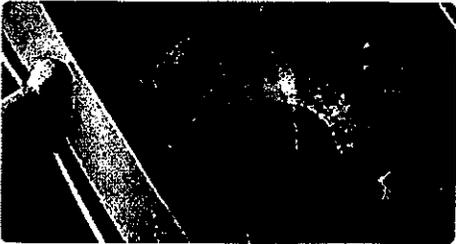
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Creative Timez



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EDITOR'S PICK

## Mom who entered insanity plea in girl's murder had extreme bipolar depression

13

Jean Cole Sep 29, 2017



An Athens woman who entered an insanity plea in her murder case Wednesday in Limestone County Circuit Court had been diagnosed with extreme bipolar depression prior to the death of her child.

Stephanie Diane Smith, 25, who is charged with capital murder in the suffocation death of her child — 4-year-old Zadie Wren Cooper — had been diagnosed and was receiving medical treatment. However, she was not on her medication for the disorder when the child was killed July 4, 2016.

During her arraignment on the capital murder charge Wednesday, Smith pleaded guilty by reason of insanity before Circuit Judge Chad Wise. She is facing a capital murder charge, rather than murder, because Alabama law requires a capital murder charge in the wrongful death of a child under age 14.

No trial date has been set.

Her defense attorney is Garry Clem of Athens.

### The death

On July 4, 2016, Athens police had received a 911 call from Smith reporting her daughter was not breathing. Athens police, firefighters and ambulance personnel found Smith performing CPR on Zadie, who was lying on her back on her bed.

An Athens emergency medical technician continued CPR until an ambulance arrived to take the child to Athens-Limestone Hospital. She was later transferred to Huntsville Hospital, where tests determined Zadie had no brain activity.

On July 7, Zadie's family removed her from life support and she died.

Under questioning by investigators, Smith recounted that she had heard something on the baby monitor and found Zadie between the bed and wall. According to Smith, she was not breathing.

Smith recounted the same sequence of events when investigators and the Department of Human Resources interviewed her again in October 2016.

A private autopsy did not determine a cause of death.

Believing the death was suspicious, police were continuing their investigation, Police Chief Floyd Johnson said.

### Confession

On April 13, Smith and a friend came to the Police Department on Hobbs Street, and Smith confessed to killing Zadie. She said she has a mental condition and that she was not initially aware of what she was doing to Zadie. She said she blacked out and when she removed the pillow from Zadie's face, the girl was not breathing.

14

Police & Fire (https://Patch.com/Minnesota/Woodbury/Police-Fire)

# Bipolar Man Hit Mom with Hammer, Threatened Murder-Suicide in Woodbury: Charges

Police say the man threatened murder-suicide before he surrendered after a three-hour-long negotiation with a SWAT team in Woodbury.

By William Bornhoft, Patch Staff (https://patch.com/users/william-bornhoft) | Jan 25, 2017 2:38 pm ET

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Added by Nikki Griffin

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A 22-year-old man who suffers from a bipolar disorder was charged with several felonies after police claim he beat his mother in the head with a hammer and held his parents at gunpoint Saturday evening in Woodbury. Police say David Edward Williams Jr. threatened murder-suicide during the incident before he surrendered after a three-hour-long negotiation with a SWAT team.

Williams was charged with assault with a firearm, kidnapping to commit bodily harm and terroristic threats with reckless disregard

(http://www.woodburybulletin.com/news/crime-and-  
2017/01/25/204084-update-charges-against-22-year-old-recount-  
relentless-beating-hammer), the Woodbury Bulletin reported:

Williams made a list of all the people who were involved in putting him on medications and began to exact revenge against his mother, according to the court complaint.

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Last summer, he moved out of his parents' house at 1032 Briar Glen Lane, stopped taking his medication, and started using

When he went to his parents' house Saturday evening, he took

he was going to hurt her, the complaint read.

Williams blocked her exit with a recliner and began "relentlessly" beating her in the head with the hammer, his mother told police. She didn't know how many times she was hit.

Read much more at the Woodbury Bulletin (<http://www.woodburybulletin.com/news/crime-and-courts/4204084-update-charges-against-22-year-old-recount-relentless-beating-hammer>)

Image via Shutterstock

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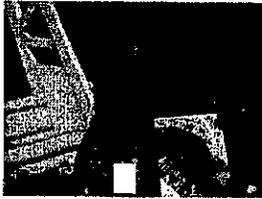
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15

# Fatal run-ins between cops, mentally ill raise worries

George Hunter, The Detroit News

Published 12:01 a.m. ET Feb. 5, 2018



(Photo: David Guralnick / The Detroit News)

When police officers cross paths with the mentally ill, the results can be tragic.

Police, mental health experts and relatives of people with mental illnesses describe a common cycle: A patient who needs long-term treatment is turned away because there's no bed space, sending him back onto the streets, where he encounters police.

Those confrontations can be dangerous — or deadly — for both officers and citizens.

At least five police officers have been shot since 2016 in Detroit, three fatally, by mentally ill suspects.

Nationwide, people with untreated mental illnesses are 16 times more likely to be killed by police than other citizens, according to a [2015 Treatment Advocacy Center study \(http://www.treatmentadvocacycenter.org/storage/documents/overlooked-in-the-undercounted.pdf\)](http://www.treatmentadvocacycenter.org/storage/documents/overlooked-in-the-undercounted.pdf).

"We have an epidemic in Michigan and across the nation of people with mental illness making contact with law enforcement," said Mark Reinstein, president of the Mental Health Association in Michigan, an Okemos-based policy analysis and advocacy group.

"It's disheartening that so many of our people get into trouble, often because their mental illness isn't under treatment," Reinstein said. "It's unfortunate for the person suffering from mental illness, and it's extremely hard on law enforcement."

On Jan. 24, a man who reportedly suffers from mental illness [fatally shot \(http://www.detroitnews.com/story/news/local/detroit-city/2018/01/29/vigil-slain-detroit-police-officer/109926090/\)](http://www.detroitnews.com/story/news/local/detroit-city/2018/01/29/vigil-slain-detroit-police-officer/109926090/) Detroit police officer Glenn Doss.

Police say Decharlos Brooks, 43, called 911 to report a domestic disturbance. When Doss and other officers arrived, Brooks allegedly opened fire, shooting Doss in the head. The 25-year-old officer died after four days in Detroit Receiving Hospital.

Brooks, who according to Detroit police chief James Craig is mentally ill, [is charged with murder \(http://www.detroitnews.com/story/news/local/detroit-city/2018/01/29/murder-charges-filed-accused-cop-killer/1074955001/\)](http://www.detroitnews.com/story/news/local/detroit-city/2018/01/29/murder-charges-filed-accused-cop-killer/1074955001/) and is in the Wayne County Jail awaiting trial.

"I've seen this play out too many times," said Craig, whose best friend, Los Angeles SWAT officer Randy Simmons, was killed in 2008 by a mentally ill man.

"There will be some type of disturbance, where we have to go in and stabilize the situation," Craig said. "Because the officers are dealing with a mentally ill person, the situation often gets escalated, and someone gets hurt or killed."

"Even if there isn't a violent encounter, if we make the determination that a person is a danger to self or others, we put them in a 72-hour hold. They're usually given initial treatment and then released, only to go back onto the streets and engage in more criminal activity."

That criminal activity often lands them in jail.

"We're probably the largest mental health institution in Michigan, which is unfortunate," said Wayne County Sheriff Benny Napoleon, who said 27 percent of the county's jail inmates are taking psychotropic medication — with countless others suffering from undiagnosed and untreated mental problems.

Oakland County Sheriff Michael Bouchard said the number of mentally ill inmates in his jail has skyrocketed over the past 20 years.

"When I started 20 years ago, 8 percent of our population was on psychotropic medication; now it's 30-plus percent," Bouchard said. "The continuum of mental health services has whittled over time, and as a result, jails have become the de facto dumping ground. We're not suited for treatment, so 'dumping ground' is the only thing to call it."

Former Detroit police officer Antoinette James said her 23-year-old daughter Erica Hayes has been in and out of jails and hospitals after being diagnosed with narcotics-induced bipolar schizophrenia.

"I've tried to get her into long-term inpatient treatment, but it's a revolving door," James said.

With no long-term beds available, James cared for her daughter, who went missing Jan. 17. Hayes told her mother she was stepping outside Greater Grace Temple on Seven Mile to smoke a cigarette. She hasn't been heard from since.

"She was on several medications, so I'm worried," James said. "Today I heard there were three bodies found. It makes you think 'Lord, I hope it's not my daughter.' But they identified the bodies; it wasn't her."

Reinstein said while the problem is nationwide, people in Michigan have a particularly difficult time getting mental health treatment.

"According to the Treatment Advocacy Center, we're one of the five worst states in the country in our per-capita percentage of state-operated psychiatric hospital beds," Reinstein said. "And those beds are filled to a large degree with forensic patients," those awaiting diagnoses to determine if they're mentally fit to stand trial.

"Even when those hospitals take our people, the stays are too short to stabilize them," Reinstein said. "We surveyed the community mental health boards in Michigan three years ago, and the average length of stay for their clients in community and private psychiatric hospitals was between six and seven days, and many are out in three or four days. That's just not enough."

Marjorie Lesko said she got down on her knees and begged a staffer at University of Michigan Medical Center to admit her son, Lane, who had Asperger syndrome, a form of autism spectrum disorder, and bipolar mania.

Lane Lesko, 19, wasn't admitted to the hospital. On June 21, 2016, he was killed by a New Hampshire police officer after he brandished a BB gun that resembled a semi-automatic pistol.

"Lane was as much a victim of the cop's bullet that killed him as he was of the mental health system that killed him," Marjorie Lesko said.

Lane Lesko had stolen a car and led police on a chase before reportedly pulling out the BB gun. The New Hampshire Attorney General's Office ruled the shooting was justified.

Lesko believes her son would be alive if he'd gotten the treatment he needed.

"It was almost impossible to get treatment," she said. "My son wanted help. He was Dr. Jekyll and Mr. Hyde."

Wayne State police officer Chris Powell said he regularly encounters people suffering from mental illnesses, both on campus and in the nearby Cass Corridor.

"We deal with people who are off their meds, and when that's the case, someone who may not be violent normally can become violent very easily," he said. "We have no way of knowing they're mentally ill when we're faced with that situation."

The issue strikes a nerve with Powell, whose best friend, former Wayne State officer Collin Rose, was killed Nov. 22, 2016, by Raymond Durham, a mentally ill homeless man.

Four months later, prosecutors say Durham shot Detroit officers James Kisselburg and Ben Atkinson, who are recovering from their injuries.

Durham was arrested and charged with first-degree murder ([/story/news/local/detroit-city/2017/08/03/police-update-slain-wayne-state-officer-case/104254572/](https://www.detroitnews.com/story/news/local/detroit-city/2017/08/03/police-update-slain-wayne-state-officer-case/104254572/)), but the Michigan Forensic Center ruled him incompetent to stand trial. Wayne County prosecutors asked for an independent evaluation. Durham is scheduled for another competency review on Friday.

"That's the downfall of our profession: We never know what we're dealing with," Powell said. "I can envision how Collin's encounter went down; (Durham) was out on the streets, living in an abandoned car. We've all had that situation so many times. But (Durham) just didn't want to go to jail that night, and it turned into a violent encounter."

"It's frustrating dealing with mentally ill people, when we aren't equipped for that. It's not fair to them, and it's not safe for us."

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16

# Man in Stage Run Drive murder-suicide case had bipolar disorder

May 16th, 2015 | by Shelly Bradbury | In Local Regional News |



Chattanooga police investigate a crime at 3040 Stage Run Drive.  
Photo by Will Healey /Times Free Press.

## 3040 Stage Run Drive

The man who apparently killed his girlfriend and then shot himself in their Hixson home on May 8 had a history of mental illness, according to medical and police records.

Marcus Slattery, 44, suffered from bipolar disorder, records show. Police say Slattery killed his girlfriend, Deborah Steele, 58, and then shot himself in the head at their home at 3040 Stage Run Road.

Chattanooga police investigators initially believed that Slattery shot Steele, but the Hamilton County Medical Examiner's report concluded that the woman was stabbed in the neck and her throat was slit.

Police called the incident an apparent murder-suicide. Those findings are supported by the medical examiner's report, which classifies Steele's death as a homicide and Slattery's as a suicide.

Steele and Slattery were found dead inside their home after a third party called police and asked for a well-being check on the couple. Police have not identified the caller.

Investigators found Steele lying in a bed in one of the home's bedrooms, according to the report, while Slattery was found in the living room. Officers also discovered the couple's English bulldog dead in a living room chair, shot in the head.

Police found several firearms and knives at the scene. Those weapons are still being processed,

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according to police.

Both Slattery and Steele were registered nurses, according to state records. Steele was licensed in 1983 and Slattery was licensed in 1992.

Slattery formerly worked as a nurse in the crisis stabilization unit at Volunteer Behavioral Health on Chattanooga's North Shore. The unit is designed to provide care to patients who are experiencing a severe mental health crisis, according to Volunteer's website.

Slattery held that job for six years and left in 2009, according to Volunteer.

Contact staff writer Shelly Bradbury at 423-757-6525 or [sbradbury@timesfreepress.com](mailto:sbradbury@timesfreepress.com) with tips or story ideas.

*Previous report:*

### **Nurses killed in murder-suicide in Hixson, TN - Marcus Slattery**

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## Man diagnosed as bipolar convicted of murder in father's shooting

BY JASON KOTOWSKI Californian staff writer jkotowski@bakersfield.com Jul 8, 2014



Geoff Edwin Murphy has been convicted of murder in the shooting death of his father. He is shown in a Feb. 14 photo. Henry A. Barrios / The Californian

A year after fatally shooting his father during what his attorneys called a "manic episode," Geoff Edwin Murphy is apparently still living in a world of delusion.

The 34-year-old, who's been diagnosed as bipolar, told the court before sentencing Tuesday he'd been recruited by the U.S. Secret Service and had invented a new Braille letter before the shooting. His Army test scores were off the charts, he said, and he'd applied for a position with the Department of Homeland Security.

He said his parents and others didn't believe these claims, which frustrated him.

"It's not a delusional fantasy of mine," Murphy said.

Judge Kenneth C. Twisselman II sentenced Murphy to a total of 53 years, eight months to life in prison. The sentence is broken down so that Murphy must first complete two indeterminate sentences of 25 years to life before finishing a determinate sentence of three years, eight months.

He'll almost certainly die behind bars. A jury convicted him July 8 of first-degree murder, threatening with the intent to terrorize and two counts of causing injury to an elder/dependent adult.

His mother, Barbara Murphy, said she and her husband had tried to get him help, but it only resulted in her husband's death.

"This has been a year of anger, confusion, sadness, adjustment and relief this has been resolved," she said during the hearing.

Geoff Murphy's attorneys -- Deputy Public Defenders Christina Matias and Nichole Shuck -- asked that Murphy be granted a new trial. Matias said Murphy shot his father in self-defense, and his "extreme" behavior before the shooting was due to his mental illness.

"I'm not shocked very often by verdicts, but I was shocked by this verdict," Matias told Twisselman.

She asked Twisselman to either grant Murphy a new trial or reduce the verdict to manslaughter.

Prosecutor David Zulfa argued the jury was properly instructed in the mental health evidence and reached a verdict based on facts and the law. He said it's the court's obligation to consider if the evidence was substantial enough to support the verdict, not change it.

Twisselman acknowledged the case was atypical, saying during court that upon initial review he "probably" considered it an unusual case for a first-degree murder charge. But, he said, there is sufficient credible evidence to support the jury's verdict.

Zulfa said afterward there were a number of factors regarding why Murphy was charged with first-degree murder. The defense argued Murphy acted in self-defense, but Zulfa said a person is not allowed to create the circumstances that allow for self-defense.

Murphy had repeatedly threatened his parents and hit his mother with a long lighter before his father shot him.

Also, Zulfa said Murphy shot his father at a point where he no longer posed a threat. Murphy had taken the gun away, beaten his father until he no longer resisted and then shot him in the head.

Police reports say Murphy, who lived with his parents, entered the living room where his mother and father were sitting on Aug. 10 and demanded his mother take him to a store. She refused, and he threatened to "stomp" her to death.

His threats and following actions were captured on a video recorder his parents had installed in the room due to Murphy's unpredictable behavior.

He then smacked her on the legs with a long lighter. His father, James Murphy, stood up and pulled a gun from his pocket.

He fired once, striking Geoff Murphy in the chest, the reports say.

Geoff Murphy knocked his 74-year-old father to the ground and beat him. He then shot him and said, "Now you're dead, now you're dead, told ya."

Zulfa said the Murphy family is "still devastated by what happened."

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LOCAL

# Police being forced to front lines of growing mental health crisis

At least 45 percent of people who have died in forceful encounters with law enforcement in Minnesota since 2000 had a history of mental illness or were in the throes of a mental health crisis, according to a Star Tribune analysis.

By Jennifer Bjorhus (<http://www.startribune.com/jennifer-bjorhus/34031274/>) Star Tribune | JUNE 6, 2016 — 4:24PM

## GEARING UP

Sgt. Joe Adams puts on a bulletproof vest, never sure of what a shift will bring, and what decisions he will be forced to make.

Roseville police officer Joe Adams only learned their names later, in the hours after he shot and killed them.

Wayne Malone. Billy Holt.

Neither man had committed a crime. But both were in the throes of a mental health crisis when police were called for help. The encounters, three years apart, turned fatal when Malone and Holt burst out of their homes, weapons in hand, fighting demons only they could see.

A county attorney and a grand jury determined that the shootings were justified. Adams remains unshaken in his belief that on both nights he did the only thing he could.

"It's a terrible thing," Adams said. "It takes a toll on you mentally, it takes a toll on your family."

At least 45 percent of the people who have died in forceful encounters with law enforcement in Minnesota since 2000 had a history of mental illness or were in the throes of a mental health crisis, according to a Star Tribune analysis of death certificate data, court and law enforcement records and interviews with family members. That's double the estimated rate of mental illness among U.S. adults.

The overrepresentation of the mentally ill in fatal encounters with police is a national phenomenon. The Treatment Advocacy Center, a Virginia nonprofit that advocates nationally for better care of the mentally ill, estimates that people with severe untreated mental illness are 16 times more likely to be killed in a police encounter.

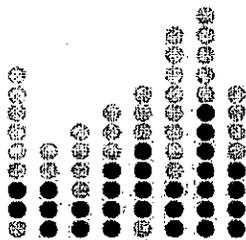
And the deaths are rising. In a 2015 spike, 9 of the 13 people who died statewide had mental health problems. The toll is grim proof that law enforcement agencies across Minnesota are working the jagged edge of a splintered mental health care system, where the most available tool for families facing a psychological emergency remains 911 and a squad car.



Every thing facts that parties to things, death, a crime -  
years on the force. He said being involved twice  
RICHARD TSONG-TAATARII, STAR TRIBUNE

Sgt. Joe Adams of the Roseville Police put on his uniform to start his 6PM to 6AM shift. He found himself in an intractable position of

Database



### 66 DEATHS

Each had a name, a story  
and had a history of  
mental illness when  
he or she was killed.

([http://dataviz-dev.startribune.com/20151117-police\\_deaths/index.html?mental=yes](http://dataviz-dev.startribune.com/20151117-police_deaths/index.html?mental=yes))

Minnesota's police officers and sheriff's deputies say they're spending more time than ever responding to mental health calls. A Star Tribune survey of nine of the state's largest law enforcement agencies found that such calls have increased an average of 34 percent in the past six years.

Despite the critical role officers play in the mental health safety net, the level of training to handle people with mental illness varies greatly from one police agency to the next. State law requires peace officers in Minnesota to get training in firearms, pursuit driving and use of force. It says nothing about training to intervene in a mental health crisis.

The Minnesota Board of Peace Officer Standards and Training, which licenses officers for the state's 439 agencies, has no model policy for mental health crisis training, or clear recommendations for departments.

Adding to the confusion, proponents of specialized mental health training hotly disagree on whether everyone on a police force or only a dedicated core should take the five-day, 40-hour course known as the crisis intervention team (CIT) model. On average, about 15 percent of officers in the state's 12 largest law enforcement agencies have undergone the full training, which teaches taking a less controlling attitude to de-escalate confrontations with people with mental illness, a Star Tribune survey showed.

It's far short of what is needed, said the state's leading mental health advocate. Every officer should have the 40 hours of training, said Sue Abderholden, executive director of the National Alliance on Mental Illness Minnesota chapter. Abderholden backed unsuccessful legislation that would have required four hours of similar training.

"They need those tools," Abderholden said. "Even if it's not the full 40, there should be something."

In Roseville, 911 calls for health-related problems have jumped 20 percent since 2011. Most of the increase involves people with psychological troubles, Roseville Police Chief Rick Mathwig said. The calls can be very time-consuming, and in the worst cases, devastating for both the families and his officers.

"Law enforcement is sometimes forced to deal with problems in our society that the rest of society refuses or fails to help, or respond, or deal with," Mathwig said. "We get called for everything."

#### A 911 hangup

Wayne Malone was not a complete stranger to Roseville police.

One time, in 2010, police knocked on his door by mistake and he was hit with a Taser after charging out of the apartment and attacking them. They sent him to the hospital for a psychiatric evaluation.

For Gail Malone, it was just another troubling example of the darkness that had overtaken the charismatic, fiercely intelligent former Navy military policeman she'd married. Their daughter, Grace, similarly recalls the doting father who took her to the park and lugged her musical instruments to school. He brought flowers and bags of extra classroom snacks for the teachers.

But he was becoming someone else. At first he stopped wanting to do things, like celebrate Christmas with Gail's family. He stopped working. He became controlling, paranoid and always on edge. He barely slept and rarely left the apartment, so obsessed was he with thoughts of someone breaking in.

Nothing and no one could be trusted. He escorted Gail and Grace to and from the building. Visitors were not allowed. He covered the apartment windows with sheets of Styrofoam.

He badgered Gail for a gun to protect the family. She relented and bought him a pellet handgun at Fleet Farm. He'd play with it, occasionally popping from around corners with it as if clearing a room of a potential threat.

A proud man, Malone refused to seek professional help. Twice, in 2011, Gail called 911. Each time police had an ambulance take Malone to Regions Hospital in St. Paul for psychological evaluations, as they had the time when Malone burst out of the door at officers attempting to serve an arrest warrant.

The last trip was in August 2011. Gail, who works with inmates at the Ramsey County workhouse in Maplewood, had her work handcuffs on him when officers showed up.

Regions admitted Malone on a 72-hour hold but released him after just two days.

According to the psychiatric discharge summary, Malone was not considered at imminent risk of harming himself or others. The final diagnosis: depression and an anxiety disorder.

The summary lists follow-up appointments, and prescriptions for high blood pressure medication Norvasc, melatonin to help him sleep, a multivitamin and prazosin, used to treat a range of conditions including blood pressure, anxiety and PTSD.

It also says the family agreed with the discharge plan.

Gail remembers it very differently. There were no appointments made, she said, and only the prescription for his usual blood pressure medicine. It was a Sunday, and she insisted that Regions hold him just one more day so she could make more arrangements. They wouldn't, she said.

Regions said privacy laws prevent it from discussing Malone's care.

Gail drove her husband home from the hospital that day.

Three months later, on a Thursday in November 2011, Gail lay down in bed with a sore neck. Tired of an argument with her father, Grace, then 19, retreated to her bedroom. He was unusually worked up.

"Something was off," Grace recalled.

At 8:22 p.m., Malone called 911, made gasping sounds for a few seconds, and hung up.

#### **A young officer's decision**

Joe Adams knew he wanted to be a police officer when he was just 15. He learned policing basics in the Police Explorer program in Blaine, and joined the Roseville force in 2007 right after graduating from St. Cloud State University.

Roseville is a relatively quiet first-ring suburb, dominated by its bustling Rosedale shopping mall. A force of 48 sworn police officers serves Roseville's 35,000 residents.

Like many officers across the state, Adams hasn't had much specialized mental health crisis training. He took Roseville's standard half-day class in 2007, just after being hired, called "Understanding the Black Hole of Suicide." Ten Roseville officers have taken the weeklong crisis intervention team (CIT) training. Three more will this year, but Adams is not one of them.

Adams primarily worked undercover and on street crimes, before being promoted to sergeant. Given limited resources, it makes the most financial sense to send first-line patrol officers to the training first, said Mathwig, the police chief. Crisis intervention team classes cost an average of \$625 per officer for tuition, plus the cost of filling their shifts, he said.

The night Malone called 911, Adams had just wrapped up a session with the Explorer program he helped start in Roseville.

The muffled call sounded like a woman being choked and unable to talk. Adams figured it was a domestic situation. He switched on his lights and sirens and sped to Malone's apartment building. He and another officer climbed the steps to Apartment 6.

Then Adams paused. He remembered this door. A year earlier, he had been one of the three officers who had knocked on it -- it turned out to be the wrong address -- to serve an arrest warrant. Without a word the man who lived there barreled out, swinging. They stunned him twice with a Taser, and then sent him to the hospital.

Adams warned his partner about the man, and drew his gun. His partner readied his Taser. Adams knocked.

Almost before his hand left the door, Adams said, Malone burst out. This time he held what looked like a black handgun. His eyes were empty.

Adams was backing up, yelling at him: "Drop the gun!"

Instead Malone lifted his arm as if to shoot, Adams said.

Adams fired. He cannot remember hearing the shots from his Glock.

Malone's daughter Grace could hear them, over the music she was playing in her bedroom.

Malone lay in the doorway to the apartment. Two gunshot wounds, to the stomach and chest.

Numb, Gail sat down with her daughter on the living room floor, "and then we watched him die in front of us."

Gail doesn't blame Adams. If she had been in Adams' shoes that night, Gail said somberly, "I would have shot him too."

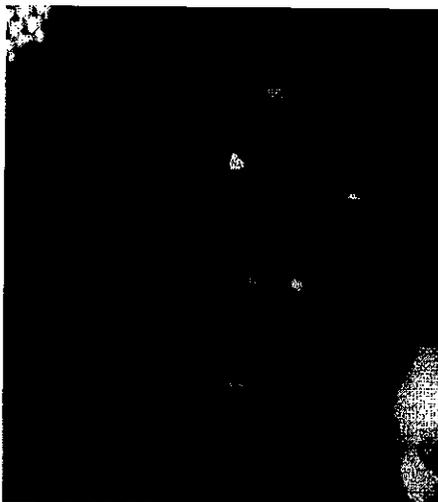
For Adams, the fatal shooting didn't register until he was back at headquarters, and called his mother.

"You have a lot of different thoughts that start to go through your head. Like 'What if?' 'Did I put myself in harm's way?' 'Could I have done this better?' You ask yourself a million questions, your mind just starts racing."



([http://stmedia.stimg.co/mental\\_adams\\_stairs.jj](http://stmedia.stimg.co/mental_adams_stairs.jj))  
RICHARD TSONG-TAATARI

**Unsettling return:** Sgt. Joe Adams stopped at a Roseville apartment where reminders were still visible of the night he shot Wayne Malone.



#### 'SOMETHING WAS OFF'

A former Navy military policeman and doting father, Wayne Malone was overtaken by paranoia and PTSD, increasingly isolating himself and his family. His wife, Gail, was driven to call 911 twice and he was briefly hospitalized. Their daughter, Grace, said "something was off" with him the night Sgt. Joe Adams and his partner went to their apartment building. Malone would not drop what looked like a handgun. They fired.

Adams would face those same questions again on an autumn night in 2014, when the East Metro SWAT team he's part of was called to a "barricaded suspect/possible hostage situation" at a trailer park in St. Anthony.

#### **A daredevil's delusions**

Billy Holt began crisscrossing the country to work on pipeline jobs after high school in Texas. He operated heavy equipment such as booms, the large bulldozer-like machines that move large sections of pipe with belts, cables and hooks.

He was the "best boom man in the country," said longtime pipeline buddy Thad Hutchens in Oklahoma.

They called Holt "rooster." Holt was like a feisty little bantam who wants to fight the big roosters, Hutchens said. He was a daredevil who liked sky diving, gambling and popping wheelies on his motorcycle.

"He lived life large and lived life loud," said his wife, Lori, a nurse in Ellaville, Ga. "He was the love of my life."

His struggles were also big.

Holt, 51, had been treated by a doctor in Texas for a bipolar disorder, Lori said, but stopped taking the medicine because it made him feel strange. He took clonazepam for anxiety. He had problems with drinking, heroin, cocaine and meth. The combination could make him hallucinate.

Holt, hired to work on a gas pipeline project, arrived in Minnesota over Labor Day weekend in 2014, driving the trailer that served as his home on the road. He parked it in Lowry Grove, a wooded trailer park in St. Anthony with wild turkeys scratching around.

A month later, Holt was found stumbling around late at night in a yard in rural Chisago County, far from his home or work.

Holt told officers he'd been chasing some men who'd pulled a knife on him. He didn't know where he was, and was having a hard time standing still. He blew a zero on a breathalyzer.

They took him to Fairview Lakes Medical Center in Wyoming, Minn., for an evaluation.

The next night, Holt told Lori that the cops didn't believe him about the fight. He sounded very down, Lori recalled, and said he was going to take a shower and go to bed.

Just before 10 p.m. neighbors called 911 to report shots fired in the Lowry Grove Trailer Park.

Officers streamed to the scene.

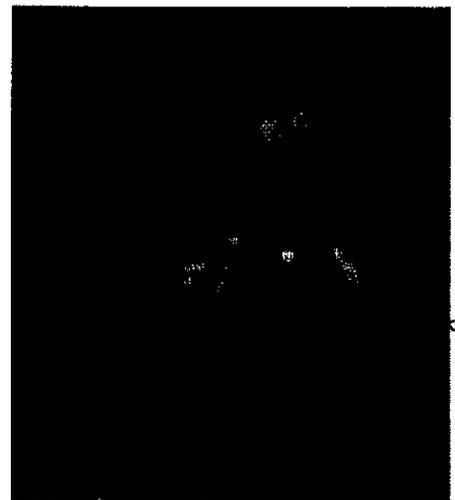
Adams and the local SWAT team arrived in a BearCat, an eight-ton armored vehicle designed for military combat. They parked about 40 feet from the trailer and flipped on spotlights.

The SWAT team was quickly briefed. The man in the trailer had told an officer outside the open door that he was being held at gunpoint by two strangers who came to rob him. He said he had fired some shots, but wouldn't come out.

About 15 minutes later, without warning, a man with a rifle sprinted out the trailer door and into the blinding spotlights. Someone hollered: "Rifle!" and "Drop the gun!"

No one knew whether Holt was robber or hostage. Adams and others calculated he might break into another trailer, and said his rifle was pointed toward officers.

Adams and two other SWAT team members fired.



#### **'I THINK POLICE OVERREACTED'**

Pipeline foreman Billy Holt lived life loud and large. "He was the love of my life," his wife, Lori, said. Holt had been treated for a possible bipolar disorder and had problems with anxiety and drugs, which could make him hallucinate. When police responded to a call of shots fired in late 2014, Holt said robbers were holding him hostage in his trailer. A SWAT team shot him when he ran out with a rifle that he appeared to be pointing at officers.

There were no robbers found in the trailer. All evidence points to paranoia and delusions, said Mathwig, Roseville's police chief.

Lori Holt turns the questions over and over. What happened to Billy that night? Could she have saved him if she had called him back later?

Of one thing she is certain, though.

"I think the police overreacted," she said. "I think they could have handled the situation differently."

#### **'Is this OK?'**

Mathwig considers Adams, 32 now, one of his finest cops: focused and caring. As he sees it, Adams performed his job by the book in both shootings. When there's an imminent threat to himself or others, an officer's first priority is to resolve it. Says Mathwig: "You have to get in front of that rocket first."

Mental health advocates are loath to second-guess officers facing potentially treacherous situations. Law-enforcement officers deal constantly with people with mental health problems, and the vast majority of the encounters don't end with someone dying.

The deaths go beyond police training, said Aberholden with the National Alliance on Mental Illness. Minnesota simply hasn't built a mental health system. To her, the rising deaths illustrate that.

"I would say it's a failure of our community to really make sure that people have access to the mental health services they need, when they need them," she said.

For his part, the normally stoic Adams said the shootings have "humbled" him. They've forced him to confront hard questions about what he does.

"You have to question 'Is this what I want to do? Is this OK?'" he said.

Adams has been taking night courses. Last month he graduated from the University of St. Thomas with a master's degree in police leadership. He has considered teaching. But he loves policing, he said, and will keep doing it as long as he's physically able.

When he first got back on the street after shooting Malone, Adams said his blood would rush when he'd drive by the brick apartment building on Larpenteur. One night, though, he pulled over and climbed those stairs again.

The bullet holes in the door frame had been spackled over, but outlines were still visible. Someone had placed a carpet square over a spot in the second floor hall.

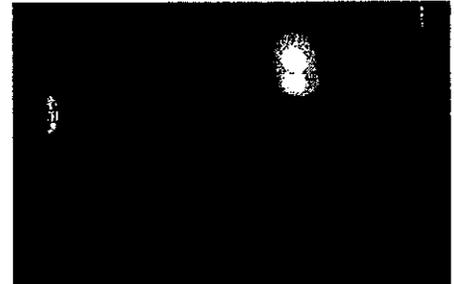
Adams lifted up the scrap. A liver-colored stain still bloomed from the door to Apartment 6.

After 9 years on the force, Adams has handled everything from burglaries to sex trafficking to drug deals in motel parking lots.

More unsettling are the cries for help when there is no crime - someone off their medication, hallucinating, breaking things. There was the girl they rescued when she tried to jump off an overpass. The family hiding in a bedroom from a son holding a knife. The sister who called 911 saying her distraught brother had a gun and needed help.

By the time Adams got there her brother had shot himself in the head.

"You have zero idea of what to expect when you walk in that door."

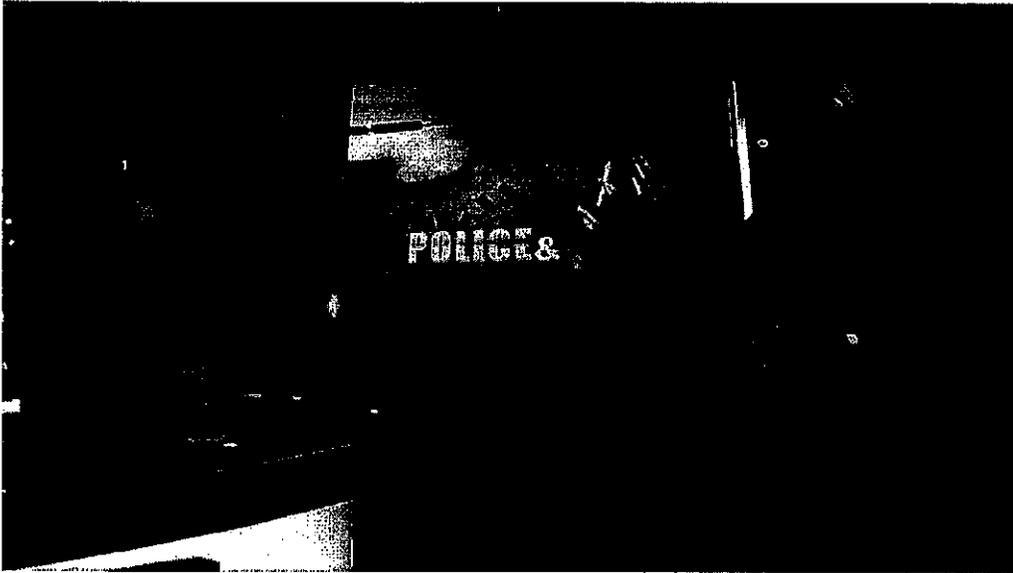


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RICHARD TSONG-TAATARI

**The tough call:** Sgt. Joe Adams, who searched a suspect, said sometimes the toughest calls are cries for help when there is no crime.

19

## LPD teaches advanced training for increasing mental health calls



By Carly Jensen | Posted: Mon 10:55 PM, Jan 29, 2018

**LINCOLN, Neb.** — Responding to mental health calls is something that takes up a lot of Lincoln Police officers' time. In fact, in 2017 officers logged more than 143,000 hours on these calls.

The number of mental health calls has more than tripled over the last 18 years.

In 2017, LPD responded to more 3,500 mental health calls compared to around 1,100 in 2000.

That's why officers are getting more advanced training on how to help people with mental illnesses.

It's called BETA training, and for Lincoln Police officers like Todd Beam, he said it's a necessity for their job.

"It confirmed for me just what we're seeing on the street," said Beam.

This year, LPD had 3,543 mental health calls. That's the most since 2000 when they started specifically tracking mental health calls.

"That we're having more and more individuals that are having or are in mental crisis," Beam.

Because of the increase, LPD created a program targeted at training veteran officers about mental illness.

"You know we don't want to arrest people just because they are mentally ill. We want to get them to the right spot. Sometimes that's a hospital, sometimes it's some type of respite care or sometimes it's just reuniting someone with their family," said Joseph Wright, a former police officer who helped develop the program.

It's called Behavioral Health Threat Assessment Training, or BETA. The program is 40 hours and aimed at showing officers resources in their community, and teaching them how to better handle a mental health call.

"To recognize somebody that's actually having a mental health crisis and knowing that that's maybe a situation that we need to deescalate in a different manner, that we can step back. It's not necessarily a criminal investigation, it's somebody that needs our help," said Beam.

Monday's afternoon lesson was from pharmacist Ally Deringanderson. She broke down different illnesses and the drugs that are used to treat them.

"I think that to help the officers understand what the drugs really can do and what the drugs cannot do is helpful to them in encountering and treating these people appropriately," said Deringanderson.

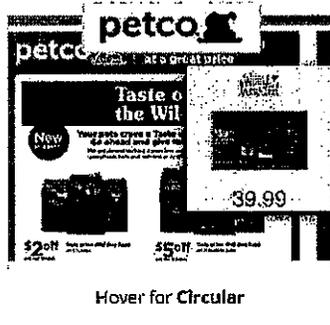
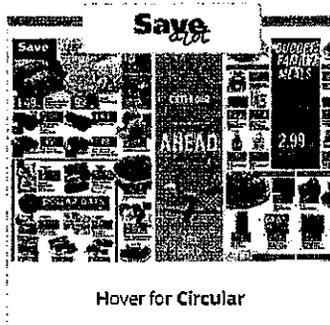
The officers also hear firsthand accounts from people who live with mental illness everyday.



"Who are really our best teachers, they provide the most tangible information for us to use to know what it's like to be in a mental health crisis and what we can do to help them," said Wright.

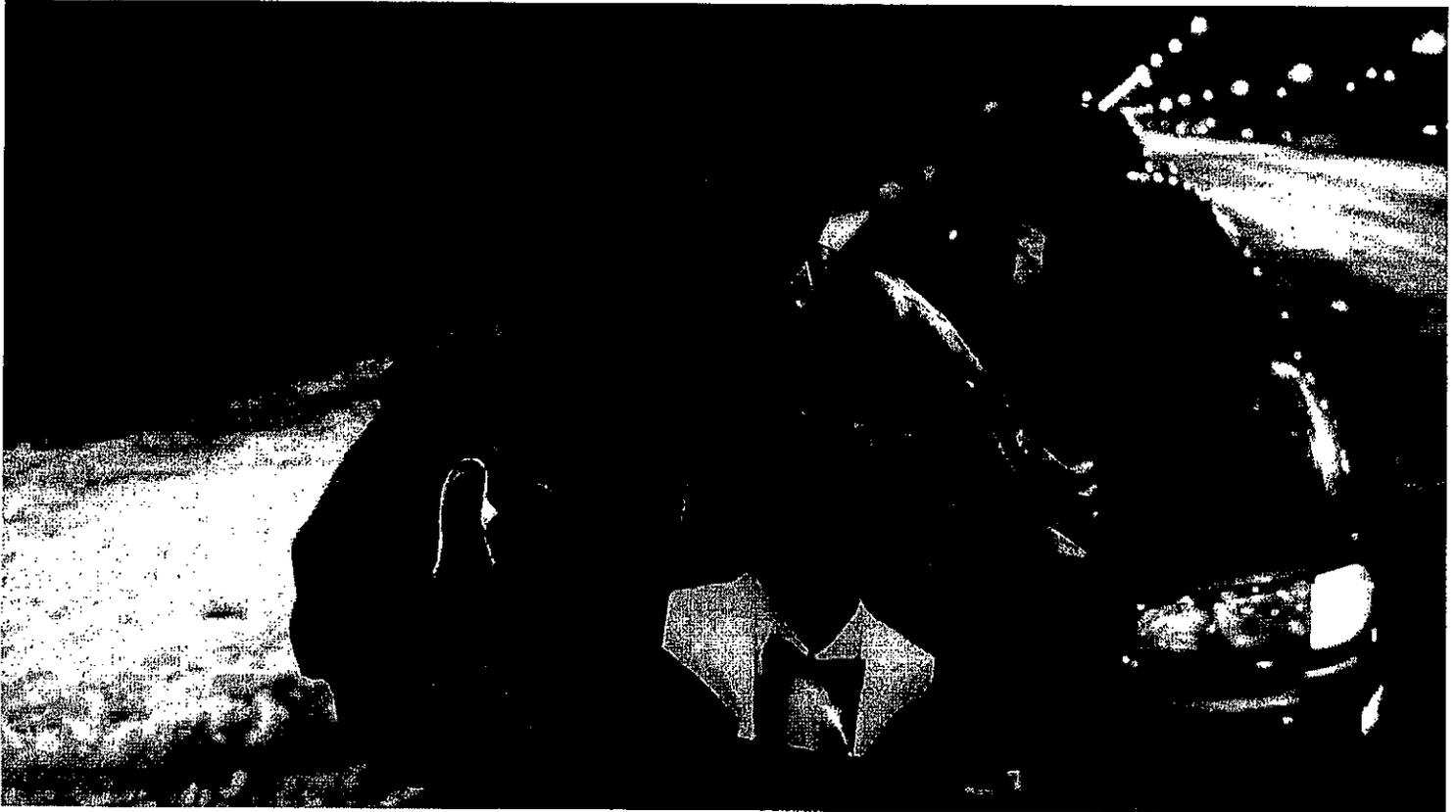
The BETA program is offered to all law enforcement in Region 5, which includes 16 counties in southeastern Nebraska. But, program teachers know for rural communities, it can be hard to send an officer to Lincoln for an entire week. So this year, they're doing the first ever mini-BETA's that are eight hour intensive classes.

**This Week's Circulares**



20

# Why police calls involving the mentally ill often end in tragedy



Janet Cooksey holds a photo of her son Quintonio LeGrier, who was shot and killed by a Chicago police officer. (Terrence Antonio James / Chicago Tribune)

By **Peter Holley, Wesley Lowery**  
Washington Post

DECEMBER 31, 2015, 11:10 AM

**T**he story repeats itself with grim consistency all over the country.

A distraught family member, unable to calm a loved one in the throes of a psychotic or suicidal episode, calls police, desperate for help.

Officers arrive, tensions quickly flare, guns are drawn, people panic - and a troubled life is extinguished, sometimes within seconds.

Later, family members - people such as Shirley Marshall - are left to sort through the aftermath, stricken by the feeling that their plea for help precipitated their relative's death. Marshall's son, Jason Harrison, a black man with schizophrenia and bipolar disorder, was killed last year by Dallas police after he refused to put down a screwdriver.

Authorities said he lunged at officers eight seconds after they arrived at his mother's home.

"I didn't call for them to take him to the morgue," Marshall told ABC News. "I called for medical help.

"They could have Tasered him or something," she added. "They didn't have to come out straight with the deadly force."

Marshall's comments have been echoed by countless other families, most recently by the parents of Quintonio LeGrier, an emotionally disturbed college student who was fatally shot by police in Chicago while he was home for holiday break.

The encounter also claimed the life of LeGrier's downstairs neighbor, 55-year-old Bettie Jones, who was opening the door for police when she was shot in a city already roiling from police killings of black residents.

A law enforcement source has said LeGrier, 19, was shot as he approached an officer, swinging a metal bat. Jones was shot by accident as she stood behind him near the front door of a two-flat in the West Garfield Park neighborhood, the source said.

An attorney for the LeGrier family have filed a wrongful-death suit against the city, alleging police actions were "excessive and unreasonable" and that officers failed to provide his son with medical care.

Chicago's embattled mayor, Rahm Emanuel, has called for changes in how the city's police officers are trained to respond to calls involving mental health crises.

Emanuel directed the Chicago Police Department's interim superintendent to meet "as soon as possible" with the Independent Police Review Authority's acting chief administrator "to review the Crisis Intervention Team training, around how officers respond to mental health crisis calls. I have asked that they determine the deficiencies in the current training, and determine what steps can be taken immediately to address them."

The shooting may have shocked violence-plagued Chicago, but it followed a painfully familiar pattern.

A year-long Washington Post analysis found that police officers have fatally shot civilians nearly 1,000 times

this year - and that about a quarter of those killed were mentally ill or experiencing an emotional crisis.

Officers fatally shot at least 247 people with mental health problems in 2015: 77 who were explicitly suicidal and 170 for whom police or family members confirmed a history of mental illness, according to The Post's analysis. The youngest of the 247 victims, the Post investigation concluded, was 17-year-old Kristiana Coignard.

People with untreated mental illness are 16 times as likely to be killed during a police encounter as other civilians approached or stopped by law enforcement, according to a study released by the Treatment Advocacy Center.

Though protesters often blame trigger-happy officers, the problem, according to some experts, is far more complicated.

"These shootings are tragedies for everybody involved," Chuck Wexler, executive director of the Police Executive Research Forum, told The Post. "Too often these calls come in and officers understandably think they need to take action right away. But in a medical emergency, slowing it down, getting additional resources and perhaps even stepping back is the direction that many are advocating."

"You don't blame the officers; you blame the training they receive," Wexler said. "It is every police officer's nightmare to have an outcome like what happened in Chicago this weekend. It really is. It's not what any good officer wants."

But the number of dead is so staggering, and an increasing wave of smartphone- and dashcam-recorded incidents so shocking, that minority communities in cities such as Chicago wonder aloud after shootings whether bad officers outnumber good ones.

The Post's analysis found that about nine in 10 of the mentally troubled people killed by police were armed, usually with guns, but also with knives or other sharp objects.

The analysis also found that most of the victims died at the hands of officers who had not been trained to deal with the mentally ill.

In most of those cases, police were called by a relative or a neighbor who was worried about a mentally fragile person's erratic behavior.

Yvonne Mote of Alabama dialed 911 in March out of desperation, hoping that police could help her brother, Shane Watkins, who suffered from schizophrenia.

Instead, he wound up dead.

"A week after they killed my brother, there was an armed robbery," Mote said. "That guy had a gun, and they arrested him without killing him. Why did they have to kill my brother, who only had a box cutter? I still don't understand."

Nearly a dozen of the mentally distraught people killed were military veterans, many of them suffering from post-traumatic stress disorder as a result of their service, according to police or family members. Another was a former California Highway Patrol officer who had been forced into retirement after enduring a severe beating during a traffic stop that left him suffering from depression and PTSD.

In at least 45 cases, police were called to help someone get medical treatment, or after the person had tried and failed to get treatment on their own.

When interactions between police officers and mentally ill people spin out of control, it's often because conventional police training directly clashes with effective tactics for resolving a typical mental health crisis, according to Ronald S. Honberg of the National Alliance on Mental Illness.

"Police are taught to be assertive and aggressive, to close in on a person, to raise their voices, to intimidate people who may pose threats, and, sometimes, maybe that works," Honberg, the alliance's national director of policy and legal affairs, told The Post.

But, Honberg said, for someone hearing voices telling them that, say, the FBI or CIA is hunting them - a common delusion for people suffering from schizophrenia - law-enforcement uniforms, aggressive commands and "closing in on the person" tend to backfire.

"It's going to accentuate the delusion that they're under threat," Honberg said. "When people think they're under threat, they are more likely to react aggressively."

Sandy Jo MacArthur is an assistant chief who oversees "mental response teams" for the Los Angeles Police Department, whose program is considered to be a national model. MacArthur said her department's officers are trained to embrace tactics that may seem counterintuitive. Instead of rushing to take someone into custody, for instance, they try to slow things down and persuade the person to come with them.

When possible, a psychologist or psychiatrist is on the scene.

The mentally ill "do not process what is happening like a normal criminal," MacArthur said. "There's a lot of white noise in their head."

Mental health experts say most police departments need to quadruple the amount of training that recruits receive for dealing with the mentally ill, requiring as much time in the crisis-intervention classroom as police currently spend on the shooting range.

But training is no panacea, experts caution.

The mentally ill are unpredictable. Moreover, police often have no way of knowing when they are dealing with a mentally ill person. Officers are routinely dispatched with information that is incomplete or wrong. And in a handful of cases this year, police were prodded to shoot someone who wanted to die.

Crisis-intervention training, known as CIT, is another program that trains officers to better manage calls involving mental health crises. In addition to educating police about mental health resources in their communities, the 40-hour training focuses on scenario-based role playing to help officers learn tactics for deescalating a crisis, said Honberg of the National Alliance on Mental Illness.

Among the most useful training exercises officers undergo in a CIT program, Honberg said, is using simulated psychosis via a multi-sensory 3-D simulation that recreates hallucinations and imaginary voices.

"I've seen burly officers break into a cold sweat and have to take off the headphones and say, 'Oh my God, I had no idea it was like that,'" Honberg said. "It changes their whole mind-set."

The National Alliance on Mental Illness estimates that there are 2,800 departments across the country with CIT programs, or about 15 percent of the jurisdictions nationwide.

Amy Watson, an associate professor in social work at the University of Illinois at Chicago, told CNN that the difference between CIT-trained officers and those who haven't received the training is stark.

"CIT-trained officers seem to have an idea of wanting to take time and wait it out to see if they can get the person to calm down," Watson told the network. "Non-CIT-trained officers seem to have that point where 'It's on.'"

Sometimes, she said, police "walk into a situation and the gun's already pointed, and they have few options at that point. But sometimes things escalate very quickly. CIT takes a step back and [gets] the person to calm down. CIT officers are better prepared to work through that and come to some kind of solution."

And yet, experts say, the training is far from a guarantee of safety for mentally ill people who encounter police.

Chicago, Honberg noted, has for years been considered a model CIT city, one that the National Alliance on Mental Illness used as an example when New York officials claimed that their police force was too big to implement the program. Even model cities, however, are fighting a losing battle, he said.

"Even though there are a number of cities, including Chicago and Washington, D.C., that have invested in training for officers to defuse psychiatric crises, that doesn't replace the need for the mental health system to respond to crises. There are far more jurisdictions in this country that have not invested in this training."

Last year, Honberg noted, Chicago closed six mental health clinics.

Wexler agreed that a training overhaul is necessary, calling the current training received by most officers across the country "abysmal."

CIT programs, he said, are good, yet insufficient because they don't focus heavily enough on practical tactics.

He added that mental health training needs to include more officers as well as dispatchers, who can be trained to relay crucial mental health information highlighting someone's history, medications and behavioral tendencies to officers before they respond to a call involving a psychiatric crisis.

"In these situations, ideally what you really want is as much information before you get to that call as possible," Wexler told The Post. "What we've found is that dispatchers play a key role in obtaining that information. If officers know walking into a situation that it's a medical emergency as opposed to a use-of-force situation, their response can be different."

"Too often," he said, "they have no idea what they're going to find."

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**This article is related to:** Mental Health Research, Mental Health, Medical Research, University of Illinois at Chicago



**The New York Times** | <https://nyti.ms/1pGVG4C>

U.S.

# Police Confront Rising Number of Mentally Ill Suspects

By FERNANDA SANTOS and ERICA GOODE APRIL 1, 2014

ALBUQUERQUE — James Boyd, a homeless man camping in the Sandia Foothills here, could hear the commands of the police officers who were trying to move him out.

The problem was that Mr. Boyd, 38, had a history of mental illness, and so was living in a different reality, one in which he was a federal agent and not someone to be bossed around.

“Don’t attempt to give me, the Department of Defense, another directive,” he told the officers. A short while later, the police shot and killed him, saying he had pulled out two knives and threatened their lives.

The March 16 shooting, captured in a video taken with an officer’s helmet camera and released by the Albuquerque Police Department, has stirred protests and some violence in Albuquerque and prompted the Federal Bureau of Investigation to begin an inquiry into the death. But it has also focused attention on the growing number of people with severe mental disorders who, in the absence of adequate mental health services, are coming in contact with the criminal justice system, sometimes with deadly consequences.

In towns and cities across the United States, police officers find themselves playing dual roles as law enforcers and psychiatric social workers. County jails and

state prisons have become de facto mental institutions; in New York, for instance, a surge of stabbings, beatings and other violence at Rikers Island has been attributed in part to an influx of mentally ill inmates, who respond erratically to discipline and are vulnerable targets for other prisoners. “Frequent fliers,” as mentally ill inmates who have repeated arrests are known in law enforcement circles, cycle from jail cells to halfway houses to the streets and back.

The problem has gotten worse in recent years, according to mental health and criminal justice experts, as state and local governments have cut back on mental health services for financial reasons. And with the ubiquity of video cameras — both in ordinary citizens’ hands and on police officer’s helmets and in cruisers — the public can more readily see what is going on and respond.

“I think that this issue hits every city, every part of the country where you have people who are walking on the street who normally would have been under some kind of treatment or institutionalized,” said Chuck Wexler, executive director of the Police Executive Research Forum, a Washington-based nonprofit that in 2012 released a report calling for minimizing the use of force by the police in situations involving mental illness.

Dr. E. Fuller Torrey, a psychiatrist and the founder of the Treatment Advocacy Center, a nonprofit group in Arlington, Va., that promotes access to mental health care, said police officers had by default become “the first line of contact” for severely troubled people who once might have gone to a community clinic or mental health crisis center.

Dr. Torrey pointed to San Diego, where calls to the sheriff’s office involving mentally ill people nearly doubled from 2009 to 2011, and to Medford, Ore., where, he said, the police in 2011 reported “an alarming spike in the number of mentally ill people coming in contact with the police on an almost daily basis.”

Many police departments have put in place training for officers in how to deal with mentally ill people, teaching them to defuse potentially volatile situations and to treat people who suffer from psychiatric illnesses with respect. But officers can

as well as officers. But the reality on the street is more complicated.

“Our reactions are based on the actions of people,” Mr. Willoughby said, setting up a dynamic that often leaves the officer no alternative but to use “a strong hand.”

The department does not pair officers with mental health workers, as some cities do. The Los Angeles Police Department’s specialized mental evaluation unit, for example, has a staff of 60, with 30 mental health clinicians, according to Detective Charles Dempsey.

The New York Police Department has not adopted the crisis intervention team model, which was developed by the Memphis Police Department, but has opted instead for its own protocols and training for handling mentally ill people, who are known as emotionally disturbed persons, or E.D.P.’s in the department’s jargon.

All officers in New York receive basic training for handling such calls, said Stephen Davis, the Police Department’s top spokesman, but the rule is to bring in the Emergency Service Unit, whose officers have specialized training in this and other areas.

People with mental illness are often arrested in connection with minor crimes like disorderly conduct or trespassing. Mr. Boyd, whom the Albuquerque police said had a history of violence and who appeared to be turning away from the officers when he was shot, attracted law enforcement attention for camping illegally.

About 6 percent of the population, or one in 17 Americans, suffer from a serious mental illness, according to the National Institute of Mental Health. Studies suggest that the mentally ill are involved in only about 4 percent of violent crimes. But when untreated, severe mental illness is associated with higher rate of violence, researchers have found.

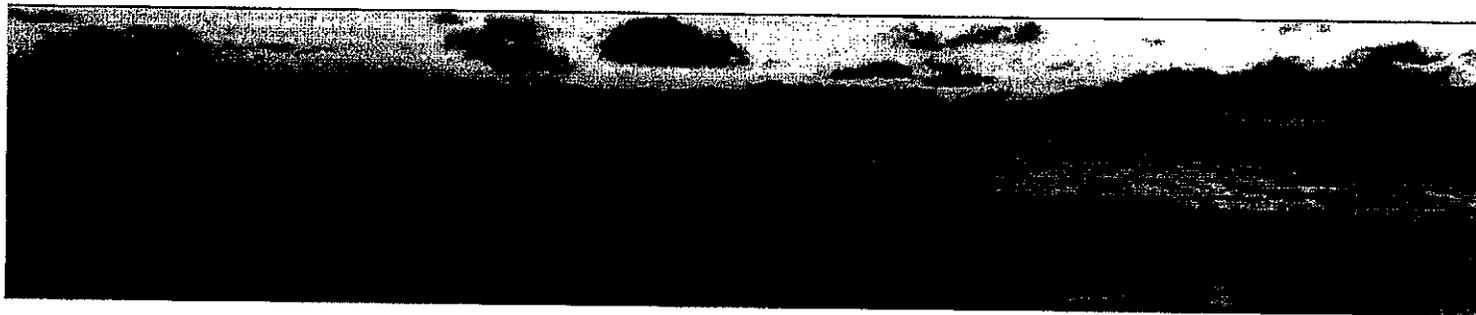
The lack of adequate mental health services for the severely ill, which began during the years of deinstitutionalization in the 1960s and has worsened in the



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## Did Bipolar Disorder Drive a Mother to Murder Her Child?

Posted on April 14, 2006 by Forum Admin —



(May be Triggering)

On the outside, Andrea seemed like a devoted, involved stay-at-home mom. But inside, she was battling a mental disorder that disrupted her thoughts and, she says, led her to do the unthinkable.

Andrea and her husband of 16 years already had a 13-year-old daughter when they decided to have a second child, a little boy they named Garrett. "He was precious," Andrea says. "He was so smart. He was already reading in kindergarten. He would entertain the class. He was so outgoing."

As Garrett grew older, Andrea was active in his school and volunteered for the PTA. But underneath the surface, she says she was troubled with dark, painful thoughts. "I struggled," she says. "Something didn't seem exactly right. I had bad feelings about myself that I

was worthless, that I wasn't a good mom, that I wasn't a good person."



On April 14, 2005, the negative thoughts took over. Andrea tried to commit suicide. "I went home and ran a tub of water and got in it, and I had gotten a knife from the kitchen, and I proceeded to slit my wrists," she says. "The phone rang, and I was in the process of. I was cutting it at the time that called, and I stopped."

After bandaging up her wrists, Andrea told her husband what she had done. "He tried to convince me, 'Andrea, you're not a bad mom.' And I listened to him, and I tried to take all that in, and I thought, 'I can, I need to turn my thoughts around,'" she says. "But they kept racing in my mind, and it was so negative. I just felt the weight of the world was on me."

That same night, Andrea stayed up late working on a costume for Garrett to wear to school the next day but she just couldn't finish it. Instead, she kept Garrett home from school, saying they didn't feel well. "I just couldn't get it together, and the voices started coming that he would be better off," she says. "And I just thought his life, things were going to be so bad, and the voices just kept getting louder and louder."



Then, she says, the voices took over completely. According to Andrea, she placed 6-year-old Garrett in a bathtub filled with water and began choking him. "He said, 'You're choking me.' He said that a couple times, but then he didn't say anything else," she says. "It was just so unbelievable that I did that. I would never hurt him, I would never, never hurt him. He was so loved. He was so wanted. But I don't know why I did it. I'm so sorry. I'm so sorry."

Garrett was rushed to a hospital, where he died four days later. An-

Andrea pleaded guilty to first-degree murder, and she is currently serving a sentence of 42 years at a maximum-security prison.



Andrea says the person who killed her son "wasn't me. It wasn't the real me. It was a very sick me, because I would never hurt him. Never," she says.

Although Andrea says she had sought help in the past, she claims the medication her family doctor gave her didn't work for her symptoms. "The antidepressants he gave me they either made me sleep more or be on the manic stage, be up all the time. I would clean the house for days. I would not sleep," she says. "It's like you can't see how bad things really are. If I had any idea what I would have done, I would have gotten help."

Once Andrea arrived in prison, she says the doctor there immediately diagnosed her problem as bipolar disorder. Within 10 days of starting the medications he prescribed, Andrea says she noticed results. "What a difference it has made in my life. It made me feel like maybe there was a reason that I took Garrett, you know? Maybe there was an answer," she says.

"It was almost like relief that I wasn't just this horrible person that killed my child one day, you know, that there was something that caused me to have this happen, because I miss him so much. I miss being his mom. I miss saying prayers at night. I miss taking him to Sunday school," she says. "My life, per se, is over in a lot of ways because the guilt is so heavy, because, you know, he's gone and I did it."



Two of Andrea's friends, Daphen and Kathy, say they continue to support Andrea through everything. Daphen who has known Andrea since middle school says that most of the signs were hidden, but

she did notice some peculiar behavior. "She missed a lot of school. She wore her clothes inside out the night before like a sweatshirt so she could just flip it the next morning," she says. "Because she's my best friend, I would just say, 'She's just eccentric, you know, beats a different drum.' I could always say that."

When Andrea was feeling down as an adult, Daphen and Kathy say they would often try to help her realize that she was a good mom. "I could never live up to what she thought society expected or what society says is a good mother," Kathy says.

Daphen says both she and Kathy knew that Andrea had tried to kill herself once before not long after Garrett's birth but they attributed it to postpartum depression.



Just weeks before Garrett's death, Daphen says she noticed a change in Andrea's behavior. She says Andrea became very anxious over what would normally be simple decisions and that Andrea admitted to hearing voices. "When you look back on the hindsight, like, 'Well didn't you think that was crazy or something?' Well I justified it," Daphen says.

Daphen whose own child has been diagnosed with early onset bipolar disorder says if you notice symptoms in a loved one, it is important to do the research and speak with doctors who specialize in the illness. "It's not just about medication," Daphen says. "You need to also get therapy because therapy comes with the medication."

Andrea's husband declined to appear on The Oprah Winfrey Show, and her daughter, now 21 years old, also turned down the invitation.



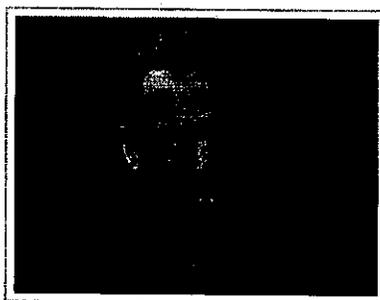
Dr. Kay Redfield Jamison is one of the country's foremost experts

on bipolar disorder. She is a professor of psychiatry at Johns Hopkins School of Medicine and wrote the best-selling memoir *An Unquiet Mind* about her personal experience suffering from the disease.

Dr. Jamison explains that the symptoms of bipolar disorder also known as manic depression are different for everyone. "It's a disorder of the brain that's characterized by real swings in mood from irritability, depression, to euphoric highs," Dr. Jamison says. "It can be as in Andrea's case hearing voices, psychosis, seeing things that aren't there but usually, more commonly, it's just real extremes in energy."

According to Dr. Jamison, people in the manic phase probably don't need much sleep, talk very fast, and can be very intrusive and in your face. "When people are down and depressed, obviously everything else is the opposite. People very often go to the doctor because they're so tired. They aren't able to sleep or they sleep too much. They have no energy. And that's actually almost as striking as the down mood and irritable mood," she says.

Although the word bipolar seems to mean that you feel one of two extremes in emotion at either end of the spectrum, Dr. Jamison says that's not true. Someone who is bipolar can actually be in a very depressed mood and still have a manic energy level. "That's one of the reasons why it's kind of a misleading word, because there are actually states where you combine mania and depression where people are very agitated, have a very depressed mood but have a manic energy level," Dr. Jamison says. "And those are very dangerous states from a suicide and violence point of view."



In 2004, actor Maurice Benard, who plays Sonny Corinthos on the ABC soap opera *General Hospital*, appeared on *The Oprah Show*. In the interview he spoke openly about his debilitating battle and a period in his life when he stopped taking his medication. When off his meds, Maurice says he plunged into a dark mania, rapidly started losing control and couldn't distinguish what was real from what was on TV. He began talking to his wife, Paula, with his character's lines. "It was probably about a week's time that I saw the transformation," said Paula. "It wasn't just, like, one moment or one day that it happened. But, literally you see someone becoming a totally different person."

Then, one frightening night while Paula's nieces were sleeping over,

Maurice drank half a bottle of wine. "And I started feeling very violent. And I remember crying," he said. "And she wouldn't stop. So I started yelling. And I told her if she didn't stop, that I was going to kill her in my mind I didn't believe I would."



Since that very candid interview, Maurice says he has received a lot of positive feedback. "Pretty much everywhere I go people come up to me and say, 'Thank you for helping me,'" he says. "It's great to educate people on what this disease does and what it is." Maurice says he hasn't come off his medication since then, but he has had some setbacks. "I got on an airplane and had an anxiety attack, so I had to get off," he says. "That was pretty scary."

Another difficult time came when Maurice agreed to let General Hospital write a story line where his character has a breakdown and goes on lithium. "I said, 'Yeah, let's do it. Let's do it,'" Maurice says. "So I did it, and said, 'Any time you want to stop, we stop the story.'"

"After two months of it, I knew that I wasn't . But that's a problem with this disease. You always deny. 'I'm fine, I'm fine, I'm fine.' Until you get to that point. And unfortunately, at the end of the story, I got to that point. I had another anxiety attack."



Maurice's wife, Paula, says it has taken an enormous amount of patience and support to help her husband stay healthy. "There's a lot of ups and downs," Paula says. "And I just look at it like any other disease that, you know, you have to deal with. And that's the only way it helps me to get through it."

Maurice says he has been taking medication for 15 years and will continue to do so. "I flirt with not taking it but I'm not stupid, because every time I've gone off the medication, I've had a breakdown," Maurice says.

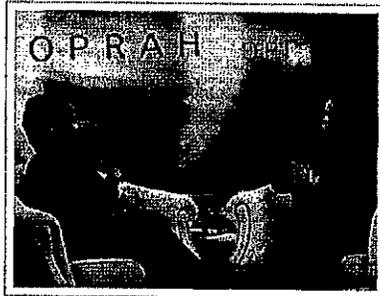


According to the National Institute of Mental Health, at least 5 million people have been diagnosed with some degree of bipolar disorder. Many times, those diagnosed are familiar faces.

Actress Jenifer Lewis, who appeared in Tyler Perry's film *Madea's Family Reunion*, recently revealed that she is bipolar and says she is finally ready to talk about it. "After years of therapy and after years of medication, I feel experienced enough now to come out and say bipolar disorder is treatable and you can get help and you don't have to live such a tortured existence," she says.

Jenifer says she knew for years that something was wrong, but she didn't know what it was. To cope, she used her one-woman shows to hide her manic tendencies. "On stage I could be big and loud and everybody said, 'Well, she's fabulous.'" she says.

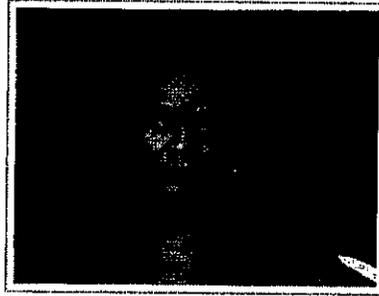
But after the curtain went down, Jenifer says she lived in a dark place. "I would cry and I didn't know why I was crying," she says. "You can wake up and the sky is blue. But for , it's black. It's dark. It's a dark place to go."



Jenifer says she would sometimes lose control during manic episodes, including once in a nail salon. "I felt a racist act had been committed there and it enraged me. You don't get angry. You become enraged," she says. "And I just cleared whole shelf of the nail polish. And I went, 'Oh.' I ran out of there. After I did it, I called my therapist. I said, 'I'm out of control.'"

Jenifer also says her manic behavior led to things like road rage. One morning, she says she left her house feeling calm until the driver behind her bumped her car while trying to pass. "In that second

I went right into a rage and I chased him going 60 miles per hour in a 35 speed limit zone," she says. "The rage in that moment is saying, 'Get him. Get that person who hit my car!' That's all that's going through your mind. There's no rational thinking. Bipolar can destroy the bases of rational thinking."



Finally, Jenifer decided to take back her life and live in the light. "I wanted a good life," she says. "I didn't want to stay in that dark place, that manic place."

Diagnosed in 1990, Jenifer says it took four years for her therapist to convince her to take medication. "My whole thing was, 'Oh, honey, I need my edge. I'm Jenifer Lewis. I need my edge. You can't take that away,'" she says. "But I got tired. Being bipolar is exhausting."

It took some time and patience to find the right dosage, Jenifer says, but it hasn't destroyed her edge. "Sometimes the personality, which I have a big one, can break through the medication," she says. "You can be even. You can function in whatever way you want to on medication."

Jenifer says she's sometimes tempted to stop taking her meds, but she received a strong reminder of how important it is in 2005. She happened to be in Rome when Pope John Paul II died. Because there were so many people flying in and out of the city, she had trouble getting a flight back and was without her medication for four days. "I took it when I got home. But I didn't know I was in a manic state and I went out and bought a \$2.3 million mansion on a whim. I didn't think anything about it," she says.



A passion for acting also helped Jenifer cope with bipolar disorder. "I had a dream and nothing, not even my disorder, was going to kill

that," she says. "And I say to kids, "You get a passion. You find a passion because no matter what happens, you'll go back to that."

Jenifer has even written a show called *Bipolar, Balh and Beyond*. "It's through my one-woman shows that I do my part through humor, laughter being the greatest healer," she says. "My technique has always been to make 'em laugh and then stick 'em with that knowledge."

With three movies coming out, Jenifer's professional life is booming. But it's the personal milestones that mean the most she's adopted a little girl! "You can live a good life with this disorder," she says. "But you have to do the work therapy plus medication."



Sometimes people who are suffering from bipolar disorder do not even realize that they have an illness. If you think that you or someone you love might be suffering from the condition, Dr. Jamison says to keep an eye out for these symptoms:

- \* Mood swings
- \* Irritability
- \* Rage attacks
- \* Changes in energy
- \* Sleeping too much
- \* Sleeping too little
- \* Alcohol and drug use

If you or a loved one is diagnosed, Dr. Jamison says it's important to "do the work" to get the best treatment possible. "The work is getting a good doctor. Getting diagnosed. Accepting your diagnosis. Getting good therapy. Getting the right medication," Dr. Jamison says. "And read, read, read. Badger your doctor. Question everything. Don't take anything for granted. No matter how good your doctor is, always go in there with a list of questions."

#### Related Resources

- Read "Bipolar Diaries" in the October 2007 issue of *O, The Oprah Magazine*.
- Dr. Kay Jamison's book *Is An Unquiet Mind*.
- Read *BP Magazine's* interview with Maurice Benard that will be featured in their Fall 2007 issue on newsstands October 2. For more information visit [www.bphope.com](http://www.bphope.com)

- Visit the Depression and Bipolar Support Alliance's website at [www.dbsalliance.org](http://www.dbsalliance.org).
- For information about the Johns Hopkins Mood Disorders Program, visit [www.hopkinsmedicine.org/moods](http://www.hopkinsmedicine.org/moods).

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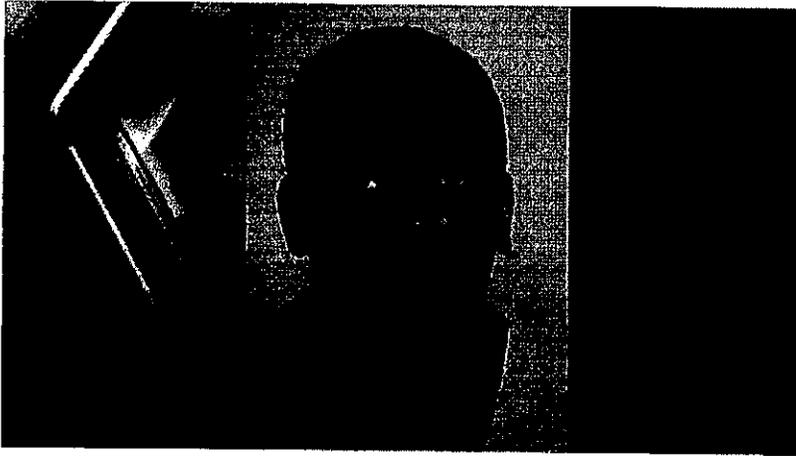
# Indianapolis man pleads guilty in connection with death of grandmother

POSTED 5:29 PM, AUGUST 17, 2015, BY KYLEE WIERKS, UPDATED AT 12:53PM, APRIL 21, 2017



*This is an archived article and the information in the article may be outdated. Please look at the time stamp on the story to see when it was last updated.*

**Update (April 21, 2017)**– Richard Norris pleaded guilty to charges of battery and voluntary manslaughter. He was sentenced to 30 years in prison.



Mug shot: Richard Norris

INDIANAPOLIS, Ind. (August 17, 2015) – An Indianapolis man was arrested in connection with the death of his grandmother, and new court documents reveal he was being treated for schizophrenia.

Richard Norris, 21, is charged with the murder of 78-year-old Lucille Gladney.

The investigation began Sunday morning when Gladney's daughter saw that her mother's car was missing from her driveway.

Gladney's daughter entered her mother's home, and she found her face down in her bedroom with a rope tied round her neck, trauma to her head, and a hammer on the floor.

The coroner later determined Gladney's cause of death to be asphyxiation.

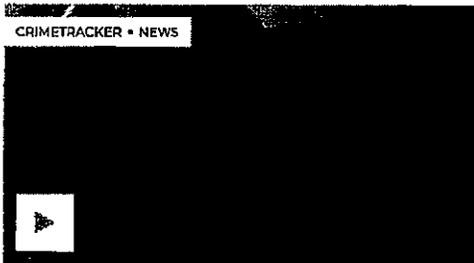
According to court documents, Gladney's daughter told police her nephew (Richard Norris) had been living at the home. She told police he started living there after his mom kicked him out of their home because he attacked her. She also told police he suffered from schizophrenia.

Officers found Norris sitting in his grandmother's car a block away from the crime scene. The car was running, but it was parked.

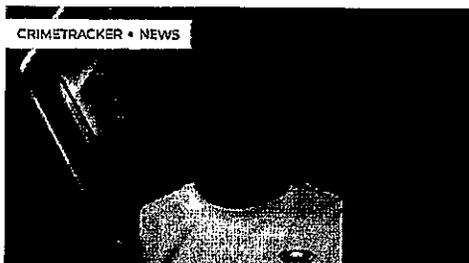
Police took Norris into custody without incident. It was later discovered that Norris' blood was on the hammer in Gladney's bedroom.

According to court documents, Norris' mom told police she noticed her son was acting violently the first week in August, so she took him to Midtown Mental Health. He was admitted and treated for his schizophrenia, and he was released on August 10.

Norris' initial appearance is Wednesday, August 19.



**Court docs detail how nurse's aide, boyfriend allegedly murdered Brownsburg woman**



**Huntington man arrested after 2-month-old daughter dies of blunt force trauma**



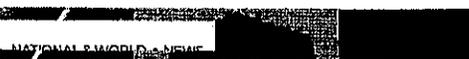
**Pennsylvania man admits to murdering aunt and step-uncle, then taking her car to go see movie**



**Family says murder victim should have been locked up on day of death**



**New York nanny found guilty of fatally stabbing two young children in her care**



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# ANCHORAGE DAILY NEWS

## Crime & Courts

### Schizophrenic sentenced to 60 years for clinic murder

✍ Author: Jerzy Shedlock © Updated: September 28, 2016  
📅 Published November 1, 2013

Michael McEvoy, a 23-year-old Anchorage schizophrenic, was sentenced Friday to 60 years in prison, though he'll be back on the streets in about 38 years due to mandatory parole. McEvoy purchased firearms locally despite his mental health issues, then shot and killed a teenage acquaintance in 2011.

McEvoy could have argued insanity due to his mental problems; both parties and the judge recognized McEvoy's disease played a large role in the violent crime. But the state's standards for that argument are said to be the most stringent in the nation, and the defense is rarely seen in Alaska, despite a plague of mental health issues.

Superior Court Judge Philip Volland handed down the sentence Friday in Anchorage. Ultimately, the judge agreed with the state's proposed punishment but said such a case, with "varying societal rights that do not always work in harmony" presented a challenge.

Prosecutor Daniel Shorey lamented that the McEvoy was able to purchase a weapon. McEvoy bought the handgun on his birthday. The gun shop that sold him the firearm, the Ammo Can, acted within the law when it sold the gun, the attorney said. The shop also cooperated fully with the Anchorage Police Department's investigation, he said.

McEvoy changed his plea to guilty in August, but officials say he had wanted to admit guilt for more than a year.

McEvoy was charged with killing Mozelle Nalan at Soteria House, a temporary housing facility for people experiencing mental distress or crisis, in June 2011. Soteria House is known for treating patients without medications. McEvoy shot Nalan multiple times in the head and neck. The female teen was a volunteer in training at the facility who had been living there nearly a year at the time of the shooting.

According to McEvoy's public defender, the young man thought he was killing a dragon at the time of the shooting. He was suffering from a delusion, he said.

### Couldnt take away her soul

The victim's mother Natasha Nalan was the first to address the courtroom. Natasha and her three remaining kids -- ages 10, 11 and 15 - - listened to the sentencing over the phone; they live outside of Alaska.

She first read statements from Mozelle's siblings. The 11-year-old wrote that McEvoy doesn't "get the pain that mom and I feel ... You deserve to burn in hell for what you did, but live."

Natasha said two of the kids now suffer from anxiety conditions because of the murder. However, the mother spent most of her statement retelling warm memories of Mozelle, who was named after her grandmother.

Mozelle "would give you the shirt off her back" despite physical health problems with her spine and reoccurring arthritis. Later in life, she had mental issues with schizophrenia, Natasha said. She spent her childhood in Skagway, hiking and spending time with her siblings.

The mother began to choke up when she recounted the shooting. She said McEvoy shot her daughter five times in the head, destroying a portion of her brain and requiring Mozelle's eye to be stitched shut. Mozelle survived for more than two weeks on life support. Natasha spent that time at Mozelle's bedside. On rare occasions, a tear would streak down her daughter's face, she said.

"Whatever he did to her body, he couldn't take away her soul," said Natasha, who made the difficult decision of removing her daughter's life support.

She told McEvoy she did not hate him, but that wasn't true every day.

### **Diagnosed at 14**

Public Defender Dan Lowery said McEvoy has suffered from severe mental health issues since he was a young teen. His client was first diagnosed at a psychiatric hospital at the age of 14.

Lowery said McEvoy suffers from schizoaffective disorder, a mental disease characterized by disorganized thoughts and mood swings. As a result of the jumbled thoughts, those affected experience auditory hallucinations and paranoid delusions, according to a list of diseases compiled by the World Health Organization.

At the time of the shooting, Lowery said, McEvoy was in the grips of a "very severe delusion." According to the attorney, Mozelle's boyfriend was on the phone with the girl when the shooting occurred. He overheard the then-21-year-old McEvoy talking about killing a dragon. Other witnesses told officials the same thing, he said.

"McEvoy at that time, because of his disease, believed he was interacting with a supernatural being," Lowery said. "It seems clear that he didn't know he was interacting with a human being."

Following the shooting, police transported the victim to the station. Attorneys watched hours of video of McEvoy ranting and raving, making little sense, Lowery said. But Friday in the courtroom, the 23-year-old spoke only when asked for a statement. Medication he's receiving at the jail has changed him, Lowery said.

### **Insanity defense in Alaska**

The attorney highlighted McEvoy's mental history before shifting his argument to the stringent standards of the insanity defense in Alaska.

In 1982, Alaska adopted a new statutory standard for its insanity defense, a standard that's been in place since. The changes here and Outside were a reaction to the attempted assassination of President Ronald Reagan. The assailant, John Hinckley, was found not guilty by reason of insanity. Public outcry over the verdict led to the Insanity Defense Reform Act.

As an article in Alaska Law Review noted, other states narrowed defendants' abilities to claim insanity for their crimes, but Alaska "is the most stringent in the nation."

In Alaska, defendants must show that, at the time of the crime, he or she "was unable, as a result of the mental disease or defect, to appreciate the nature or quality of (the) conduct" to use the insanity defense.

Alaska's standard does not absolve a defendant based solely on an inability to know right from wrong. The court excuses crimes based on whether the defendant was able to "appreciate" the act committed. This limited definition of insanity limits the defense to people suffering from the most extreme forms of mental illness.

Lowery argued McEvoy would have fit within the definition. "All the same, I can assure the court I've spent many hours with Mr. McEvoy and talked about what to do in this case," he said. "I'm comfortable that he's made a decision he can live with. He feels strongly that this is the best decision."

### **Hiding behind mental illness**

McEvoy stood in court when he made his statement. "I'm wrong for not taking into consideration Mozelle's life," he started. He apologized to the girl's friends, family and community. He also apologized for placing others in fear of death.

Referring to Mozelle as a dear friend, McEvoy said the girl's beauty and spirit would surely live on.

McEvoy said his father tried to talk him into using an insanity defense, but he didn't want to hide behind his mental illness.

Contact Jerzy Shedlock at [jerzy\(at\)alaskadispatch.com](mailto:jerzy(at)alaskadispatch.com). Follow him on Twitter @jerzys.

**About this Author** **Jerzy Shedlock**  
Jerzy Shedlock is a former reporter for Alaska Dispatch News.

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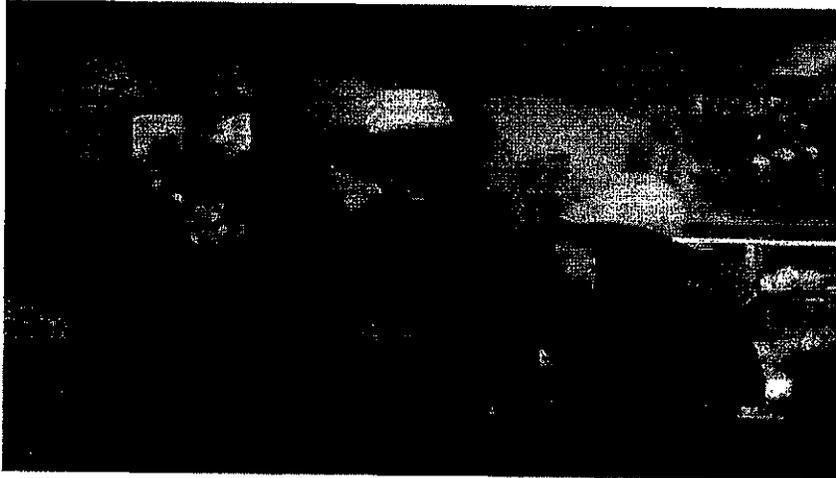
## Comments



# Double Murder Drawing Attention to Schizophrenia

By Vanessa Herrera

Published at 4:57 PM PST on Nov 30, 2014 | Updated at 5:09 AM PST on Dec 1, 2014



Residents in Point Loma are still in shock after a shooting left two parents dead. The suspect? Their own son. The suspect's sister says he had been diagnosed with schizophrenia. NBC 7's Vanessa Herrera spoke with one local health professional who says there's something we all should know about incidents like this. (Published Sunday, Nov. 30, 2014)

## TRENDING STORIES

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A 22-year-old Point Loma man accused of killing his parents in cold blood struggled with paranoid schizophrenia, his sister told NBC 7.

Lissa and David Haynes were shot dead inside their Tarento Boulevard home early Friday morning. The neighborhood was on lockdown until Peter Haynes was found and arrested on two counts of first-degree murder. Police say he had a semi-automatic handgun in his pocket.

San Diego psychotherapist David Peters, MFT, says a small percentage of people with mental illness have schizophrenia.

"It's marked by delusions, or misperceptions of reality," Peters said. "Some of the times those are very minor ones, like perceiving you have special clairvoyant powers."

### WHAT DO YOU THINK?

**President Trump cannot block anyone on Twitter, a judge has ruled. Who else should not be allowed to do so? (Check all that apply.)**

- Public officers
- Politicians (in or out of office)
- Members of the press
- Everyone should be allowed to block whoever they want

NBC 7

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## Suspected Shooter Has Paranoid Schizophrenia

The sister of a man suspected of killing his parents in Port Lorne says her brother suffers from paranoid schizophrenia. NBC 7's Candice Nguyen reports on Nov. 28, 2014. (Fuel-Shop Friday, Nov. 28, 2014)

In other cases, Peters says it can be severe as believing the devil is speaking to you. He says it's hard to predict any sort of outburst.

"This is an illness that looks very different over the population, so the individual characteristics are unique from one to the other," he said.

It is important to note Peters is not Haynes' therapist, nor have officials confirmed schizophrenia played a part in the murders. However, Peters says most people with severe mental illness are more often the victim than the perpetrator.

#### • Shooting Suspect Has Paranoid Schizophrenia: Sister

"The vast majority of people with severe mental illness are of no risk to the general population at all," he said. "The percentage of people with schizophrenia who are convicted of violent crime is very small compared to the percentage of the general population."

After situations like this, people often bring up the mental health system, or lack thereof. Peters says proper funding for mental health programs is important.

With healthcare privacy laws, the public may never fully know what happened.

Haynes is scheduled to be arraigned Wednesday.

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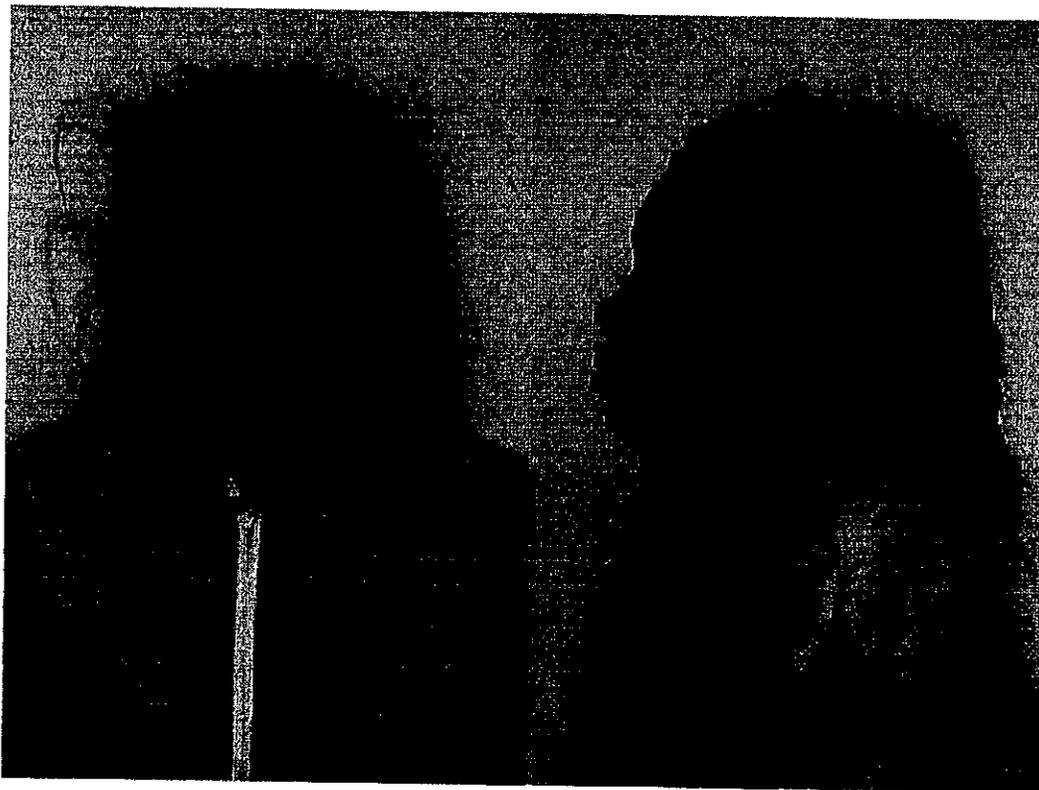


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Kane County | updated: 7/31/2014 5:46 PM

# Batavia murder suspect says she's bipolar



**Latoya M. Baines**



**Harry Hitzeman**

A 26-year-old woman accused of stabbing her boyfriend to death at a Batavia apartment complex two years ago told police she has a bipolar disorder -- but after she was informed by authorities she'd been charged with murder, a detective testified Thursday.

The mental condition of Latoya M. Baines was an issue at the Kane County court hearing in which Baines' defense

attorney sought to have her statements to police banned from court.

Baines has been held on \$750,000 bail since her arrest April 30, 2012, at an apartment complex on the 1100 block of East Wilson Street.

She faces 20 to 60 years in prison if convicted of first-degree murder in the death of Gerald J. Jackson, 25, with whom she had two children.

Batavia Police Detective Kevin Bretz testified that police were called to the complex shortly after 1 a.m. and arrested Baines, whom fellow officers said was intoxicated.

Baines was driven back to the station, put in a holding cell and questioned at about 7:15 a.m. after she had time to sleep it off.

Bretz said he read Baines her Miranda Rights and she signed a form saying she understood them. Her clothes also were taken as evidence and she was issued an insulated, paper gown because the jail jumpsuits did not fit, Bretz said.

Bretz testified that Baines told police she suffered from a bipolar disorder, but only after she was informed of the murder charges against her.

Defense attorney Sandra Byrd argued that police did not take any steps to ensure Baines actually understood her rights or had waived them.

Byrd said her client's lack of understanding combined with Baines' clothing being taken, lack of sleep, lack of food and being shuttled from cell to cell, meant she did not give her statements to police voluntarily and they therefore should be banned from court.

During the hearing, Baines, clad in an orange prisoner jumpsuit, sniffled and occasionally sobbed. She was ruled fit to stand trial in June after an evaluation.

The only part of Baines' interrogation that was played in open court was when Bretz reviewed Miranda Rights with her.

Judge Susan Clancy Boles said she wanted to review the remainder of the interrogation recordings and would rule on the matter Wednesday.

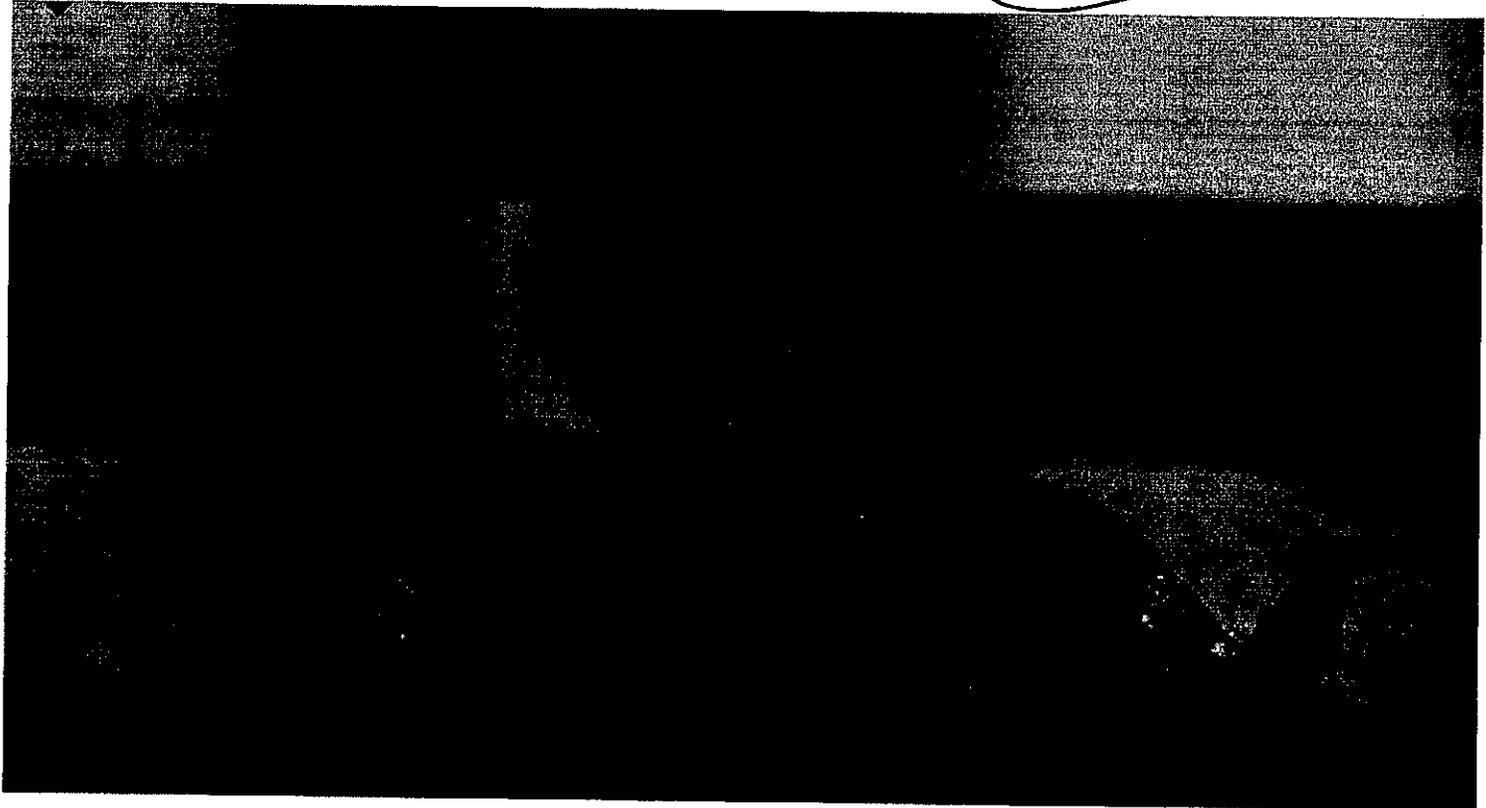
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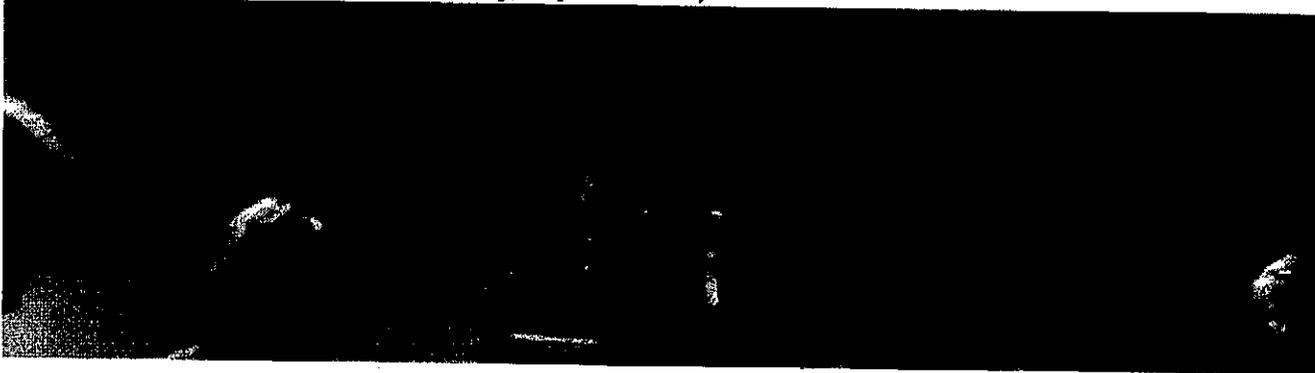
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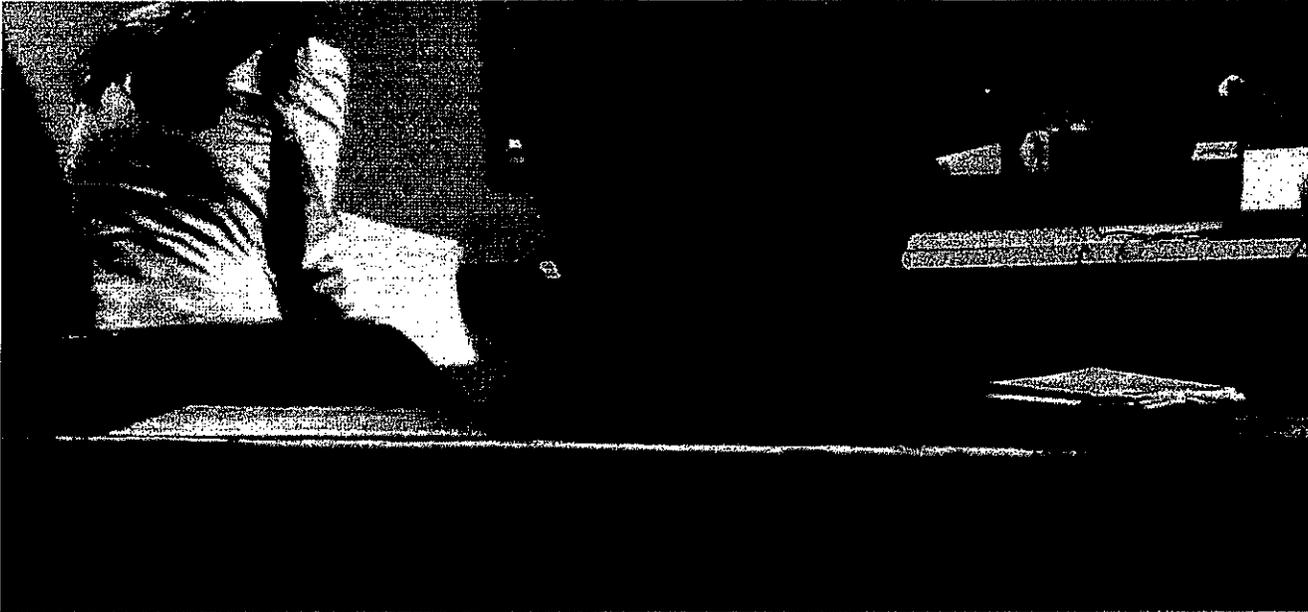
**mySA** [https://www.mysanantonio.com/news/local\\_news/article/Second-trial-begins-in-stabbing-death-3872536.php](https://www.mysanantonio.com/news/local_news/article/Second-trial-begins-in-stabbing-death-3872536.php)

## Bipolar disorder cited in man's fatal stabbing

By Craig Kapitan Updated 10:46 pm, Monday, September 17, 2012



[https://www.mysanantonio.com/news/local\\_news/article/Bipolar-disorder-cited-in-man-s-fatal-stabbing-3872536.php](https://www.mysanantonio.com/news/local_news/article/Bipolar-disorder-cited-in-man-s-fatal-stabbing-3872536.php)



Capital murder defendant Stephen Vogt waits for jurors to file into the 290th state District Courtroom Monday afternoon as his trial starts for the 2009 robbery and stabbing death of an acquaintance who had been helping him move.

Since childhood, **Stephen Jonathan Vogt** has heard voices in his head, his attorneys told jurors Monday as his capital murder trial began for the robbery and brutal stabbing three years ago of an acquaintance who unwittingly had helped him run away.

“Bipolar disorder is a huge factor in this case,” **Michael Gross** said during an opening statement. “To try to keep the voices out of his head (as a child), he would wrap his head in duct tape.”

Because prosecutors have opted not to seek the death penalty, Vogt, 22, will receive an automatic life sentence if jurors in the 290th state District Court find him guilty of capital murder. Co-defendant **James Garza**, 20, received life without parole last November.

Vogt appeared to shake nervously throughout the proceedings Monday.

He and Garza were arrested on shoplifting charges in Glenwood Springs, Colo., less than three weeks after **Mario Raygoza Jr.**, 19, was found face down outside a South Side apartment complex. Near him was a bloody steak knife that investigators later traced back to a butcher block belonging



# Bipolar murder accused to stand trial

NEWS / 8 JUNE 2015, 5:52PM / SANDI KWON HOO - STAFF REPORTER



*Mbuyiselo Fish is accused of the rape, assault and murder of his girlfriend, Bettie Thenza. Photo: Danie van der Lith*

Kimberley - A Kimberley man, accused of raping, beating and then killing his girlfriend, will return to court to face charges once his medical condition has improved.

Mbuyiselo Fish is accused of the rape, assault and murder of his girlfriend, Bettie Thenza, in Promised Land in 2013, and will return to court once his condition (bipolar mood disorder) improves after receiving treatment at the West End Psychiatric Hospital.

Fish broke down during cross-examination in the Northern Cape High Court on Friday, where he insisted that he would not be returning to his cell.

"After all I have been through at the correctional centre, I choose not to go to prison. Give me a date so that I can be admitted to West End hospital. I don't know anymore where to now," he cried.

He complained that inmates were being badly treated and that he was being treated like an ordinary criminal while he was actually under observation.

Fish, who is representing himself, recommended that psychiatrist Dr Keith Kirimi, who diagnosed him with bipolar disorder, be allowed to ensure that he was taking his medication by personally administering his pills to him at home.

"I will be placed under the care of my sister and the doctor can decide if I am fit to proceed during my next court appearance."

He pointed out that during his incarceration he was not given any prescription medication for an entire month.

"The absence of medication could have caused my relapse. I was treated like any other inmate at the correctional facility and not like a patient under observation, which added to my stress."

Kirimi said Fish's condition could be managed within the space of a few weeks while he is treated as an outpatient after which he could stand trial.

Fish was sent for a 30-day observation at West End Hospital where he underwent psychiatric interviews, brain scans, physical and neurological examinations and blood tests to determine if he was fit to stand trial.

Kirimi pointed out that while declaring Fish a State patient could be considered, the medical professionals who examined him found that his functioning processes were intact.

"Most of us were of the view that it is possible to stabilise him in a short period of time."

He added that Fish was "not well" and had shown signs of a relapse during his psychiatric assessment.

Kirimi stated that the team that evaluated him agreed that Fish exhibited hypomanic symptoms.

"Symptoms of hypomania include an elevated mood, extreme irritability, aggression, delusions of paranoia where the accused may be fearful that people are trying to harm him, incoherent speech and racing thoughts. In our recommendations we proposed that he be admitted as an involuntary patient at a mental facility until he is stabilised. Treatment will continue until he is no longer a danger to himself and society."

He explained that while there was a severe shortage of beds at mental facilities, it would be possible to arrange for Fish's admission on Friday.

He added that he had previously observed Fish in a depressive state.

"Bipolar disorder is quite common and moods may fluctuate from depression to manic. Important factors that contributed to his relapse include not taking the prescribed medication as well as the stressful nature of the court proceedings. Under traumatic situations we advise patients to increase their dosage."

Kirimi also pointed out that, based on the psychiatric risk assessment, Fish's history was littered with non-compliance to treatment and anti-social behaviour.

"He was not taking his medication and this makes me reluctant to admit him as an outpatient. If he is admitted as an involuntary patient, he will be properly observed by nursing personnel, medical officers and psychiatrists in hospital to ensure that he complies with treatment.

He explained that the psychiatric observation was not meant to be a treatment process.

"In this instance, the accused was not on medication during observation. During the last week of the observation process we had advised that Fish needed to start medication. Treatment was important so that other clinicians in the observation process could make their findings."

Kirimi stated that a number of reasons, including the lack of prescription medication, could have resulted in the relapse.

"It is a correctional facility where prisoners with other illnesses are detained and is not entirely a hospital environment."

He also said he was not aware of any violations relating to Fish's medical treatment while awaiting trial.

Kirimi indicated that during their observations, the panel concluded that the accused had relapsed and would not be able to adequately follow court proceedings or give evidence.

Legal Aid South Africa advocate Dirk Van Tonder, who was involved with the defence at some stage, was called in to assist during cross-examination of Kirimi, said that from the date the trial started on November 2014, the accused had changed legal representation four times.

"At the start of the trial, the first legal representative withdrew from the matter due to some misunderstanding between himself and the accused. Another legal representative was appointed for the accused but was unable to get relevant instructions from the accused. A third legal representative was appointed but also did not succeed in getting coherent instructions from the accused."

Fish then decided to represent himself.

"There is no sufficient information to determine whether or not the accused was in a relapsed state during the trial itself," Van Tonder stated.

He added that an accused could be referred as a State patient at any stage during the trial as well as after a conviction.

"A final ruling regarding whether he should be declared a State patient, should not be made at this stage in the interests of the accused. During this time more information can be obtained from the previous legal representatives of the accused as well as from sections of the court records that could indicate if there was a relapsed state. It would be beneficial in the interim for him to receive medical treatment for the bipolar mood disorder in hospital as the disorder is treatable."

State prosecutor Joyleen Mabaso, pointed out that the medical report indicated that at the time of the incident the accused knew that he had committed a wrongful act.

Judge Mpho Mamosebo postponed the case until August 4 and said West End Hospital should advise the court by July 27 if further detention was required and for how long.

"The accused will be detained under the Mental Health Care Act and be managed as an involuntary patient until he is stable enough to stand trial."

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## Texas woman 'murdered her baby son by burying him ALIVE in a shallow grave'

Site

- Narjes Modarresi faces capital murder charges as her trial opened this week
- Attorneys promise to deliver medical evaluations and detail history of unstable behavior
- Mental state could be a factor in sentencing

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By DAILY MAIL REPORTER

PUBLISHED: 20:55 EDT, 14 May 2014 | UPDATED: 01:34 EDT, 15 May 2014

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A Texas woman on trial for the death of her 2-month-old son blames severe bipolar disorder for her deplorable actions.

'You will hear from a doctor who believes that 'but-for' the severe mental illness suffered by Narjes Modarresi, this tragedy would not have occurred,' said Modarresi's defense attorney, George Parnham, in opening statements at the County District Court.

Modarresi, 32, could be sentenced to life without parole if convicted.

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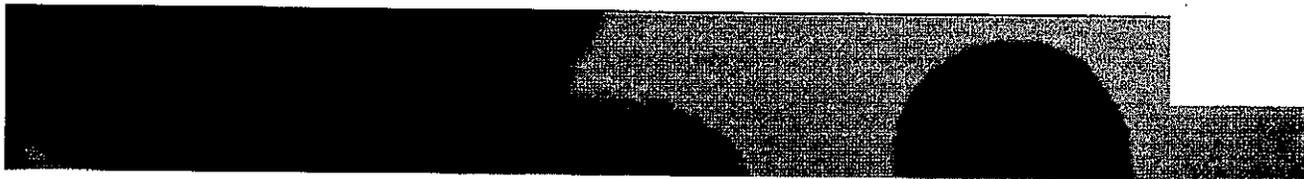
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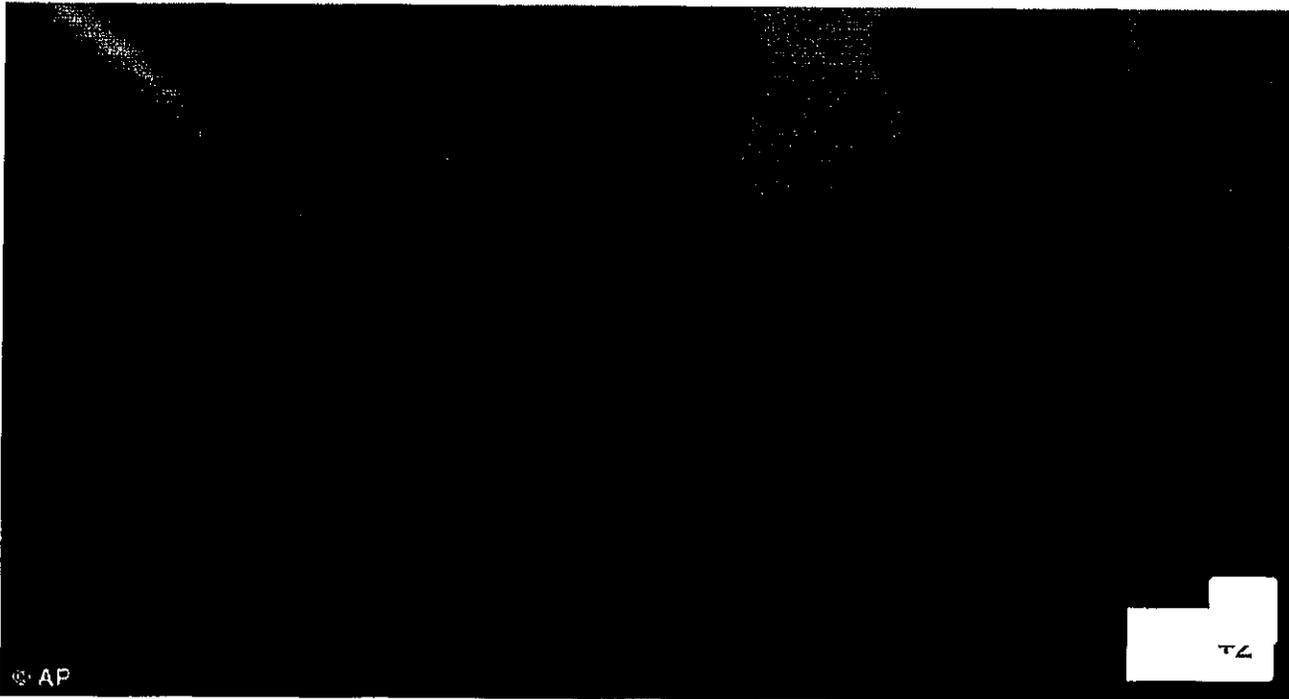
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### Narjes Modarresi, defense claims bipolar disorder drove her to kill her infant son

Prosecutors argue Modarresi's actions were far more calculated.

'She woke up on April 21, 2010 and decided to kill Masih Golabbakhsh,' said Assistant Harris County District Attorney Sunni Mitchell. 'He was a child she never wanted and never loved. He was in her way.'

The baby was her second child. He was killed after being buried facedown in the mud outside West Houston's Buffalo Bayou.

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At first, she claimed two men in a beige Chevrolet kidnapped the boy while she walked him in a stroller.

But according to the **Houston Chronicle**, a neighbor told prosecutors they say her run and crash the stroller, with no baby in it, into a curb on purpose.

30

# Woman pleads guilty to breaking into apartment, attempting to rape man in his sleep

POSTED 3:00 PM, MAY 18, 2015, BY PMALATESTA



*This is an archived article and the information in the article may be outdated. Please look at the time stamp on the story to see when it was last updated.*

SEATTLE — A woman has reportedly been sentenced to nine months in jail after she she was charged with breaking into a man's apartment and raping him while he was asleep.



Chantae Gilman.

The Smoking Gun reports Chantae Gilman, 28, told prosecutors in a plea deal she "made a substantial step to have sexual intercourse" with the victim after breaking into his home back in 2013. She pleaded guilty to attempted rape and assault.

Gilman's plea deal will require her to serve two years of probation upon release from custody, according to the report, and she will be forbidden from contacting the 32-year-old victim.

She will also be required to register as a sex offender.

The victim, who according to The Smoking Gun was identified as just "M.O." in court documents, had come home from the birthday party of someone Gilman knew. When he awoke he found the woman on top of him, attempting to have sexual intercourse.

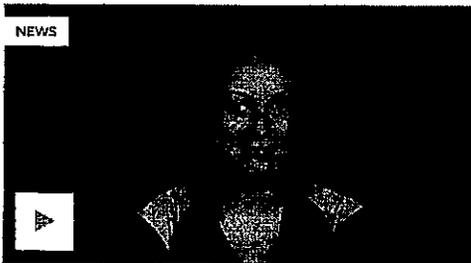
The man told police he told the woman to get off him, but she refused. Gilman continued to assault him until he was eventually able to break free.

"From a statistical standpoint, yes, it is atypical to have a female aggressor," Seattle Police Detective Drew Fowler told KBOI. "But we work to hold all people responsible for their actions. The law is specifically written to be gender-equitable and we will charge anybody with a crime that they're committed."

Gilman initially told police she did not recall the incident and that she suffers from bipolar disorder, according to reports.

The Smoking Gun reported Gilman was pregnant with her third child at the time of the attack.

End Sexual Violence



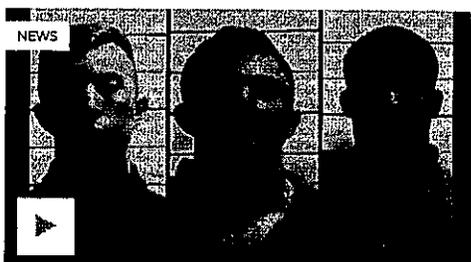
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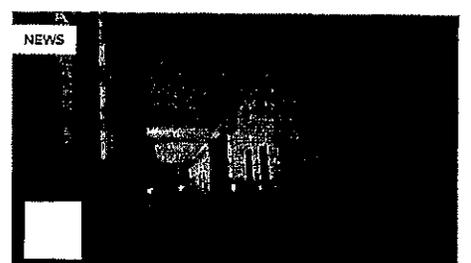
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# Memphis man charged with gouging his father's eyes out

POSTED 8:33 AM, MAY 27, 2015, BY GEORGE BROWN, UPDATED AT 08:28PM, MAY 27, 2015



*This is an archived article and the information in the article may be outdated. Please look at the time stamp on the story to see when it was last updated.*

## Son Attacks Parents Package



MEMPHIS, Tenn. -- A Memphis man was charged with gouging his father's eyes out, then trying to kill him.

Police said Marcia and John Dunlap returned to their Piper Glen Cove home from an out-of-town trip to find their home ransacked and all family photos turned around.

When he went upstairs to confront his 39-year-old son Andrew, Dunlap, 78, was pushed down the stairs.

Andrew Dunlap reportedly then jumped on his father and used his fingers to gouge out his his eyes.

Dunlap's' mother reportedly tried to stop her son, at which time she was attacked.

Eventually the woman was able to get away and get help from a neighbor.

Police said when the neighbor walked into the house, Dunlap stopped attacking his father.

His mother told police Andrew had been diagnosed with as Bipolar and Schizophrenic.

Police found a picture of John Dunlap with a steak knife through it in his office.

Dunlap was arrested and charged with attempted first degree murder and domestic assault.

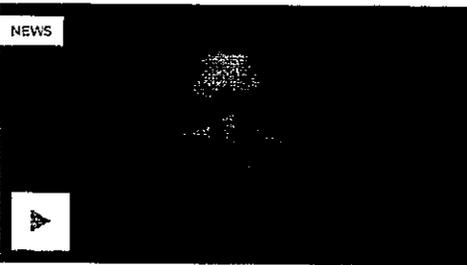
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about 3 years ago

A Memphis man is charged with gouging out his father's eyes and attacking his mother.  
The man was reportedly not taking medications for Schizophrenia and Bipolar disorder.

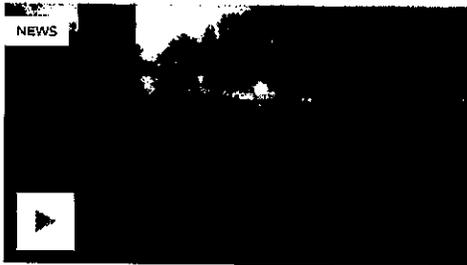


**Police: Memphis man gouged father's eyes out, then attacking his**  
Andrew Dunlap is charged with attempted first degree murder and domestic assault  
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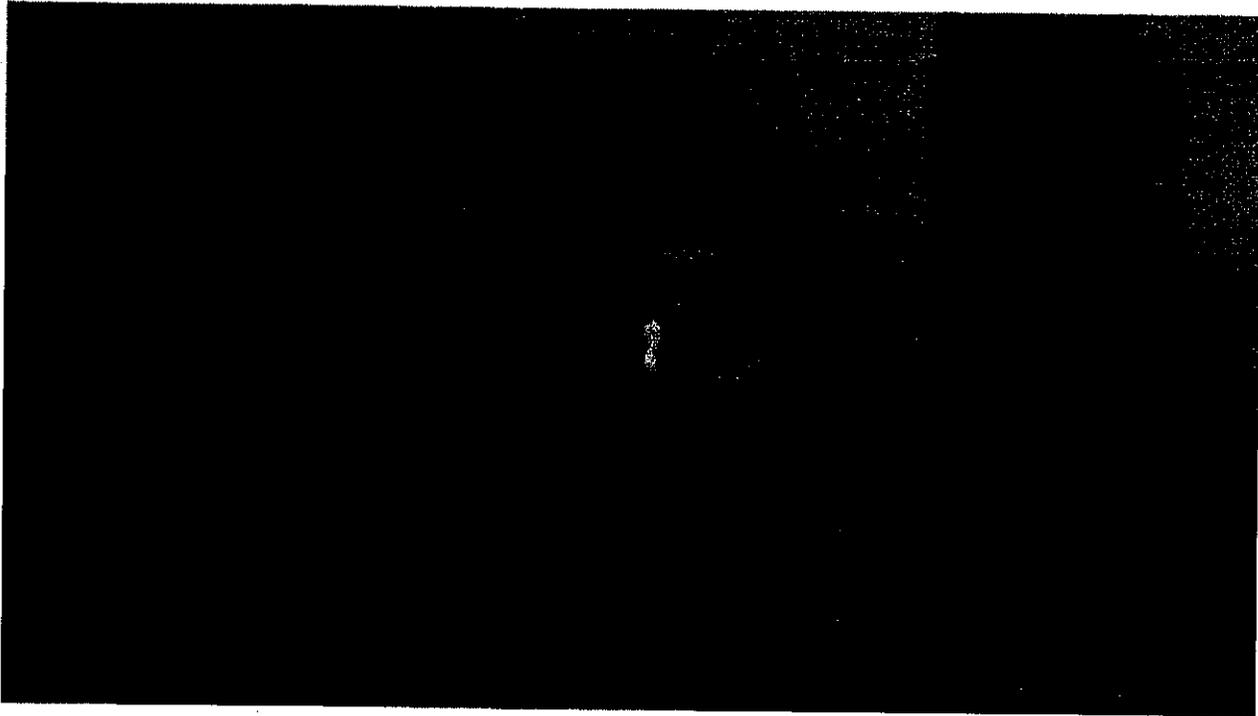


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# Warrant: Suspect in triple murder had been diagnosed as 'paranoid schizophrenic'

By Pat Reavy | Posted Oct 22nd, 2015 @ 7:03pm

1 photo 7

SALT LAKE CITY — A man charged with murdering three people inside a house he rented to them had been diagnosed as "paranoid schizophrenic" over the summer, according to a newly unsealed search warrant affidavit.

Alexander Hung Tran, 32, was charged earlier this month in 3rd District Court with three counts of aggravated murder, a first-degree felony, in the deaths of Heike Poike, 50; Poike's 2-month-old granddaughter, Lyrik Poike; and Dakota Smith, 28.

Prosecutors say all three were shot multiple times.

As Salt Lake police continue to gather information about the case, investigators noted in a search warrant that a bottle of Risperidone was found in Tran's house, 639 N. Sir Phillip Drive (1990 West).

"Risperidone is listed on drugs.com as an 'antipsychotic medication.' In an interview with Tran's parents, as a normal course of the investigation into Tran's personal history, it was learned that Tran had been admitted to University Neuropsychiatric Institute on June 7, 2015, and released on July 7, 2015. According to Tran's mother ... Tran was diagnosed as 'paranoid schizophrenic' and prescribed Risperidone, Wellbutrin, Haldol, Zyprexa and Trazadone," the officer wrote in the affidavit.

The warrant was to find out if Tran was indeed taking those medications, in what dosages, and if he got refills.

Poike rented the upstairs area of Tran's home. According to charging documents, Tran's mother told police she had purchased the home for her son. Four days before the killings, Tran told his mother that people were living upstairs.

"(The mother) indicated she did not want other people in the house, and Tran stated the people would not leave," the charges state. "(The mother) instructed Tran to tell the people to go and stated she would start the eviction process."

Tran called his mother again on the day of the shooting and told her "the people upstairs were gone."

Salt Lake police arrived at the home later that afternoon when Heike Poike didn't pick up her 8-year-old grandson from school. Officers were met by Tran who told them, "I'm putting down the gun," according to the charges.

**Neighbor killed man, grandmother, 2-month-old baby, police say**



Neighbors held a vigil Saturday evening for three victims who were shot and killed Friday in their Salt Lake City home.

"If I think it's my mom's fault and she should be here instead, is there anything I can do?" he allegedly asked the officers. "She made me do it. I'm not saying I didn't do it."

Police were also called to Tran's house on June 7 on a "possible psychotic problem." Tran's stepfather called police that day to report that Tran had acting strangely for a couple of days.

"Today, he took apart a pair of scissors, held the pieces in his hands and started screaming he was Edward Scissorhands. He also brandished several kitchen knives in an alarming manner," according to a Salt Lake police report.

"His mother and stepfather appeared to be extremely frightened of Alex and refused to go back inside the house," the responding officer wrote.

The stepfather and mother told police that he "does not have a history of mental issues or drug problems," according to the police report taken just before Tran was admitted to the psychiatric unit.

## What is schizophrenia?

Schizophrenia is a severe brain disorder in which people interpret reality abnormally. Schizophrenia may result in some combination of hallucinations, delusions, and extremely disordered thinking and behavior.

Source: Mayo Clinic

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## Schizophrenic woman charged with the murder of her grandmother in St Tammany Parish

Updated Aug 24, 2010;

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By **Benjamin Alexander-Bloch**, [NOLA.com](http://NOLA.com), [bbloch@nola.com](mailto:bbloch@nola.com)

The Times-Picayune

A St. Tammany Parish grand jury today charged a 31-year-old schizophrenic woman with second-degree murder fatal stabbing of her 85-year-old grandmother.



Family photo Rita Quaglino, left, and her granddaughter Ashley Von Hadnagy around Mother's Day. The St. Tammany Sheriff's Office booked Ashley Von Hadnagy, of the Covington area, with first-degree murder. The St. Tammany district attorney's office instead Tuesday pursued the charge of second-degree murder and the grand jury agreed.

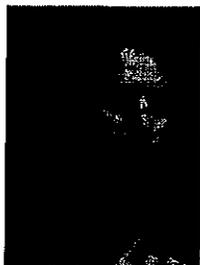
Von Hadnagy stabbed her grandmother, Rita Quaglino of New Orleans, once in the liver with a butcher knife on Tuesday, according to family members and law enforcement authorities. Quaglino died April 12 of complications from the stabbing, according to the Sheriff's Office.

Two days before the stabbing, Von Hadnagy had been released -- despite her mother Sandra Lilly's pleadings for her to keep her committed -- from a private medical health facility, PineGrove, in Hattiesburg, Miss.

At the time of the stabbing, Von Hadnagy was living in her mother's home in the gated Estates of Northpark south of Covington, and Quaglino happened to be staying with them for a week or two.

The moment Von Hadnagy stabbed her grandmother as she slept, Lilly was on the phone with a private Boston institution, hoping that her daughter might find the care she needed there.

Von Hadnagy approached her mother holding the butcher knife, then glanced at the bed beside them, where her grandmother was, raised her arms up high and then plunged the knife into her grandmother's liver, according to law enforcement authorities and Lilly.



St. Tammany Parish Sheriff's Office Ashley Von Hadnagy

Lilly blamed inadequate mental health treatment in the state.

In an unusual move, St. Tammany Parish coroner Peter Galvan pointed fingers only days after Von Hadnagy's a

"There was a great gap in the ability to get what was needed," Galvan said. "There is a pressing need, an emerg to find ways to guarantee access to mental health care, he said.

Galvan took one four-month snapshot of Von Hadnagy's medical history, between October 2008 and February listed four different times protective orders or emergency certificates were issued by the coroner's office, order force addicted or mentally ill individuals to undergo evaluations and treatment in an institutional or hospital se

Eventually, after Von Hadnagy was charged in a series of crimes, concluding in a felony kidnapping charge that the St. Tammany Parish jail, a judge allowed her to be released from jail and sent to a private medical facility. Vc was diagnosed as a schizophrenic at PineGrove, but according to family members, she was released premature

After the incident, several state and local health care providers acknowledged that the mental health system's return patients often may receive only finger-in-the-dam care, short-term fixes to problems that have life-or-de consequences.

A month after the killing, the state Senate passed a bill that would authorize coroners' offices throughout the s provide home-based support and 24-hour mental health care information to residents in their respective parisl spearheaded that legislation.

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**The New York Times** | <https://nyti.ms/2tlQgDn>

U.S.

# 5 Charged With Involuntary Manslaughter in Flint Water Crisis

By SCOTT ATKINSON and MONICA DAVEY JUNE 14, 2017

FLINT, Mich. — By the time Robert Skidmore, an 85-year-old former auto industry worker, died in late 2015, officials had seen signs for months that Flint was wrestling with outbreaks of Legionnaires' disease, prosecutors say. Yet despite a wave of such cases in 2014 and 2015, no public warning was issued until early 2016.

By then, it was too late for Mr. Skidmore and 11 others: a failing so egregious, prosecutors say, that it amounted to involuntary manslaughter.

Five officials in Michigan, including the head of the state's health department, were charged on Wednesday. It is the closest investigators have come to directly blaming officials for the deaths and illnesses that occurred when a water contamination crisis enveloped this city.

The tainted water has been tied to lead poisoning in children and prompted officials to begin a costly, yearslong process of replacing pipes all over the city. Even now, officials recommend that only filtered tap water be consumed, and many residents say they can trust only bottled water, given false assurances they once received from state and local officials.

The latest charges reached farther than before into Michigan's state government, affecting two cabinet-level officials in the administration of Gov. <sup>r</sup>

Snyder and leaving open the possibility that the investigation would go higher still.

Nick Lyon, the director of the Michigan Department of Health and Human Services, was charged with involuntary manslaughter and misconduct in office, felonies that could lead to as much as 20 years in prison. Dr. Eden V. Wells, the chief medical executive for the department, was charged with obstruction of justice and lying to a peace officer, and could face up to seven years if convicted. They are among 15 current and former state and local officials facing criminal charges as a 17-month investigation into Flint's tainted water supply continues.

Before Wednesday, the criminal charges had focused mainly on the lead contamination and, in counts like misconduct in office and willful neglect of duty, on ways that state and city workers had failed to do their jobs.

"The Flint water crisis was and is a failure of leadership," said an investigative report issued on Wednesday by Bill Schuette, Michigan's attorney general. "A cause of the breakdown in state governmental management was a fixation, a preoccupation, with data, finances and costs, instead of placing the health, safety and welfare of citizens first."

Besides, the report found, a solution for Flint's essential water problem was maddeningly simple, and cheap: The addition of common anti-corrosion chemicals could have cost the financially struggling city only \$200 a day.

But officials failed to take that step when they switched the city's water supply in early 2014, the investigators said, partly to save money. Residents began complaining of puzzling colors, putrid odors and an array of rashes and illnesses, which eventually included Legionnaires' disease.

In charging Mr. Lyon, and four others who already faced other charges in the water case, with involuntary manslaughter, Mr. Schuette said they had failed to properly alert the public about increases in Legionnaires' cases, allowing the problem to continue and withholding crucial information from residents, who might have avoided the water had they known.

An examination of government emails from 2014, 2015 and 2016 revealed that officials were aware of the pattern of Legionnaires' cases, but that they failed to act swiftly on the revelations and tended to become mired in jurisdictional battles over protocol and responsibility.

Mr. Lyon knew of the Legionnaires' outbreak by late January 2015, court documents claim, but did not notify the public for another year. At one point, the documents allege, he said that "he can't save everyone" and that "everyone has to die of something."

The charging documents pointed in particular to the death of Mr. Skidmore, the former autoworker, on Dec. 13, 2015. Mr. Schuette said that Mr. Skidmore had been tending to his ailing wife in mid-2015 when he grew ill, apparently from the water.

According to the charges, Mr. Lyon's "acts and failure to act resulted in the death of at least one person," Mr. Skidmore. The documents asserted that Mr. Lyon "willfully disregarded the deadly nature" of the Legionnaires' outbreak and "exhibited gross negligence when he failed to alert the public about the deadly outbreak and by taking steps to suppress information illustrating obvious and apparent harms that were likely to result in serious injury."

Defense lawyers for Mr. Lyon called the claims baseless and said they were confident in their client's case. One challenge for prosecutors may be proving a direct link between Flint's corroding water pipes and Legionnaires' disease, legal experts said. Some scientists have suggested that the corrosion may have allowed Legionella bacteria to thrive in the water supply during warm summer months.

"The true facts simply do not support the prosecution's claims," the defense lawyers, Chip Chamberlain and Larry Willey, said in a statement. "This case appears to be a misguided theory looking for facts that do not exist."

Governor Snyder, too, issued a statement of support for Mr. Lyon and Dr. Wells, and appeared to criticize the legal process, noting that other state employees had been charged more than a year ago but had yet to be tried in court.

“That is not justice for Flint, nor for those who have been charged,” Mr. Snyder said. “Director Lyon and Dr. Wells have been and continue to be instrumental in Flint’s recovery. They have my full faith and confidence, and will remain on duty at D.H.H.S.”

Mr. Schuette, a Republican, is widely seen as a possible candidate for governor in 2018. He declined to say whether the investigation might lead to charges against Mr. Snyder, though he emphasized that it was continuing and that the investigative report issued on Wednesday was an “interim” look at the Flint case. He said investigators had tried unsuccessfully to interview Mr. Snyder, who is barred by term limits from running for re-election, but he would not elaborate.

“We only file criminal charges when evidence of probable cause to commit a crime has been established, and we are not filing charges at this time,” Mr. Schuette said.

Mr. Snyder’s lawyer said that the governor has always been willing to be interviewed — but under oath, like other witnesses, to avoid any appearance of special treatment.

“We have repeatedly told the Office of Special Counsel that when they provide an investigative subpoena the governor will provide additional testimony under oath,” the lawyer, Brian Lennon, said in a written statement.

Mr. Skidmore, whose death is at the center of the five counts of involuntary manslaughter issued on Wednesday, was found to have Legionnaires’ disease in June 2015, after he went to a hospital with pneumonialike symptoms.

“It’s a very tragic story,” Mr. Schuette said, adding later, “The family had to bury their mother and their father.”

Mr. Skidmore’s wife of more than six decades died only weeks after he became ill, and Mr. Skidmore continued to fight his symptoms on top of grief, his family said.

“Grandma died. Six months later, after bouncing between the hospital, home care and back, he passed away,” said Megan Skidmore Cuttitta, his granddaughter. “Each time he went to the hospital, he’d get better, but each time he came home, he got worse.”

Scott Atkinson reported from Flint, Mich., and Monica Davey from Chicago. Susan C. Beachy contributed research from New York.

A version of this article appears in print on June 15, 2017, on Page A1 of the New York edition with the headline: Manslaughter Is Charge for 5 In Flint Crisis.

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# Flint water crisis: 5 officials now face manslaughter charges

Elisha Anderson, John Wisely and Paul Egan, Detroit Free Press Published 11:16 a.m. ET June 14, 2017 | Updated 5:32 p.m. ET June 15, 2017



(Photo: Ryan Garza, Detroit Free Press)

Michigan Attorney General Bill Schuette today filed new, more serious charges in the Flint Water Crisis investigation, but also said the case is shifting to a new phase.

"We will turn to the prosecution of this investigation," Schuette said at a news conference in Flint this morning. "We are confident that the charges that we have filed will be upheld in the courts."

Schuette's statement came after he announced involuntary manslaughter charges against Nick Lyon, director of the Michigan Department of Health, as well as Darnell Earley, Flint's former emergency manager; Howard Croft, the city's former director of public works; Liane Shekter-Smith, the state's former top drinking water official and water supervisor Stephen Busch of the Department of Environmental Quality.

Those charges, felonies punishable by up to 15 years in prison, stem from the death of 85-year-old Robert Skidmore, whose December 2015 death is tied to the Legionnaire's Disease outbreak in Flint.

State officials, they said, knew about the outbreak but refused to sound a public alarm that could have saved lives. At least 12 people died from complications related to the outbreak.

In all, 15 people have been charged with 51 counts. Two have plead no contest to lesser charges and agreed to help with the investigation, but none of the cases have gone to court yet.

Todd Flood, a former Wayne County Prosecutor who is serving as special counsel in the investigation, said today's charges stem from the deadly inaction of government officials.

"There are two types of people: those who give a damn and those who don't," Flood said. "I have run across many public servants who do care, but this is a case where there is willful disregard."

Andrew Arena, a former head of the Detroit FBI branch who is serving as lead investigator, said he began the probe thinking perhaps people just made mistakes, but concluded otherwise as the investigation continued.

"Many people attempted to do what is right," Arena said. "People didn't just make mistakes, they willfully and intentionally failed to do what they were supposed to do."

And Schuette said that while no charges currently are planned against Gov. Rick Snyder, his investigation continues, and "we have attempted to interview the governor," but "we were not successful."

### More Flint water crisis coverage:

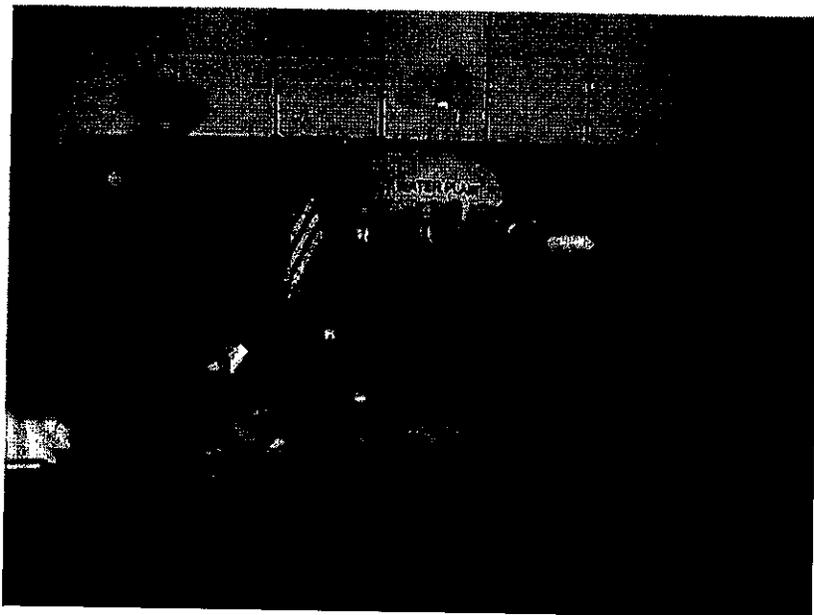
[Michigan health director Nick Lyon, 4 others charged with involuntary manslaughter over Flint water \(/story/news/local/michigan/flint-water-crisis/2017/06/14/charges-flint-water-crisis-nick-lyon/395267001/\)](#)

[Flint water crisis: 5 officials face manslaughter charges \(/story/news/local/michigan/flint-water-crisis/2017/06/14/flint-water-crisis-manslaughter-charges/396075001/\)](#)

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Attorney General Bill Schuette announces new charges against two high-ranking state health officials in the fourth round of criminal charges in the Flint drinking water crisis on Wednesday June 14, 2017 during a press conference at Riverfront Banquet Center in downtown Flint. (Photo: Ryan Garza, Detroit Free Press)

**Here are the list of additional charges announced today:**

Michigan Health and Human Services Director Nick Lyon is charged with involuntary manslaughter and misconduct in office, both felonies.

Chief Medical Executive Eden Wells is charged with obstruction of justice and lying to a police officer.

Four defendants charged earlier -- former Flint emergency manager Darnell Earley, former Michigan Department of Environmental Quality drinking water chief Liane Shekter-Smith; DEQ drinking water official Stephen Busch; and former City of Flint Water Department manager Howard Croft -- were each charged with involuntary manslaughter.

All of the new charges are in connection with the Legionnaires' disease outbreak in the Flint area that led to 12 deaths after the city's water supply was switched to the Flint River in April 2014.

**Read more Free Press coverage of the Legionnaires' disease outbreak:**

[Read the Free Press investigation from April 2016: Why were officials silent on Legionnaires' in Flint? \(/story/news/local/michigan/flint-water-crisis/2016/04/09/flint-water-crisis-legionnaires/82397428/\)](#)

[Here are all the victims of the Legionnaires' disease outbreak in Flint \(/story/news/local/michigan/flint-water-crisis/2016/04/09/biographies-legionnaires-disease-flint-area/82478182/\)](#)

[Database: Search all of the Legionnaires' disease cases by county \(/story/opinion/contributors/raw-data/2016/04/09/legionnaires-disease-cases-michigan-flint/82761264/\)](#)

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**EDITOR'S NOTE:** Here is the full news release sent by Michigan Attorney General Bill Schuette this morning regarding five people charged with involuntary manslaughter in the Flint water crisis.

FLINT – Michigan Attorney General Bill Schuette today announced that he has charged Michigan Department of Health and Human Services Director Nick Lyon, former Flint Emergency Manager Darnell Earley, former City of Flint Water Department Manager Howard Croft as well as Michigan Department of Environmental Quality's Drinking Water Chief Liane Shekter-Smith and Water Supervisor Stephen Busch with involuntary manslaughter related to their alleged failure to act in the Flint Water Crisis.

Involuntary manslaughter is punishable by up to 15 years in prison, and/or a \$7,500 fine.

In addition to the involuntary manslaughter charges, Schuette also charged Lyon with Misconduct in Office, a felony, subject to 5 years in prison and/or a \$10,000 fine.

MDHHS Chief Medical Executive Eden Wells has also been charged with lying to a peace officer and obstruction of justice related to an alleged attempt to stop an investigation into the health crisis in Flint and later misleading investigators as to her actions.

Schuette was joined at the announcement by Genesee County Prosecutor David Leyton, Flint Water Investigation Special Prosecutor Todd Flood, and Chief Investigator Andrew Arena.

#### INVESTIGATION INTERIM REPORT

With more than a dozen people now having been charged, and pre-trial hearings and other legal proceedings occurring, Schuette released the initial results of the more than yearlong investigation. Included in the report is a comprehensive look at today's and past charges made, as well as a review of the facts and evidence in the case.

**NOTE: The report is attached to this press release.**

#### DEFENDANTS

Multiple Flint-area residents died of Legionnaires' disease in the time immediately following the switch from Detroit Water and Sewer Department to the Flint River. All defendants charged with involuntary manslaughter are charged in relation to the death of Robert Skidmore, 85, of Mt. Morris, Michigan. Skidmore died of Legionnaires' disease after many others had been diagnosed with the illness, yet no public outbreak notice had been issued. The charges allege failure to notify and lack of action to stop the outbreak allowed the disease to continue its spread through Flint's water system.

#### NICK LYON

As the Director of the Michigan Department of Health and Human Services, a position whose duties are outlined in the Michigan Constitution, Lyon has a duty to protect public health. The investigation has shown that Lyon allegedly received notice of a deadly Legionnaires' Disease outbreak in Genesee County nearly one year before he informed the public. After being informed about a potentially fatal health risk, Lyon allegedly deliberately failed to inform the public of a deadly Legionnaires' Disease outbreak, which resulted in the death of Robert Skidmore. Furthermore, Lyon allegedly participated in covering up the source of Genesee County's Legionnaires' Disease outbreak by repeatedly attempting to prevent an independent researcher from looking into the cause of the outbreak.

#### Charges:

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] **FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.**

**COUNT 2 – MISCONDUCT IN OFFICE** Did between February 2015 and May 2017, commit misconduct in office, an indictable offense at common law, in violation of his duty to protect the health of the citizens of the County of Genesee, State of Michigan and to protect the public health enjoined upon him by the Michigan Public Health Code, MCL 333.5111(1); MCL 333.5111(2)(f); MCL 333.2251(1); MCL 333.2251(3); and MCL 333.20531 and the Critical Health Problems Reporting Act; contrary to MCL 750.505. [750.505] **FELONY: 5 Years and/or \$10,000.00.**

#### EDEN WELLS

As the Chief Medical Executive of the Michigan Department of Health and Human Services, Dr. Eden Wells has a responsibility to protect the health and welfare of Michigan residents. During the course of the investigation of the Flint Water Crisis, it is alleged that Wells

attempted to withhold funding for programs designed to help the victims of the crisis, and then lied to an investigator about material facts related to the investigation.

**Charges:**

**COUNT 1 – OBSTRUCTION OF JUSTICE** Did commit the common law offense of obstruction of justice by knowingly providing false testimony to a Special Agent and by threatening to withhold funding for the Flint Area Community Health and Environment Partnership if the partnership did not cease its investigation into the source of the Legionnaires' Disease outbreak in Flint, Michigan; contrary to MCL 750.506 FELONY: 5 Years or \$10,000. DNA to be taken upon arrest.

**COUNT 2 – LYING TO A PEACE OFFICER – 4 YEAR OR MORE CRIME INVESTIGATION** After being informed by Special Counsel Todd Flood, in the presence of Special Agent Arthur Wimmer, that they were conducting a criminal investigation, did knowingly and willfully make a statement or statements to the officer that he or she knew was false or misleading regarding the following material fact or facts relating to the investigation: the date she knew of the Legionnaires' Disease outbreak in Flint, Michigan, and the officer was conducting a criminal investigation regarding involuntary manslaughter; contrary to MCL 750.479c(2)(c). [750.470C2C]. HIGH COURT MISDEMEANOR: 2 Years and/or \$5,000.00.

**STEPHEN BUSCH**

Stephen Busch served as the Michigan Department of Environmental Quality District 8 Water Supervisor, a position which would have allowed him to order the Flint Water Treatment Plant be shut down because it was not producing safe water. In January of 2015, Busch was made aware of the Legionnaires' Disease outbreak, yet he allegedly represented to the public that Flint's drinking water was safe.

Busch was previously charged with felony Misconduct in Office, Tampering with Evidence, Conspiracy to Tamper with Evidence, and two misdemeanor counts for both a treatment and monitoring violation of the Michigan Safe Water Drinking Act.

**Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**LIANE SHEKTER-SMITH**

As the Chief of the Office of Drinking Water and Municipal Assistance at the Department of Environmental Quality, Shekter-Smith had the ability to order the Flint Water Treatment Plant shut down for failure to produce safe water.

Shekter-Smith was previously charged with a felony of Misconduct in Office and a misdemeanor charge of Willful Neglect of Duty.

**Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**HOWARD CROFT**

As Director of Public Works for the City of Flint, Croft had the ability to mandate changes to the treatment processes at the WTP to ensure proper disinfection was occurring, or switch back to DWSD. Mike Glasgow, former Flint Water Treatment Plant Operator, was allegedly pressured by Croft to start using the Flint Water Treatment Plant. Croft's alleged failure to treat the water properly contributed to the bacterial outbreaks found in Flint, including the legionella in the spring of 2015.

Croft was previously charged with felony False Pretenses and Conspiracy to Commit False Pretenses.

**Charges:**

**COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY** Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrary to MCL 750.321. [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**DARNELL EARLEY**

As an appointed Emergency Manager for the City of Flint, Earley was tasked with ensuring the health and welfare of the City. During his terms as Emergency Manager, Earley contributed to the decisions that allegedly caused the death of Robert Skidmore by keeping the City on the water source even as it became obvious the source should be switched back to Detroit Water & Sewer.

Earley was previously charged with felony False Pretenses, Conspiracy to Commit False Pretenses, Misconduct in Office and a misdemeanor charge of Willful Neglect of Duty.

**Charges:**

COUNT 1 – HOMICIDE – MANSLAUGHTER – INVOLUNTARY Did cause the death of Robert Skidmore on December 13, 2015, by failing to alert the public about a Legionnaires' Disease outbreak in Flint, Michigan when he had notice that another outbreak would occur; contrari to MCL 750.321, [750.321-C] FELONY: 15 Years and/or \$7,500.00. DNA to be taken upon arrest.

**A criminal charge is merely an accusation and the defendants are presumed innocent until proven guilty.**

Read or Share this story: <http://on.freep.com/2t1Kvv3>

## Deborah Tomlinson

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**From:** DAVID LURIE <dlurie2001@comcast.net>  
**Sent:** Friday, June 01, 2018 11:19 AM  
**To:** Deborah Tomlinson  
**Cc:** Walt Czapiga  
**Subject:** Letter for the Planning Commissioners  
**Attachments:** GVB Letter to Planning Comissioners Rev5-31.pdf

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Dear Debbie:

Please add the attached letter from the Board of Directors from Grandview Beach to the Heritage Cove Farm record for the Public Hearing  
(<http://is0.gaslightmedia.com/cheboygancounty/ ORIGINAL /fs13-1527012821-53525.pdf>).

Please send me an email to confirm receipt of this letter.

Thanks Debbie!

Dave Lurie - [dlurie2001@comcast.net](mailto:dlurie2001@comcast.net) 248-224-0752

June 1, 2018

To the Cheboygan County Planning Commissioners:

On January 6, 2016, the Cheboygan County Planning Commission approved, with specific conditions, the development of a facility on Grandview Beach to treat up to 24 severely mentally ill adults. One of the conditions described in this decision is scheduled to be discussed at a Public Hearing on June 6, 2018. It is the requirement for an impact study on police, fire and ambulance to be conducted. This condition was reinforced by the Michigan Court of Appeals in their decision in January 2018.

Specifically, in their January 6, 2016 decision, 18.7.e stated that... "The Planning Commission finds that, if a special land use permit were to be granted, such approval should be conditioned on the results of a **police, fire and ambulance impact study** to determine whether this standard has been met by the Applicant."

Also, Zoning Ordinance under 18.7.e states, "*The proposed special land use will not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.*"

Further, the Michigan Court of Appeals decision stated... "*The Commission conditioned the Farm's special use permit on the results of a police, fire, and ambulance **impact study**. The actual modification was allowing intervenors to request police comment after the fact and to demonstrate the requirements of § 18.7.e were met through a study rather than requiring them to demonstrate that their demands would not exceed service capacity as part of their application.*

*The record before us does not include the results of the impact study. It is unclear whether the study has been conducted yet or if intervenors have requested comment on the safety issue from the police and sheriff's departments. Further, while the Commission indicated that intervenors should be accommodated even if there is an increased burden on law enforcement, considering the Commission's decision as a whole, we do not read this as suggesting that any increase, no matter how great or unreasonable the resulting cost, should be accommodated. Instead, at this juncture, the Commission has merely given conditional approval for the special use permit and, **until the study is completed, the law enforcement issue remains unresolved.** When the impact study has been completed and comments from law enforcement elicited, the Commission will have to consider whether there will be an increased burden beyond the "current capacity" under § 18.7.e and whether such an increase, if any, must be allowed as a reasonable accommodation. **At that time, the Commission's decision on this issue may be challenged.** In short, our decision should not be read to suggest that any increase in the demands on fire, police, or other public resources is permissible under § 18.7.e or that any such increase must be allowed as a reasonable accommodation. "*

Grandview Beach Association **has not seen nor is aware of any impact study** that has been conducted by police, fire and ambulance as specifically requested by Planning Commissioners and the Michigan Court of Appeals. A definition of the word "study" is "a detailed investigation and analysis of a subject or situation." Certainly, general comments from police, fire and ambulance regarding a verbal description of a so-called therapeutic farm do not constitute a study. In fact, the Tuscarora Township Police Chief who is responsible for first response said his previous comments did NOT constitute an impact study. **A study should, at a minimum, consider the written safety and security plans, staffing plans, medication delivery plans of the facility as well as to seek input from those neighbors who directly or closely abut**

**this development. And, an impact study must document the hazards or dangers to adjacent homeowners, that is, Grandview Beach residents.**

In addition, Condition #5 from the Planning Commission approval states "Request comment on roadway, trail and safety issues from Tuscarora Township Police, Cheboygan County Sheriff and Cheboygan County Road Commission." **No one from the police or sheriff departments has contacted the residents whose property abuts this development (which includes Grandview Beach Association) to learn about their safety concerns in order to knowledgeably comment.**

The Zoning Ordinance of Cheboygan County, Section 1.2 states "**The purpose of this ordinance is to promote and safeguard the public health, safety, morals and general welfare of the people of...Cheboygan County.**" The same section also states that the Zoning Ordinance is intended to "**reduce hazards to life and property.**" Since the purpose of the Planning Commission is to promote and safeguard our safety, it would **demonstrate willful and gross negligence to approve any development that would endanger our safety.** Moreover, each Commissioner is personally responsible to insure they do everything possible to safeguard our safety.

There is a huge body of literature proving that adults with severe mental illness are more likely to commit acts of violence. We could fill thousands of pages with these studies, some of which were in the original record of the first Public Hearing. After reading these factual studies there is no way, unless they are politically compromised, that a person would not understand that Heritage Cove Farm represents a hazard to adjacent neighbors. We have presented a handful for your consideration:

- There were statistically significant increases of risk of violence in schizophrenics and bipolar disorder in comparison with the general population. (From an article entitled Violence in Schizophrenia and bipolar disorder – March 2013).
- There is now robust evidence demonstrating that both men and women with schizophrenia are at elevated risk when compared to the general population to engage in violence towards others. (Wallace et al 2004)
- Alcohol or other drug abuse problems combined with poor adherence to medication may signal a higher risk of violent behavior among persons with severe mental illness. (Am J Psychiatry 1998)
- Various well-designed studies conducted after a period of deinstitutionalization show an increased rate of physical violence among mentally ill patients after controlling for possible confounding variables (Swanson et al. 1990; Hodgins 1992; Link et al. 1992; Torrey 1994; Hodgins et al. 1996).
- The MacArthur Violence Risk Assessment Study found that 31% of people who had both a substance abuse disorder and a psychiatric disorder (a "dual diagnosis") committed at least one act of violence in a year, compared with 18% of people with a psychiatric disorder alone.
- Severely mentally ill individuals who are NOT taking their medication ARE more dangerous than the general population. (Violence and Mental Illness 2017)
- Male schizophrenic patients were five times more likely to have been convicted of violent crimes, 2-1/2 times more likely to have been convicted of crimes against property, and almost 3 times more likely to have violated drug laws. (Schizophrenia Bulletin Volume 22, 1996 and also reported by the National Institute of Health)

- Patients with serious mental illness (e.g schizophrenia, major depression or bipolar disorder) were 2 to 3 times as likely as people without such illness to be assaultive. (Anderson and West National Institute of Health, 2011).
- In a survey of 115 of psychiatrists that “72 percent of assaultive patients had schizophrenia or another psychotic disorder.” (Anderson and West, NIH, 2011).
- According to a US Department of Justice National Crime Victimization Survey, the rate of violence directed toward mental healthcare professionals and custodial workers was almost 70 per thousand compared with 12.6 per 1000 workers in all occupations.

In addition, there are an untold number of anecdotal stories in local and national newspapers demonstrating the violent behavior of adults with severe mental illness. Here are a few headlines:

- Man in Stage Run Drive Murder-Suicide case had bipolar disorder (May 16, 2015 Chattanooga)
- Man diagnosed with bipolar convicted of murder in father’s shooting (June 8, 2014 Bakersfield, CA)
- Indianapolis man pleads guilty in connection with death of grandmother was treated for schizophrenia (April 21, 2017 Fox59).
- Schizophrenic sentenced to 60 years for clinic murder (November 1, 2016 Anchorage, AK).
- Double murder of parents drawing attention to schizophrenia (December 1, 2014 San Diego NBC 7)
- Batavia murder suspect says she’s bipolar (July 13, 2014 Daily Herald)
- Bipolar murder accused to stand trial (June 8, 2015 IOL News)
- Memphis man charged with gouging out his father’s eyes (May 25, 2015 Channel 3 News)
- Suspect in triple murder had been diagnosed as ‘paranoid schizophrenic.’ (October 22, 2015 Salt Lake City)
- Schizophrenic woman charged with the murder of her grandmother in St. Tammany Parish (August 24, 2010, New Orleans nola.com)

Also, more and more police and first responders are receiving training and updating their protocols for dealing with the mentally ill. Here are some references:

- A growing number of people with severe mental illnesses are coming into contact with the criminal justice system sometimes with deadly results. Many police departments have put in place training for officers on how to deal with mentally ill patients. (NY Times April 18, 2018)
- Why police calls involving the mentally ill often ends in tragedy. “...you don’t blame the officers, you blame the training they receive.” (Washington Post December 31, 2015)
- When interactions between police officers and mentally ill people spin out of control, it’s often because conventional police training directly clashes with effective tactics for resolving a typical mental health crisis according to Ronald Honberg of the National Alliance on Mental Illness.
- Mental health experts say most police departments need to **quadruple** the amount of training that recruits receive for dealing with mentally ill, requiring as much time in the crisis-intervention classroom as police currently spend on the shooting range.
- Lincoln, NE Police Department teaches advanced training for increasing mental health calls. (January 29, 2018)

- The Portland OR Police Department has the Behavioral Health Response Teams (BHRT) that pairs a patrol officer and a licensed mental health professional from Cascadia Project Respond.

Knowing, without a doubt, that adults with severe mental illness are more likely to commit acts of violence, for **the Planning Commission to give final approval to this development without approving and funding all of the resources necessary to insure the safety of Grandview Beach residents would be evidence of willful and gross negligence on the part of each Cheboygan County Planning Commissioner**, much like the staff in Flint, MI who were grossly negligent of harming the safety of its residents by lead poisoning. To the extent that Commissioners do not perform their duties “to promote and safeguard public health, safety...” of its citizens, they will be fully and personally responsible for consequences.

**We ask that a thorough impact study be done that includes a review of the behavioral literature of mentally ill adults, a review of best practices of police, fire and EMS when it comes to serving a substantial concentrated population of severely mentally ill adults including interviews with residents who are located so very close to this development.** We must to be assured that the safety and health of each and every resident of Grandview Beach and its visitors will not be negatively affected in any way by the development of this facility. We want the Planning Commissioners to do their job.

Signed,

Grandview Beach Board of Directors

David Lurie – President

Walt Czapiga – Vice President

Judy Boyer – Treasurer

Jeff Brancheau – Director

Bill Hahn – Director

Roger Harris – Director

Tom Mangum – Director

Pat Monette – Director

Julie Osterlund – Director

Chris Tucker – Director

Steve Winchell - Director

## Deborah Tomlinson

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**From:** John Mandelaris <johnmandelaris@gmail.com>  
**Sent:** Sunday, June 03, 2018 2:06 PM  
**To:** Deborah Tomlinson  
**Subject:** Heritage Cove Farm

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Cheboygan County Planning Commission:

Please let me introduce myself. I am a member of the Genesee County Metropolitan Planning Commission, and have been a member for the past six years. I also have a small cabin on Grand View Beach, not far from the above referenced proposed business (spot zoning?). This quiet residential lake front community has been the same for over fifty years. Now, there has been this proposed business venture wants to establish a mental health residential treatment facility in the community disrupting the character of the vicinity and placing potentially harmful inmates therein. This will have an immediate impact resulting in lower property values, which will result in lower property value assessments, which will result in lower taxes, which will result in reduced public services. Also, the asphalt road leading into Grand View Beach is in bad shape and will certainly deteriorate due to increased traffic and heavy construction vehicles utilizing that road. Your impact report should include these concerns. There are many other locations in the Township better suited to the objectives of the applicants and the individuals to be served. There is no need to "shoehorn" a business operation into the residential community which would destroy the present tranquility of the community and present a hazard to the safety of the public, as described in earlier hearings. You have to enforce the master plan of your County which was properly adopted after much research. Do your duty to your residents. Thank you for your attention. John G. Mandelaris 487 Grand View Beach, Tuscarora Township.

## Deborah Tomlinson

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**From:** DAVID LURIE <dlurie2001@comcast.net>  
**Sent:** Friday, June 01, 2018 11:25 AM  
**To:** Deborah Tomlinson  
**Cc:** Walt Czapiga  
**Subject:** Fwd: Impact Study for Heritage Cove Farm

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Dear Debbie - please add this email that I sent to Sheriff Clarmont on April 25th to the Heritage Cove Farm record for the upcoming Public Hearing. Please confirm receipt of this email.

Thanks,

Dave Lurie - [dlurie2001@comcast.net](mailto:dlurie2001@comcast.net) 248-224-0752

----- Original Message -----

From: DAVID LURIE <dlurie2001@comcast.net>  
To: sheriff@cheboygancounty.net  
Cc: Dave Lurie <dlurie2001@comcast.net>, "Howard, Scott" <Scott@envlaw.com>, adminlawson@cheboygancounty.net  
Date: April 25, 2018 at 10:28 AM  
Subject: Impact Study for Heritage Cove Farm

Dear Sheriff Clarmont:

The Cheboygan County Planning Commission, supported by the Michigan Court of Appeals on January 16, 2018, made an “**impact study**” a condition of the Special Use Permit granted to Heritage Cove Farm.

The pertinent Michigan Court of Appeals verbiage appears below:

*The record before us does not include the results of **the impact study**. It is unclear whether the **study** has been conducted yet or if intervenors have requested comment on the **safety issue** from the police and sheriff's departments. Further, while the Commission indicated that intervenors should be accommodated even if there is an increased burden on law enforcement, considering the Commission's decision as a whole, we do not read this as suggesting that any increase, no matter how great or unreasonable the resulting cost, should be accommodated. Instead, at this juncture, the Commission has merely given conditional approval for the special use permit and, until the **study** is completed, the law enforcement issue remains unresolved. When the **impact study has been completed** and comments from law enforcement elicited, the Commission will have to consider whether there will be an increased burden beyond the “current capacity” under 18.7.e and whether such an increase, if any, must be allowed as a reasonable accommodation.*

The dictionary defines the word “study” as a “detailed investigation and analysis of a subject or situation.”

**In your letter to Planning Commission you stated that Heritage Cove Farm will be modeled after Gould Farm. You also said you reviewed the Gould Farm website and attended meetings held by Heritage Cove Farm.**

**A detailed investigation of Gould Farm would reveal the following information: Gould Farm is on 700 acres in the Berkshire Mountains of Massachusetts. This is slightly more than 1 square mile. Heritage Cove Farm is located on 33 acres. Gould Farm has no homes located closer than ½ mile or more. And the closest home is one farmhouse. Heritage Cove Farm has at least 80 residences located within ½ mile, including one family just 150 feet away. During the summer, this means HUNDREDS of people reside in close proximity. Gould Farm has no water (other than small ponds) on their property. Heritage Cove Farm has more than 1,000 feet of lakefront. Patients at Heritage Cove Farm will have complete access to this lakefront 12 months a year. Gould Farm has no bike/snowmobile path anywhere near their property. Heritage Cove has a popular trail that residents and visitors use most of the year. Clearly, while you were told that Heritage Cove Farm is modeling their facility after Gould Farm, the two facilities are so very different and dissimilar.**

The residents of Grandview Beach whose property adjoins this proposed facility of 24 severely mentally ill adults want to make sure that you have carefully studied the written safety and security at Heritage Cove Farm as part of your analysis. We also want to make sure that this impact study would carefully consider the protocols in managing the safety issues related to severely mentally ill adults who are not required to take their prescribed medications (only “reminded.”).

It is reasonable to think that any impact study would include the careful study of the perimeter of the facility, including the more than 1000 feet of waterfront and the bike/snowmobile trail, to make sure that the adults being treated who may suffer from severe schizophrenia, bipolar and depression as well as the dual diagnosis of drug abuse are properly protected as well as the protection of the facility staff and Grandview Beach residents and visitors.

Based on studies conducted by many other police departments in Michigan and around the US, there are specific protocols that have been established and are in use to deal with the demanding and complex needs of the severely mentally ill. The link for you to review one such report is <https://www.portlandoregon.gov/police/article/534091>. As far as we know, there is no other facility in Tuscarora Township that will house and treat 24 severely mentally ill adults, so it is reasonable to think that there should be a careful study of police protocols and training to deal with a facility like this to ensure the best outcomes possible.

We ask you to send a letter to the Cheboygan County Planning Commission stating that the letter you sent does not constitute an **impact study** and that you will need additional time and information in order to do a proper **study**. I would be happy to discuss this with you on the phone or in person if you would like.

Respectfully,

Dave Lurie - President, Grandview Beach Association - 248-224-0752

Scott Howard - Attorney for the Grandview Beach Association

## Deborah Tomlinson

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**From:** Andreae, Mark <MAndreae@clarkepsi.com>  
**Sent:** Friday, June 01, 2018 11:42 AM  
**To:** Deborah Tomlinson  
**Subject:** Heritage Cove Farm

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

To Whom It May Concern, please accept this as my objection to the reclassification of the property on grand View Beach to allow a mental health facility. I do not believe it is safe for this facility to be in the middle of a residential neighborhood . Mark M Andreae 199 S. Grandview beach rd.

**CONFIDENTIALITY NOTICE:** The information contained in this email is intended for the exclusive use of the individual or entity to whom it is addressed. If you are not the intended recipient, you are prohibited from using, disseminating, distributing, or copying this communication. If you have received this email in error, please notify sender. (Disclaimer posted by 722HGC5dXXQ169)

162-006-200-001-31

LAFFERTY, DANIEL & SHERRIE H/W  
22179 BEECH DALY RD  
FLAT ROCK, MI 48134-9590

162-006-400-006-00

PUGH, DALE & DEBRA H/W  
697 GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-006-400-001-00

MICHIGAN DEPT OF NATURAL RESOURCES  
PO BOX 30722  
LANSING, MI 48909

162-005-300-001-00

TOLAS, PETRO J ET AL  
306 E BROADWAY ST, STE #1  
MOUNT PLEASANT, MI 48858

162-005-100-002-00

GRANDVIEW BEACH ASSOCIATION  
7235 GEARY RD  
HARBOR SPRINGS, MI 49740

162-006-400-004-00

HANSON, LAWRENCE P & ELIZABETH H/W  
PO BOX 456  
INDIAN RIVER, MI 49749

162-006-400-007-01

PUGH, DALE & DEBORAH H/W  
697 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-005-300-002-01

MONETTE, PATRICK & MARCIA, TTEES  
4700 GRACE BEACH RD  
INDIAN RIVER, MI 49749

162-005-100-015-00

GRANDVIEW BEACH ASSOCIATION  
7235 GEARY RD  
HARBOR SPRINGS, MI 49740

162-005-100-001-01

MICHIGAN DEPT OF NATURAL RESOURCES  
PO BOX 30722  
LANSING, MI 48909

162-006-400-005-00

LIB LIB INC.  
625 S GRANDVIEW BEACH RD, PO 456  
INDIAN RIVER, MI 49749

162-006-200-001-30

KARAS, PHILIP J ET UX  
35830 DEVEREAUX  
CLINTON TOWNSHIP, MI 48035

162-005-300-002-00

HANSON, LAWRENCE & ELIZABETH H/W  
625 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-005-100-014-00

GRANDVIEW BEACH ASSOCIATION  
7235 GEARY RD  
HARBOR SPRINGS, MI 49740

162-005-100-012-00

HART, JUDD & ALICIA TTEES  
3900 OAKHILLS DR  
BLOOMFIELD HILLS, MI 48301

162-006-200-001-31

OCCUPANT

593 E INDIAN WOODS TRL  
INDIAN RIVER, MI 49749

162-006-400-006-00

OCCUPANT

, MI 49749

162-006-400-001-00

OCCUPANT

, MI 49749

162-005-300-001-00

OCCUPANT

512 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-005-100-002-00

OCCUPANT

, MI 49749

162-006-400-004-00

OCCUPANT

627 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-006-400-007-01

OCCUPANT

697 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-005-300-002-01

OCCUPANT

4700 GRACE BEACH RD  
INDIAN RIVER, MI 49749

162-005-100-015-00

OCCUPANT

4920 GRACE BEACH RD  
INDIAN RIVER, MI 49749

162-005-100-001-01

OCCUPANT

, MI 49749

162-006-400-005-00

OCCUPANT

629 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-006-200-001-30

OCCUPANT

501 E INDIAN WOODS TRL  
INDIAN RIVER, MI 49749

162-005-300-002-00

OCCUPANT

625 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

162-005-100-014-00

OCCUPANT

, MI 49749

162-005-100-012-00

OCCUPANT

345 S GRANDVIEW BEACH RD  
INDIAN RIVER, MI 49749

NOTICE OF PUBLIC HEARING

**CHEBOYGAN COUNTY PLANNING COMMISSION SPECIAL MEETING**

**TUESDAY, JUNE 26, 2018 AT 7:00 PM**

**CHEBOYGAN HIGH SCHOOL AUDITORIUM, 801 W. LINCOLN AVE, CHEBOYGAN, MICHIGAN 49721**

1. Notice is given that the Cheboygan County Planning Commission will hold a public hearing on Tuesday, June 26, 2018 at 7:00 P.M. at the Cheboygan High School Auditorium, 801 W. Lincoln Ave., Cheboygan Michigan 49721. The purpose of this meeting and public hearing is to hear comments about and consider findings under Section 18.7.e. as provided in the State of Michigan Court of Appeals unpublished Opinion dated January 16, 2018 being Docket No. 335159; 335206, Grandview Beach Association, Plaintiff/Appellant v County of Cheboygan and Cheboygan County Planning Commission, Defendants/Appellees and Heritage Cove Farm, Inc., Lawrence P. Hanson, Elizabeth A. Hanson, and Lib.Lib, LLC, Intervenor/Appellees.

**Lawrence Hanson and Heritage Cove Farm, Inc.** – Applicants have requested and received a Special Use Permit and approval based upon a submitted site plan and other evidence as part of the record, with such approval being appealed by Plaintiff/Appellant Grandview Beach Association. Remaining matters pursuant to the Michigan Court of Appeals is a determination under Cheboygan County Zoning Ordinance Section 18.7.e. which reads as follows: “The proposed special land use will not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.” The property is located at 625 Grandview Beach Rd., Tuscarora Township, sections 5 and 6, parcel #162-005-300-002-00, #162-006-400-004-00 and #162-006-400-005-00 and are zoned Agriculture and Forestry Management District (M-AF) and Lake and Stream Protection District (P-LS).

Please note: Heritage Cove Farm requests that Cheboygan County make all reasonable and necessary accommodations under the Americans with Disabilities Act of 1990, the Fair Housing Amendments Act of 1988 and the Michigan Persons with Disabilities Civil Rights Act with respect to the interpretation and application of the Cheboygan County Zoning Ordinance #200 such as to approve the Farm in all requested and required respects.

Please visit the Planning and Zoning office or visit our website to see the application and the associated drawings and documents. These documents and staff report may be viewed at [www.cheboygancounty.net/planning/](http://www.cheboygancounty.net/planning/). Comments, questions, and correspondence may be sent to [planning@cheboygancounty.net](mailto:planning@cheboygancounty.net) or Planning & Zoning Department, PO Box 70, 870 South Main St., Rm. 103, Cheboygan, MI 49721, or presented at the meeting.

Debbie Tomlinson  
Cheboygan County Planning Commission  
870 S. Main Street  
Cheboygan, MI. 49721

Dear Cheboygan County Planning Commissioners,

The following issues are being addressed or are part of the county's requirements in granting a special land use permit for Heritage Cove Farm, a proposed mental health facility on Grandview Beach in Indian River:

- 1) the special land use permit proposed would not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties; and
- 2) an impact study shall be completed for the special land use permit to be granted.

The written submissions by several first responders or public safety officials have been added to Cheboygan County's file on this matter, and are addressed as follows:

The Tuscarora Township Police Department Chief, Mr. Gordon Temple, recently clarified his written opinion stated in a letter dated 3/6/18. He specified that his findings in his 3/6/18 letter were based on an additional 24 residents added to the township, but that the mental well-being of these residents is an unknown variable. Chief Temple emphasized that his opinion was not intended to be used as an impact study. The "unknown" variables in this case include the mental health status of the potential residents at the proposed facility. The status of the potential residents is under the control of the applicant for the special land use permit, but only to the extent that laws regarding the ADA allow; **the applicant should not ethically or legally discriminate between those seeking admission to this facility, as suggested in the application.**

Lt. Todd Ross of the Cheboygan County Sheriff's Office also submitted a letter dated 3/20/18 which refers to the applicant's intentions to model Heritage Cove Farm after Gould Farm in Massachusetts. Lt. Ross stated that he reviewed the website for Gould Farm as well as the 3/5/18 letter of support for Heritage Cove Farm written by Gould Farm's executive director, Lianne Finston, which also is included in Cheboygan County's file. Lt. Ross's understanding of the applicant's plan is partially based upon the representations of the executive director of Gould Farm and its website.

The letter written by Lianne Finston of Gould Farm may not reflect all aspects of circumstances at this facility. Although Ms. Finston's integrity is not being questioned, there was an unfortunate incident in 2014 whereby a "guest" on the farm did not return from an outing, and was later found deceased, and sympathy is to be extended here. As Ms. Finston writes, "It is the rare instance that we have an elopement of a guest (once in the past 5 years), and occasionally we call for an ambulance to transport a guest to the hospital for a physical or mental health matter (maybe once every 2 years)."

(See <https://www.berkshireeagle.com/stories/missing-gould-farm-guests-body-found.377120>). It should be noted that the website for Gould Farm is used to market this facility as well as to provide some basic information; this tool has limited use for an impact study for Heritage Cove Farm by Cheboygan County.

Additionally, it should be noted that the Tuscarora Township Volunteer Fire Chief, Dave Carpenter, specified that the conditions that the applicant (Ms. Betsy Hanson) discussed with him in 2015 included services such as the department's assistance with "walk off" persons experiencing dementia from local adult foster homes. In this example, foster care adults with "dementia" have substantially different needs than people diagnosed with the mental illnesses specified in the special land use permit application.

Unfortunately, since the application for special land use permit was submitted over three years ago, the demands made on emergency responders, police, EMT's, and other service providers have increased dramatically due to the recent rise in suicide rates and an influx of stronger opioids and synthetic pharmaceutical products. People with mental illnesses such as bipolar disorder, depression and drug addiction are statistically more inclined to attempt suicide. Several recent studies about the "larger picture" collectively indicate that local first responders and public safety officials are struggling to keep up with an increase in demands, including:

*Violence Against EMS: Rolling With the Punches* by Bryarlin Johnson NREMT-P and Marc Conterato, M.D. July 5, 2017 [Emergency Physicians Monthly](http://epmonthly.com/article/rolling-with-the-punches/)  
<http://epmonthly.com/article/rolling-with-the-punches/>

*Michigan falls short in frontline treatment for opioid crisis*, The Center for Michigan,  
<https://www.bridgemi.com/quality-life/michigan-falls-short-frontline-treatment-opioid-crisis>

*Violence Against EMS Responders* August 31, 2017 (FEMA),  
[https://www.usfa.fema.gov/current\\_events/083117.html](https://www.usfa.fema.gov/current_events/083117.html)

*The unexpected abuse of Indy's ambulance workers—and what's being done about it* 4/11/17 <https://www.indystar.com/story/news/crime/2017/04/11/unexpected-abuse-indys-ambulance-workers-and-whats-being-done/99737258/>

*Michigan suicide rates jump 33 percent since 1999* June 8, 2018 [Detroit News](https://www.detroitnews.com/story/news/local/2018/06/08/michigan-suicide-rates-jump-33-percent-since-1999/685609002/)  
<https://www.detroitnews.com/story/news/local/2018/06/08/michigan-suicide-rates-jump-33-percent-since-1999/685609002/>

**The current trends are happening on a local, state, and national level, and they do not reflect the high degree of professionalism and the qualifications of the area's public safety officials or emergency responders.** Any impact study for the special land use permit application for Heritage Cove Farm must therefore address the following questions: Have Cheboygan County and Tuscarora Township

defined current capacity, and if so, what statistics are being used? Are the projections for public safety needs based on past experiences or current trends? Have local officials and emergency responders considered the escalating opioid crisis and the introduction of substances such as fentanyl and other synthetic chemicals into the region's illicit drug supply? The proposed facility on Grandview Beach is not a charitable enterprise; therefore, a potential conflict of interest must be at least considered in any suggestion by the applicant that the residents of the facility will not present demands on public resources "in excess of current capacity," wording that is far different than "overwhelming" the system.

The statistics for suicide and attempted suicide among mentally ill people raise logical questions about additional demands for public resources at the proposed site, and liability is a realistic concern for county and township officials and/or emergency responders. The hairpin turns and poor road conditions leading to Grandview Beach add to the potential response time of any responders. **The goodness of the cause stated for the proposed mental health facility on Grandview Beach is not at issue here; the remote location is, however, and this must be considered in any assessment as to how first responders and public safety officers would be able to provide a secure environment for the applicant's residents and neighbors based upon the current capacity of their services.** An essential component to this security involves the accessibility of the proposed site by emergency responders and the realistic evaluation of the applicant's assuring statements that all will be well.

Please ensure that the impact study required for the special land use permit is completed by a neutral party and based upon realistic expectations and demands on the highly qualified local emergency responders and public safety officers in Tuscarora Township and Cheboygan County. The impact study should be based on the applicant's intentions to offer treatment and housing to patients who have schizophrenia, bipolar disorder, depression, and drug addiction, or any other illnesses that are specified in the application and supporting correspondence. Thank you for your service and for your attention in this very important matter.

Most sincerely,

Susan Devick  
289 S. Grandview Beach Rd.  
Indian River, MI. 49749

## **HERITAGE COVE FARM STUDY REGARDING CHEBOYGAN COUNTY ZONING ORDINANCE § 18.7.e.**

**PURPOSE:** The purpose of this study is to provide Cheboygan County Planning Commission with data in support of Cheboygan County Zoning Ordinance § 18.7.e as it relates to the Special Use Permit of Heritage Cove Farm.

**MANNER:** The record related to Heritage Cove Farm's Special Use Permit (updated through June 2, 2018) was examined, in addition to the January 26, 2018 Unpublished Opinion of the Michigan Court of Appeals Nos. 335159; 335206; and other data available.

**ANALYSIS:** Are the mentally ill violent? Are they more violent than people without a mental illness? Are they a risk to public safety? These questions have framed both the scientific and the public debate surrounding the relationship of violence to mental illness.

Unless otherwise stated, 'violence' will refer to acts of physical violence against others, since these are the most fear-inducing for the public and the greatest determinants of social stigma and discrimination.

Research has shown that the vast majority of people who are violent do not suffer from mental illnesses. (American Psychiatric Association, 1994) Major determinants of violence continue to be socio-demographic and economic factors. Substance abuse is a major determinant of violence and this is true whether it occurs in the context of a concurrent mental illness or not. Therefore, early identification and treatment of substance abuse problems, and greater attention to the diagnosis and management of concurrent substance abuse disorders among seriously mentally ill, may be potential violence prevention strategies. Members of the public exaggerate both the strength of the association between mental illness and violence and their own personal risk. (Stuart, 2003)

Recent coverage regarding mass shootings and tragic gun violence, and the accompanying media coverage have fed the perception that most profoundly mentally ill people are violent. Surveys show that 60 - 80 percent of the public believes that those diagnosed with schizophrenia, in particular, are likely to commit violent acts. (Hal Arkowitz, Jul 1, 2011)

In reviewing the research on violence and mental illness, the Institute of Medicine concluded, "Although studies suggest a link between mental illnesses and violence, the contribution of people with mental illnesses to overall rates of violence is small," ... "the magnitude of the relationship is greatly exaggerated in the minds of the general population. (Institute of Medicine, 2006) Other risk factors have more to do with violent behavior such as past violent victimization, lack of social supports, and substance abuse. (V.A. Hilday, 1999)

Substance abuse greatly boosts the chances of violent behavior in healthy subjects too, suggesting that drug use may be a much better predictor of violence than mental illness. What is more, proper treatment of mental illness can effectively eliminate the small risk of violent behavior posed by a grave disorder. (Hal Arkowitz, Jul 1, 2011)

E. Fuller Torrey of the Stanley Medical Research Institute at the Maryland Psychiatric Research Center, makes clear, the connection between stigma/discrimination and violence for persons with severe mental illness. In "Isn't it Time to Connect the Dots," Torrey clearly lays out the undisputed fact that if we focus on treatment for persons with mental illness, violence will decline in this population and stigma will be reduced. The mental health community reports like a mantra...“most acts of violence are not committed by mentally ill individuals”; “mentally ill individuals are the victims of violence much more often than they are the perpetrators of violence”; “people with alcoholism and drug addiction are more violent than people with serious mental illnesses”; and “most mentally ill people are not violent.” All 4 statements are true, but they neither contradict nor negate the fact that a small number of seriously mentally ill individuals do become violent **when they are not treated**, and these episodes of violence are an important cause of stigma against all mentally ill persons. (Torrey, 2011)

Research on the relationship between mental illness and violence shows that there are certain factors that may increase risks of violence among individuals with mental illness. These factors include: abuse of alcohol or illegal drugs; past history of violence; being young and male; and untreated psychosis. The best way to reduce this risk is through treatment; yet fewer than one-third of adults and half of children with a diagnosed mental illness receive mental health services in a given year. (National Alliance on Mental Illness, 2018)

In the MacArthur study, Steadman's team found no difference in the prevalence of violence between the severely mentally ill who were on their medications and mentally healthy people, whereas unmedicated patients lashed out at significantly higher rates. (MacArthur, 1998)

Rates of aggressive behaviors are known to differ dramatically, indicating that mental illness is not sufficient cause for the occurrence of violence. (Katz, 1990) The public are accustomed to 'experiencing' violence among the mentally ill, although these experiences are mostly vicarious, through movie depictions of crazed killers or real life dramas played out with disturbing frequency on the nightly news. (Stuart, 2003)

In the aftermath of each of an increasing number of mass shootings in the United States, debate over the link between mental illness and gun violence continues to dominate American public discourse.... there is little evidence to suggest that mental illness contributes to > 3-5% of all violent crime, and there is even less evidence to suggest that mental illness is a primary cause of gun-involved crime, including homicide. (Teasdale, 2018). This means that 95-97% of all violent crimes are perpetrated by persons without a mental illness.

People with psychiatric disabilities are far more likely to be victims than perpetrators of violent crime. (Mortensen L. Appleby, 2001) Researchers at North Carolina State University and Duke University found that people with severe mental illnesses, schizophrenia, bipolar disorder or psychosis, are 2½ times more likely to be attacked, raped or mugged than the general population. (V.A. Hilday, 1999)

The Mental Health First Aid Training and Metal Health First Aid for Public Safety curriculum presented by nationally certified Mental Health Fist Aid Trainers, have been available to law enforcement and first responders in Northern Michigan for years. These

programs along with the Memphis Model, Mental Health Crisis Intervention Team (CIT) and Mental Health Courts throughout the state present new alternatives to standard policing in mental health situations.

Tuscarora Township, with a population of 2,960, is the only township in Cheboygan County that has its own dedicated law enforcement. The Tuscarora Township Police Department is a 24 hour, 7 day a week operation, with officers on patrol at all times. The Tuscarora Township Police Department roster reflects 8 officers. (Department Roster, 2018) The current police budget for Tuscarora Township equates to \$279 per resident and the Cheboygan County Sherriff's Department is \$171 per resident.

**CONCLUSION:** “. . . [T]he absolute risk of violence among the mentally ill as a group is still very small and . . . only a small proportion of the violence in our society can be attributed to persons who are mentally ill." (Mulvey, 1994)

When Heritage Cove Farm's application for Special Use Permit was submitted, there were 9 licensed homes in the County with 66 residents with mental and/or developmental disabilities. It is reasonable to expect that local law enforcement, fire and ambulance professionals are the only persons with the ability to determine if these agencies have the capacity to serve 24 residents, some of which may already be residing in this community.

Most people who suffer from a mental disorder are not violent — there is no need to fear them. Embrace them for who they are — normal human beings experiencing a difficult time, who need your open mind, caring attitude, and helpful support. (Grohol, 1998) The purpose of Heritage Cove Farm is to provide a safe environment where persons with mental illness can live in community and receive the necessary skills and support to reach their goal of living as independent a life as possible. As stated in its application. medication compliance, voluntary admission and recommendation from prior treating physicians are three of the requirement for admission to Heritage Cove Farm. Personal treatment plans to be created for each resident by trained professionals including psychiatrists, treatment teams, the staff and residents themselves, will outline the goals and strategies that will assist the resident in overcoming mental health issues. And finally, reliance on our state licensing system provides the oversight to ensure that Heritage Cove Farm adheres to all compliance requirements.

People with mental illnesses can and do recover. People with mental illnesses can recover or manage their conditions and go on to lead happy, healthy, productive lives. They contribute to society and make the world a better place. They are our neighbors, judges, actors and actresses, fashion designers, comedians, physicians, dishwashers, and the person you pass and smile to while walking down the street or trailway.

**QUESTION PRESENTED:**

The Commission will have to consider whether there will be an increased burden beyond the "current capacity" under § 18.7.e and whether such an increase, if any, must be allowed as a

reasonable accommodation. Undue burden is a burden that requires more than reasonable costs or modest, affirmative steps to accommodate the handicapped. Reasonable costs are more than de minimus costs. Weighing the costs of the proposed accommodation is an appropriate part of the fact-specific inquiry to determine whether an accommodation is reasonable.

Will the proposed special land use place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent property?

Based on review of the record, the letters received from the Cheboygan County Sherriff; Tuscarora Township Police Chief; Tuscarora Township Fire Chief; Cheboygan Life Support Systems, Inc; Gould Farm; and this study, the demands on fire, police, or other public resources will not be a burden on current capacity; and will not present dangers to the subject property or adjacent property

## REFERENCES:

American Psychiatric Association. (1994). *Fact Sheet: Violence and Mental Illness*. Washington, DC: American Psychiatric Association.

*Department Roster*. (2018). Retrieved from Tuscarora Township Police Department: [www.tuscarorapolice.com](http://www.tuscarorapolice.com)

Grohol, J. (1998). *psychcentral*. Retrieved from [www.psychcentral.com](http://www.psychcentral.com).

Hal Arkowitz, S. L. (Jul 1, 2011). Deranged and Dangerous: When Do the Emotionally Disturbed Resort to Violence? *Scientific American* .

Institute of Medicine. (2006). Improving Quality of Health Care for Mental and Substance-Use Conditions. *Institute of Medecine* .

Katz, K. O. (1990). Violence and Social Structure on Mental Hospitals. *Psychiatry* , 53:262-77.

MacArthur. (1998). *Violence Risk Assessment Study*.

Mortensen L. Appleby, G. D. (2001). Death by Homicide, Suicide, and Other Unnatural Cause in People with Mental Illness: A Population Based Study. *The Lancet* , 358;2110-2112.

Mulvey, E. O. (1994). Assessing the Evidence of a Link Between Mental Illness and Violence. *Hospital and Community Psychiatry* , 45; 663-668.

National Alliance on Mental Illness. (2018). *Violence and Gun Reporting Laws*. Retrieved from NAMI: <https://www.nami.org/Learn-More/Public-Policy/Violence-and-Gun-Reporting-Laws>

Stuart, H. (2003). Violence and Mental Illness: An Overview. *Wold Psychiatry* , 121-124.

Teasdale, M. L. (2018). Severe Mental Illness and Firearm Access: Is violence really the danger? *International Journal of Law & Psychiatry* , 56;44-49.

Torrey, E. F. (2011). *Stigma and Violence: Isn't It Time to Connect the Dots?* Oxford University Press on behalf of Maryland Psychitric Research Center.

V.A. Hilday, M. S. (1999). Criminal Victimization of persons with Severe Mental Illness. *Psychiatric Services* , 50-68.

## Deborah Tomlinson

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**From:** Sue Devick <sudevick@aol.com>  
**Sent:** Wednesday, June 27, 2018 6:09 AM  
**To:** Deborah Tomlinson  
**Subject:** Heritage Cove Farm  
**Attachments:** IMG\_3649.jpg; ATT00001.txt; IMG\_3652.jpg; ATT00002.txt; IMG\_3653.jpg; ATT00003.txt

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

To: Planning Commission

Re: Grandview Beach Rd.

Please see attached photos of road conditions that may impact any response time of emergency service personnel to the beach.

Thank you,

Sue Devick  
289 S. Grandview Beach Rd.  
Indian River, MI.





## Deborah Tomlinson

---

From: Brent Shank [<mailto:mgr@chcrc.com>]  
Sent: Monday, July 02, 2018 7:11 AM  
To: Michael C. Turisk  
Subject: Re: FW: Heritage Cove Farm

Michael,

The proposed Heritage Farm Cove development will be required to upgrade the existing driveway to a commercial driveway with concrete curb and gutter along with paving according to Road Commission driveway policy. The Road Commission can not require any upgrades to the road.

Please let me know if you need additional information.

Thank you,

Brent Shank, P.E.  
Engineer/Manager  
Cheboygan County Road Commission  
[mgr@chcrc.com](mailto:mgr@chcrc.com)  
(231) 238-7775

On 6/28/2018 11:57 AM, Michael C. Turisk wrote:

> Brent, the following email and the attached photos regard the voicemail I left for you earlier today, Thursday.

>

> Sincerely,

>

> Michael Turisk

> Director, Cheboygan County Planning and Zoning

> 870 South Main St.

> Cheboygan, MI 49721

>

> Phone: 231.627.8489

> Fax: 231.627.3646

> Email: [mturisk@cheboygancounty.net](mailto:mturisk@cheboygancounty.net)

>

>

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> -----Original Message-----

> From: Deborah Tomlinson

> Sent: Thursday, June 28, 2018 11:23 AM

> To: Michael C. Turisk

> Subject: FW: Heritage Cove Farm

>

> FYI

>

> Debbie Tomlinson

> Cheboygan County

> Planning & Zoning Department  
> PO Box 70, 870 South Main Street  
> Cheboygan, MI 49721  
> (231)627-8489 phone  
> (231)627-3646 fax  
> [debbiet@cheboygancounty.net](mailto:debbiet@cheboygancounty.net)  
>  
>  
> -----Original Message-----  
> From: Sue Devick [<mailto:suedevick@aol.com>]  
> Sent: Wednesday, June 27, 2018 6:09 AM  
> To: Deborah Tomlinson  
> Subject: Heritage Cove Farm  
>  
> To: Planning Commission  
>  
> Re: Grandview Beach Rd.  
>  
> Please see attached photos of  
> road conditions that may impact  
> any response time of emergency  
> service personnel to the beach.  
>  
> Thank you,  
>  
> Sue Devick  
> 289 S. Grandview Beach Rd.  
> Indian River, MI.  
>  
>



**U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
OFFICE OF FAIR HOUSING AND EQUAL OPPORTUNITY**



**U.S. DEPARTMENT OF JUSTICE  
CIVIL RIGHTS DIVISION**

*Washington, D.C.  
November 10, 2016*

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**JOINT STATEMENT OF THE DEPARTMENT OF HOUSING AND URBAN  
DEVELOPMENT AND THE DEPARTMENT OF JUSTICE**

**STATE AND LOCAL LAND USE LAWS AND PRACTICES AND THE APPLICATION  
OF THE FAIR HOUSING ACT**

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**INTRODUCTION**

The Department of Justice (“DOJ”) and the Department of Housing and Urban Development (“HUD”) are jointly responsible for enforcing the Federal Fair Housing Act (“the Act”),<sup>1</sup> which prohibits discrimination in housing on the basis of race, color, religion, sex, disability, familial status (children under 18 living with a parent or guardian), or national origin.<sup>2</sup> The Act prohibits housing-related policies and practices that exclude or otherwise discriminate against individuals because of protected characteristics.

The regulation of land use and zoning is traditionally reserved to state and local governments, except to the extent that it conflicts with requirements imposed by the Fair Housing Act or other federal laws. This Joint Statement provides an overview of the Fair Housing Act’s requirements relating to state and local land use practices and zoning laws, including conduct related to group homes. It updates and expands upon DOJ’s and HUD’s Joint

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<sup>1</sup> The Fair Housing Act is codified at 42 U.S.C. §§ 3601–19.

<sup>2</sup> The Act uses the term “handicap” instead of “disability.” Both terms have the same legal meaning. *See Bragdon v. Abbott*, 524 U.S. 624, 631 (1998) (noting that the definition of “disability” in the Americans with Disabilities Act

Statement on Group Homes, Local Land Use, and the Fair Housing Act, issued on August 18, 1999. The first section of the Joint Statement, Questions 1–6, describes generally the Act’s requirements as they pertain to land use and zoning. The second and third sections, Questions 7–25, discuss more specifically how the Act applies to land use and zoning laws affecting housing for persons with disabilities, including guidance on regulating group homes and the requirement to provide reasonable accommodations. The fourth section, Questions 26–27, addresses HUD’s and DOJ’s enforcement of the Act in the land use and zoning context.

This Joint Statement focuses on the Fair Housing Act, not on other federal civil rights laws that prohibit state and local governments from adopting or implementing land use and zoning practices that discriminate based on a protected characteristic, such as Title II of the Americans with Disabilities Act (“ADA”),<sup>3</sup> Section 504 of the Rehabilitation Act of 1973 (“Section 504”),<sup>4</sup> and Title VI of the Civil Rights Act of 1964.<sup>5</sup> In addition, the Joint Statement does not address a state or local government’s duty to affirmatively further fair housing, even though state and local governments that receive HUD assistance are subject to this duty. For additional information provided by DOJ and HUD regarding these issues, see the list of resources provided in the answer to Question 27.

## **Questions and Answers on the Fair Housing Act and State and Local Land Use Laws and Zoning**

### **1. How does the Fair Housing Act apply to state and local land use and zoning?**

The Fair Housing Act prohibits a broad range of housing practices that discriminate against individuals on the basis of race, color, religion, sex, disability, familial status, or national origin (commonly referred to as protected characteristics). As established by the Supremacy Clause of the U.S. Constitution, federal laws such as the Fair Housing Act take precedence over conflicting state and local laws. The Fair Housing Act thus prohibits state and local land use and zoning laws, policies, and practices that discriminate based on a characteristic protected under the Act. Prohibited practices as defined in the Act include making unavailable or denying housing because of a protected characteristic. Housing includes not only buildings intended for occupancy as residences, but also vacant land that may be developed into residences.

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is drawn almost verbatim “from the definition of ‘handicap’ contained in the Fair Housing Amendments Act of 1988”). This document uses the term “disability,” which is more generally accepted.

<sup>3</sup> 42 U.S.C. §12132.

<sup>4</sup> 29 U.S.C. § 794.

<sup>5</sup> 42 U.S.C. § 2000d.

## **2. What types of land use and zoning laws or practices violate the Fair Housing Act?**

Examples of state and local land use and zoning laws or practices that may violate the Act include:

- Prohibiting or restricting the development of housing based on the belief that the residents will be members of a particular protected class, such as race, disability, or familial status, by, for example, placing a moratorium on the development of multifamily housing because of concerns that the residents will include members of a particular protected class.
- Imposing restrictions or additional conditions on group housing for persons with disabilities that are not imposed on families or other groups of unrelated individuals, by, for example, requiring an occupancy permit for persons with disabilities to live in a single-family home while not requiring a permit for other residents of single-family homes.
- Imposing restrictions on housing because of alleged public safety concerns that are based on stereotypes about the residents' or anticipated residents' membership in a protected class, by, for example, requiring a proposed development to provide additional security measures based on a belief that persons of a particular protected class are more likely to engage in criminal activity.
- Enforcing otherwise neutral laws or policies differently because of the residents' protected characteristics, by, for example, citing individuals who are members of a particular protected class for violating code requirements for property upkeep while not citing other residents for similar violations.
- Refusing to provide reasonable accommodations to land use or zoning policies when such accommodations may be necessary to allow persons with disabilities to have an equal opportunity to use and enjoy the housing, by, for example, denying a request to modify a setback requirement so an accessible sidewalk or ramp can be provided for one or more persons with mobility disabilities.

## **3. When does a land use or zoning practice constitute intentional discrimination in violation of the Fair Housing Act?**

Intentional discrimination is also referred to as disparate treatment, meaning that the action treats a person or group of persons differently because of race, color, religion, sex, disability, familial status, or national origin. A land use or zoning practice may be intentionally discriminatory even if there is no personal bias or animus on the part of individual government officials. For example, municipal zoning practices or decisions that reflect acquiescence to community bias may be intentionally discriminatory, even if the officials themselves do not personally share such bias. (See Q&A 5.) Intentional discrimination does not require that the

decision-makers were hostile toward members of a particular protected class. Decisions motivated by a purported desire to benefit a particular group can also violate the Act if they result in differential treatment because of a protected characteristic.

A land use or zoning practice may be discriminatory on its face. For example, a law that requires persons with disabilities to request permits to live in single-family zones while not requiring persons without disabilities to request such permits violates the Act because it treats persons with disabilities differently based on their disability. Even a law that is seemingly neutral will still violate the Act if enacted with discriminatory intent. In that instance, the analysis of whether there is intentional discrimination will be based on a variety of factors, all of which need not be satisfied. These factors include, but are not limited to: (1) the “impact” of the municipal practice, such as whether an ordinance disproportionately impacts minority residents compared to white residents or whether the practice perpetuates segregation in a neighborhood or particular geographic area; (2) the “historical background” of the action, such as whether there is a history of segregation or discriminatory conduct by the municipality; (3) the “specific sequence of events,” such as whether the city adopted an ordinance or took action only after significant, racially-motivated community opposition to a housing development or changed course after learning that a development would include non-white residents; (4) departures from the “normal procedural sequence,” such as whether a municipality deviated from normal application or zoning requirements; (5) “substantive departures,” such as whether the factors usually considered important suggest that a state or local government should have reached a different result; and (6) the “legislative or administrative history,” such as any statements by members of the state or local decision-making body.<sup>6</sup>

#### **4. Can state and local land use and zoning laws or practices violate the Fair Housing Act if the state or locality did not intend to discriminate against persons on a prohibited basis?**

Yes. Even absent a discriminatory intent, state or local governments may be liable under the Act for any land use or zoning law or practice that has an unjustified discriminatory effect because of a protected characteristic. In 2015, the United States Supreme Court affirmed this interpretation of the Act in *Texas Department of Housing and Community Affairs v. Inclusive Communities Project, Inc.*<sup>7</sup> The Court stated that “[t]hese unlawful practices include zoning laws and other housing restrictions that function unfairly to exclude minorities from certain neighborhoods without any sufficient justification.”<sup>8</sup>

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<sup>6</sup> *Vill. of Arlington Heights v. Metro. Hous. Dev. Corp.*, 429 U.S. 252, 265–68 (1977).

<sup>7</sup> \_\_\_ U.S. \_\_\_, 135 S. Ct. 2507 (2015).

<sup>8</sup> *Id.* at 2521–22.

A land use or zoning practice results in a discriminatory effect if it caused or predictably will cause a disparate impact on a group of persons or if it creates, increases, reinforces, or perpetuates segregated housing patterns because of a protected characteristic. A state or local government still has the opportunity to show that the practice is necessary to achieve one or more of its substantial, legitimate, nondiscriminatory interests. These interests must be supported by evidence and may not be hypothetical or speculative. If these interests could not be served by another practice that has a less discriminatory effect, then the practice does not violate the Act. The standard for evaluating housing-related practices with a discriminatory effect are set forth in HUD's Discriminatory Effects Rule, 24 C.F.R § 100.500.

Examples of land use practices that violate the Fair Housing Act under a discriminatory effects standard include minimum floor space or lot size requirements that increase the size and cost of housing if such an increase has the effect of excluding persons from a locality or neighborhood because of their membership in a protected class, without a legally sufficient justification. Similarly, prohibiting low-income or multifamily housing may have a discriminatory effect on persons because of their membership in a protected class and, if so, would violate the Act absent a legally sufficient justification.

**5. Does a state or local government violate the Fair Housing Act if it considers the fears or prejudices of community members when enacting or applying its zoning or land use laws respecting housing?**

When enacting or applying zoning or land use laws, state and local governments may not act because of the fears, prejudices, stereotypes, or unsubstantiated assumptions that community members may have about current or prospective residents because of the residents' protected characteristics. Doing so violates the Act, even if the officials themselves do not personally share such bias. For example, a city may not deny zoning approval for a low-income housing development that meets all zoning and land use requirements because the development may house residents of a particular protected class or classes whose presence, the community fears, will increase crime and lower property values in the surrounding neighborhood. Similarly, a local government may not block a group home or deny a requested reasonable accommodation in response to neighbors' stereotypical fears or prejudices about persons with disabilities or a particular type of disability. Of course, a city council or zoning board is not bound by everything that is said by every person who speaks at a public hearing. It is the record as a whole that will be determinative.

**6. Can state and local governments violate the Fair Housing Act if they adopt or implement restrictions against children?**

Yes. State and local governments may not impose restrictions on where families with children may reside unless the restrictions are consistent with the “housing for older persons” exemption of the Act. The most common types of housing for older persons that may qualify for this exemption are: (1) housing intended for, and solely occupied by, persons 62 years of age or older; and (2) housing in which 80% of the occupied units have at least one person who is 55 years of age or older that publishes and adheres to policies and procedures demonstrating the intent to house older persons. These types of housing must meet all requirements of the exemption, including complying with HUD regulations applicable to such housing, such as verification procedures regarding the age of the occupants. A state or local government that zones an area to exclude families with children under 18 years of age must continually ensure that housing in that zone meets all requirements of the exemption. If all of the housing in that zone does not continue to meet all such requirements, that state or local government violates the Act.

**Questions and Answers on the Fair Housing Act and  
Local Land Use and Zoning Regulation of Group Homes**

**7. Who qualifies as a person with a disability under the Fair Housing Act?**

The Fair Housing Act defines a person with a disability to include (1) individuals with a physical or mental impairment that substantially limits one or more major life activities; (2) individuals who are regarded as having such an impairment; and (3) individuals with a record of such an impairment.

The term “physical or mental impairment” includes, but is not limited to, diseases and conditions such as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV infection, developmental disabilities, mental illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance), and alcoholism.

The term “major life activity” includes activities such as seeing, hearing, walking, breathing, performing manual tasks, caring for one’s self, learning, speaking, and working. This list of major life activities is not exhaustive.

Being regarded as having a disability means that the individual is treated as if he or she has a disability even though the individual may not have an impairment or may not have an impairment that substantially limits one or more major life activities. For example, if a landlord

refuses to rent to a person because the landlord believes the prospective tenant has a disability, then the landlord violates the Act's prohibition on discrimination on the basis of disability, even if the prospective tenant does not actually have a physical or mental impairment that substantially limits one or more major life activities.

Having a record of a disability means the individual has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.

#### **8. What is a group home within the meaning of the Fair Housing Act?**

The term "group home" does not have a specific legal meaning; land use and zoning officials and the courts, however, have referred to some residences for persons with disabilities as group homes. The Fair Housing Act prohibits discrimination on the basis of disability, and persons with disabilities have the same Fair Housing Act protections whether or not their housing is considered a group home. A household where two or more persons with disabilities choose to live together, as a matter of association, may not be subjected to requirements or conditions that are not imposed on households consisting of persons without disabilities.

In this Statement, the term "group home" refers to a dwelling that is or will be occupied by unrelated persons with disabilities. Sometimes group homes serve individuals with a particular type of disability, and sometimes they serve individuals with a variety of disabilities. Some group homes provide residents with in-home support services of varying types, while others do not. The provision of support services is not required for a group home to be protected under the Fair Housing Act. Group homes, as discussed in this Statement, may be opened by individuals or by organizations, both for-profit and not-for-profit. Sometimes it is the group home operator or developer, rather than the individuals who live or are expected to live in the home, who interacts with a state or local government agency about developing or operating the group home, and sometimes there is no interaction among residents or operators and state or local governments.

In this Statement, the term "group home" includes homes occupied by persons in recovery from alcohol or substance abuse, who are persons with disabilities under the Act. Although a group home for persons in recovery may commonly be called a "sober home," the term does not have a specific legal meaning, and the Act treats persons with disabilities who reside in such homes no differently than persons with disabilities who reside in other types of group homes. Like other group homes, homes for persons in recovery are sometimes operated by individuals or organizations, both for-profit and not-for-profit, and support services or supervision are sometimes, but not always, provided. The Act does not require a person who resides in a home for persons in recovery to have participated in or be currently participating in a

substance abuse treatment program to be considered a person with a disability. The fact that a resident of a group home may currently be illegally using a controlled substance does not deprive the other residents of the protection of the Fair Housing Act.

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### **9. In what ways does the Fair Housing Act apply to group homes?**

The Fair Housing Act prohibits discrimination on the basis of disability, and persons with disabilities have the same Fair Housing Act protections whether or not their housing is considered a group home. State and local governments may not discriminate against persons with disabilities who live in group homes. Persons with disabilities who live in or seek to live in group homes are sometimes subjected to unlawful discrimination in a number of ways, including those discussed in the preceding Section of this Joint Statement. Discrimination may be intentional; for example, a locality might pass an ordinance prohibiting group homes in single-family neighborhoods or prohibiting group homes for persons with certain disabilities. These ordinances are facially discriminatory, in violation of the Act. In addition, as discussed more fully in Q&A 10 below, a state or local government may violate the Act by refusing to grant a reasonable accommodation to its zoning or land use ordinance when the requested accommodation may be necessary for persons with disabilities to have an equal opportunity to use and enjoy a dwelling. For example, if a locality refuses to waive an ordinance that limits the number of unrelated persons who may live in a single-family home where such a waiver may be necessary for persons with disabilities to have an equal opportunity to use and enjoy a dwelling, the locality violates the Act unless the locality can prove that the waiver would impose an undue financial and administrative burden on the local government or fundamentally alter the essential nature of the locality's zoning scheme. Furthermore, a state or local government may violate the Act by enacting an ordinance that has an unjustified discriminatory effect on persons with disabilities who seek to live in a group home in the community. Unlawful actions concerning group homes are discussed in more detail throughout this Statement.

### **10. What is a reasonable accommodation under the Fair Housing Act?**

The Fair Housing Act makes it unlawful to refuse to make "reasonable accommodations" to rules, policies, practices, or services, when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy a dwelling. A "reasonable accommodation" is a change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including public and common use spaces. Since rules, policies, practices, and services may have a different effect on persons with disabilities than on other persons, treating persons with disabilities exactly the same as others may sometimes deny them an equal opportunity to use and enjoy a dwelling.

Even if a zoning ordinance imposes on group homes the same restrictions that it imposes on housing for other groups of unrelated persons, a local government may be required, in individual cases and when requested to do so, to grant a reasonable accommodation to a group home for persons with disabilities. What constitutes a reasonable accommodation is a case-by-case determination based on an individualized assessment. This topic is discussed in detail in Q&As 20–25 and in the HUD/DOJ Joint Statement on Reasonable Accommodations under the Fair Housing Act.

**11. Does the Fair Housing Act protect persons with disabilities who pose a “direct threat” to others?**

The Act does not allow for the exclusion of individuals based upon fear, speculation, or stereotype about a particular disability or persons with disabilities in general. Nevertheless, the Act does not protect an individual whose tenancy would constitute a “direct threat” to the health or safety of other individuals or whose tenancy would result in substantial physical damage to the property of others unless the threat or risk to property can be eliminated or significantly reduced by reasonable accommodation. A determination that an individual poses a direct threat must rely on an individualized assessment that is based on reliable objective evidence (for example, current conduct or a recent history of overt acts). The assessment must consider: (1) the nature, duration, and severity of the risk of injury; (2) the probability that injury will actually occur; and (3) whether there are any reasonable accommodations that will eliminate or significantly reduce the direct threat. See Q&A 10 for a general discussion of reasonable accommodations. Consequently, in evaluating an individual’s recent history of overt acts, a state or local government must take into account whether the individual has received intervening treatment or medication that has eliminated or significantly reduced the direct threat (in other words, significant risk of substantial harm). In such a situation, the state or local government may request that the individual show how the circumstances have changed so that he or she no longer poses a direct threat. Any such request must be reasonable and limited to information necessary to assess whether circumstances have changed. Additionally, in such a situation, a state or local government may obtain satisfactory and reasonable assurances that the individual will not pose a direct threat during the tenancy. The state or local government must have reliable, objective evidence that the tenancy of a person with a disability poses a direct threat before excluding him or her from housing on that basis, and, in making that assessment, the state or local government may not ignore evidence showing that the individual’s tenancy would no longer pose a direct threat. Moreover, the fact that one individual may pose a direct threat does not mean that another individual with the same disability or other individuals in a group home may be denied housing.

**12. Can a state or local government enact laws that specifically limit group homes for individuals with specific types of disabilities?**

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No. Just as it would be illegal to enact a law for the purpose of excluding or limiting group homes for individuals with disabilities, it is illegal under the Act for local land use and zoning laws to exclude or limit group homes for individuals with specific types of disabilities. For example, a government may not limit group homes for persons with mental illness to certain neighborhoods. The fact that the state or local government complies with the Act with regard to group homes for persons with some types of disabilities will not justify discrimination against individuals with another type of disability, such as mental illness.

**13. Can a state or local government limit the number of individuals who reside in a group home in a residential neighborhood?**

Neutral laws that govern groups of unrelated persons who live together do not violate the Act so long as (1) those laws do not intentionally discriminate against persons on the basis of disability (or other protected class), (2) those laws do not have an unjustified discriminatory effect on the basis of disability (or other protected class), and (3) state and local governments make reasonable accommodations when such accommodations may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling.

Local zoning and land use laws that treat groups of unrelated persons with disabilities less favorably than similar groups of unrelated persons without disabilities violate the Fair Housing Act. For example, suppose a city's zoning ordinance defines a "family" to include up to a certain number of unrelated persons living together as a household unit, and gives such a group of unrelated persons the right to live in any zoning district without special permission from the city. If that ordinance also prohibits a group home having the same number of persons with disabilities in a certain district or requires it to seek a use permit, the ordinance would violate the Fair Housing Act. The ordinance violates the Act because it treats persons with disabilities less favorably than families and unrelated persons without disabilities.

A local government may generally restrict the ability of groups of unrelated persons to live together without violating the Act as long as the restrictions are imposed on all such groups, including a group defined as a family. Thus, if the definition of a family includes up to a certain number of unrelated individuals, an ordinance would not, on its face, violate the Act if a group home for persons with disabilities with more than the permitted number for a family were not allowed to locate in a single-family-zoned neighborhood because any group of unrelated people without disabilities of that number would also be disallowed. A facially neutral ordinance, however, still may violate the Act if it is intentionally discriminatory (that is, enacted with discriminatory intent or applied in a discriminatory manner), or if it has an unjustified

discriminatory effect on persons with disabilities. For example, an ordinance that limits the number of unrelated persons who may constitute a family may violate the Act if it is enacted for the purpose of limiting the number of persons with disabilities who may live in a group home, or if it has the unjustified discriminatory effect of excluding or limiting group homes in the jurisdiction. Governments may also violate the Act if they enforce such restrictions more strictly against group homes than against groups of the same number of unrelated persons without disabilities who live together in housing. In addition, as discussed in detail below, because the Act prohibits the denial of reasonable accommodations to rules and policies for persons with disabilities, a group home that provides housing for a number of persons with disabilities that exceeds the number allowed under the family definition has the right to seek an exception or waiver. If the criteria for a reasonable accommodation are met, the permit must be given in that instance, but the ordinance would not be invalid.<sup>9</sup>

#### **14. How does the Supreme Court's ruling in *Olmstead* apply to the Fair Housing Act?**

In *Olmstead v. L.C.*,<sup>10</sup> the Supreme Court ruled that the Americans with Disabilities Act (ADA) prohibits the unjustified segregation of persons with disabilities in institutional settings where necessary services could reasonably be provided in integrated, community-based settings. An integrated setting is one that enables individuals with disabilities to live and interact with individuals without disabilities to the fullest extent possible. By contrast, a segregated setting includes congregate settings populated exclusively or primarily by individuals with disabilities. Although *Olmstead* did not interpret the Fair Housing Act, the objectives of the Fair Housing Act and the ADA, as interpreted in *Olmstead*, are consistent. The Fair Housing Act ensures that persons with disabilities have an equal opportunity to choose the housing where they wish to live. The ADA and *Olmstead* ensure that persons with disabilities also have the option to live and receive services in the most integrated setting appropriate to their needs. The integration mandate of the ADA and *Olmstead* can be implemented without impairing the rights protected by the Fair Housing Act. For example, state and local governments that provide or fund housing, health care, or support services must comply with the integration mandate by providing these programs, services, and activities in the most integrated setting appropriate to the needs of individuals with disabilities. State and local governments may comply with this requirement by adopting standards for the housing, health care, or support services they provide or fund that are reasonable, individualized, and specifically tailored to enable individuals with disabilities to live and interact with individuals without disabilities to the fullest extent possible. Local governments should be aware that ordinances and policies that impose additional restrictions on housing or residential services for persons with disabilities that are not imposed on housing or

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<sup>9</sup> Laws that limit the number of occupants per unit do not violate the Act as long as they are reasonable, are applied to all occupants, and do not operate to discriminate on the basis of disability, familial status, or other characteristics protected by the Act.

<sup>10</sup> 527 U.S. 581 (1999).

residential services for persons without disabilities are likely to violate the Act. In addition, a locality would violate the Act and the integration mandate of the ADA and *Olmstead* if it required group homes to be concentrated in certain areas of the jurisdiction by, for example, restricting them from being located in other areas.

**15. Can a state or local government impose spacing requirements on the location of group homes for persons with disabilities?**

A “spacing” or “dispersal” requirement generally refers to a requirement that a group home for persons with disabilities must not be located within a specific distance of another group home. Sometimes a spacing requirement is designed so it applies only to group homes and sometimes a spacing requirement is framed more generally and applies to group homes and other types of uses such as boarding houses, student housing, or even certain types of businesses. In a community where a certain number of unrelated persons are permitted by local ordinance to reside together in a home, it would violate the Act for the local ordinance to impose a spacing requirement on group homes that do not exceed that permitted number of residents because the spacing requirement would be a condition imposed on persons with disabilities that is not imposed on persons without disabilities. In situations where a group home seeks a reasonable accommodation to exceed the number of unrelated persons who are permitted by local ordinance to reside together, the Fair Housing Act does not prevent state or local governments from taking into account concerns about the over-concentration of group homes that are located in close proximity to each other. Sometimes compliance with the integration mandate of the ADA and *Olmstead* requires government agencies responsible for licensing or providing housing for persons with disabilities to consider the location of other group homes when determining what housing will best meet the needs of the persons being served. Some courts, however, have found that spacing requirements violate the Fair Housing Act because they deny persons with disabilities an equal opportunity to choose where they will live. Because an across-the-board spacing requirement may discriminate against persons with disabilities in some residential areas, any standards that state or local governments adopt should evaluate the location of group homes for persons with disabilities on a case-by-case basis.

Where a jurisdiction has imposed a spacing requirement on the location of group homes for persons with disabilities, courts may analyze whether the requirement violates the Act under an intent, effects, or reasonable accommodation theory. In cases alleging intentional discrimination, courts look to a number of factors, including the effect of the requirement on housing for persons with disabilities; the jurisdiction’s intent behind the spacing requirement; the existence, size, and location of group homes in a given area; and whether there are methods other than a spacing requirement for accomplishing the jurisdiction’s stated purpose. A spacing requirement enacted with discriminatory intent, such as for the purpose of appeasing neighbors’ stereotypical fears about living near persons with disabilities, violates the Act. Further, a neutral

spacing requirement that applies to all housing for groups of unrelated persons may have an unjustified discriminatory effect on persons with disabilities, thus violating the Act. Jurisdictions must also consider, in compliance with the Act, requests for reasonable accommodations to any spacing requirements.

**16. Can a state or local government impose health and safety regulations on group home operators?**

Operators of group homes for persons with disabilities are subject to applicable state and local regulations addressing health and safety concerns unless those regulations are inconsistent with the Fair Housing Act or other federal law. Licensing and other regulatory requirements that may apply to some group homes must also be consistent with the Fair Housing Act. Such regulations must not be based on stereotypes about persons with disabilities or specific types of disabilities. State or local zoning and land use ordinances may not, consistent with the Fair Housing Act, require individuals with disabilities to receive medical, support, or other services or supervision that they do not need or want as a condition for allowing a group home to operate. State and local governments' enforcement of neutral requirements regarding safety, licensing, and other regulatory requirements governing group homes do not violate the Fair Housing Act so long as the ordinances are enforced in a neutral manner, they do not specifically target group homes, and they do not have an unjustified discriminatory effect on persons with disabilities who wish to reside in group homes.

Governments must also consider requests for reasonable accommodations to licensing and regulatory requirements and procedures, and grant them where they may be necessary to afford individuals with disabilities an equal opportunity to use and enjoy a dwelling, as required by the Act.

**17. Can a state or local government address suspected criminal activity or fraud and abuse at group homes for persons with disabilities?**

The Fair Housing Act does not prevent state and local governments from taking nondiscriminatory action in response to criminal activity, insurance fraud, Medicaid fraud, neglect or abuse of residents, or other illegal conduct occurring at group homes, including reporting complaints to the appropriate state or federal regulatory agency. States and localities must ensure that actions to enforce criminal or other laws are not taken to target group homes and are applied equally, regardless of whether the residents of housing are persons with disabilities. For example, persons with disabilities residing in group homes are entitled to the same constitutional protections against unreasonable search and seizure as those without disabilities.

**18. Does the Fair Housing Act permit a state or local government to implement strategies to integrate group homes for persons with disabilities in particular neighborhoods where they are not currently located?**

Yes. Some strategies a state or local government could use to further the integration of group housing for persons with disabilities, consistent with the Act, include affirmative marketing or offering incentives. For example, jurisdictions may engage in affirmative marketing or offer variances to providers of housing for persons with disabilities to locate future homes in neighborhoods where group homes for persons with disabilities are not currently located. But jurisdictions may not offer incentives for a discriminatory purpose or that have an unjustified discriminatory effect because of a protected characteristic.

**19. Can a local government consider the fears or prejudices of neighbors in deciding whether a group home can be located in a particular neighborhood?**

In the same way a local government would violate the law if it rejected low-income housing in a community because of neighbors' fears that such housing would be occupied by racial minorities (see Q&A 5), a local government violates the law if it blocks a group home or denies a reasonable accommodation request because of neighbors' stereotypical fears or prejudices about persons with disabilities. This is so even if the individual government decision-makers themselves do not have biases against persons with disabilities.

Not all community opposition to requests by group homes is necessarily discriminatory. For example, when a group home seeks a reasonable accommodation to operate in an area and the area has limited on-street parking to serve existing residents, it is not a violation of the Fair Housing Act for neighbors and local government officials to raise concerns that the group home may create more demand for on-street parking than would a typical family and to ask the provider to respond. A valid unaddressed concern about inadequate parking facilities could justify denying the requested accommodation, if a similar dwelling that is not a group home or similarly situated use would ordinarily be denied a permit because of such parking concerns. If, however, the group home shows that the home will not create a need for more parking spaces than other dwellings or similarly-situated uses located nearby, or submits a plan to provide any needed off-street parking, then parking concerns would not support a decision to deny the home a permit.

**Questions and Answers on the Fair Housing Act and  
Reasonable Accommodation Requests to Local Zoning and Land Use Laws**

**20. When does a state or local government violate the Fair Housing Act by failing to grant a request for a reasonable accommodation?**

A state or local government violates the Fair Housing Act by failing to grant a reasonable accommodation request if (1) the persons requesting the accommodation or, in the case of a group home, persons residing in or expected to reside in the group home are persons with a disability under the Act; (2) the state or local government knows or should reasonably be expected to know of their disabilities; (3) an accommodation in the land use or zoning ordinance or other rules, policies, practices, or services of the state or locality was requested by or on behalf of persons with disabilities; (4) the requested accommodation may be necessary to afford one or more persons with a disability an equal opportunity to use and enjoy the dwelling; (5) the state or local government refused to grant, failed to act on, or unreasonably delayed the accommodation request; and (6) the state or local government cannot show that granting the accommodation would impose an undue financial and administrative burden on the local government or that it would fundamentally alter the local government's zoning scheme. A requested accommodation may be necessary if there is an identifiable relationship between the requested accommodation and the group home residents' disability. Further information is provided in Q&A 10 above and the HUD/DOJ Joint Statement on Reasonable Accommodations under the Fair Housing Act.

**21. Can a local government deny a group home's request for a reasonable accommodation without violating the Fair Housing Act?**

Yes, a local government may deny a group home's request for a reasonable accommodation if the request was not made by or on behalf of persons with disabilities (by, for example, the group home developer or operator) or if there is no disability-related need for the requested accommodation because there is no relationship between the requested accommodation and the disabilities of the residents or proposed residents.

In addition, a group home's request for a reasonable accommodation may be denied by a local government if providing the accommodation is not reasonable—in other words, if it would impose an undue financial and administrative burden on the local government or it would fundamentally alter the local government's zoning scheme. The determination of undue financial and administrative burden must be decided on a case-by-case basis involving various factors, such as the nature and extent of the administrative burden and the cost of the requested accommodation to the local government, the financial resources of the local government, and the benefits that the accommodation would provide to the persons with disabilities who will reside in the group home.

When a local government refuses an accommodation request because it would pose an undue financial and administrative burden, the local government should discuss with the requester whether there is an alternative accommodation that would effectively address the disability-related needs of the group home's residents without imposing an undue financial and administrative burden. This discussion is called an "interactive process." If an alternative accommodation would effectively meet the disability-related needs of the residents of the group home and is reasonable (that is, it would not impose an undue financial and administrative burden or fundamentally alter the local government's zoning scheme), the local government must grant the alternative accommodation. An interactive process in which the group home and the local government discuss the disability-related need for the requested accommodation and possible alternative accommodations is both required under the Act and helpful to all concerned, because it often results in an effective accommodation for the group home that does not pose an undue financial and administrative burden or fundamental alteration for the local government.

## **22. What is the procedure for requesting a reasonable accommodation?**

The reasonable accommodation must actually be requested by or on behalf of the individuals with disabilities who reside or are expected to reside in the group home. When the request is made, it is not necessary for the specific individuals who would be expected to live in the group home to be identified. The Act does not require that a request be made in a particular manner or at a particular time. The group home does not need to mention the Fair Housing Act or use the words "reasonable accommodation" when making a reasonable accommodation request. The group home must, however, make the request in a manner that a reasonable person would understand to be a disability-related request for an exception, change, or adjustment to a rule, policy, practice, or service. When making a request for an exception, change, or adjustment to a local land use or zoning regulation or policy, the group home should explain what type of accommodation is being requested and, if the need for the accommodation is not readily apparent or known by the local government, explain the relationship between the accommodation and the disabilities of the group home residents.

A request for a reasonable accommodation can be made either orally or in writing. It is often helpful for both the group home and the local government if the reasonable accommodation request is made in writing. This will help prevent misunderstandings regarding what is being requested or whether or when the request was made.

Where a local land use or zoning code contains specific procedures for seeking a departure from the general rule, courts have decided that these procedures should ordinarily be followed. If no procedure is specified, or if the procedure is unreasonably burdensome or intrusive or involves significant delays, a request for a reasonable accommodation may,

nevertheless, be made in some other way, and a local government is obligated to grant it if the requested accommodation meets the criteria discussed in Q&A 20, above.

Whether or not the local land use or zoning code contains a specific procedure for requesting a reasonable accommodation or other exception to a zoning regulation, if local government officials have previously made statements or otherwise indicated that an application for a reasonable accommodation would not receive fair consideration, or if the procedure itself is discriminatory, then persons with disabilities living in a group home, and/or its operator, have the right to file a Fair Housing Act complaint in court to request an order for a reasonable accommodation to the local zoning regulations.

### **23. Does the Fair Housing Act require local governments to adopt formal reasonable accommodation procedures?**

The Act does not require a local government to adopt formal procedures for processing requests for reasonable accommodations to local land use or zoning codes. DOJ and HUD nevertheless strongly encourage local governments to adopt formal procedures for identifying and processing reasonable accommodation requests and provide training for government officials and staff as to application of the procedures. Procedures for reviewing and acting on reasonable accommodation requests will help state and local governments meet their obligations under the Act to respond to reasonable accommodation requests and implement reasonable accommodations promptly. Local governments are also encouraged to ensure that the procedures to request a reasonable accommodation or other exception to local zoning regulations are well known throughout the community by, for example, posting them at a readily accessible location and in a digital format accessible to persons with disabilities on the government's website. If a jurisdiction chooses to adopt formal procedures for reasonable accommodation requests, the procedures cannot be onerous or require information beyond what is necessary to show that the individual has a disability and that the requested accommodation is related to that disability. For example, in most cases, an individual's medical record or detailed information about the nature of a person's disability is not necessary for this inquiry. In addition, officials and staff must be aware that any procedures for requesting a reasonable accommodation must also be flexible to accommodate the needs of the individual making a request, including accepting and considering requests that are not made through the official procedure. The adoption of a reasonable accommodation procedure, however, will not cure a zoning ordinance that treats group homes differently than other residential housing with the same number of unrelated persons.

**24. What if a local government fails to act promptly on a reasonable accommodation request?**

A local government has an obligation to provide prompt responses to reasonable accommodation requests, whether or not a formal reasonable accommodation procedure exists. A local government's undue delay in responding to a reasonable accommodation request may be deemed a failure to provide a reasonable accommodation.

**25. Can a local government enforce its zoning code against a group home that violates the zoning code but has not requested a reasonable accommodation?**

The Fair Housing Act does not prohibit a local government from enforcing its zoning code against a group home that has violated the local zoning code, as long as that code is not discriminatory or enforced in a discriminatory manner. If, however, the group home requests a reasonable accommodation when faced with enforcement by the locality, the locality still must consider the reasonable accommodation request. A request for a reasonable accommodation may be made at any time, so at that point, the local government must consider whether there is a relationship between the disabilities of the residents of the group home and the need for the requested accommodation. If so, the locality must grant the requested accommodation unless doing so would pose a fundamental alteration to the local government's zoning scheme or an undue financial and administrative burden to the local government.

**Questions and Answers on Fair Housing Act Enforcement of  
Complaints Involving Land Use and Zoning**

**26. How are Fair Housing Act complaints involving state and local land use laws and practices handled by HUD and DOJ?**

The Act gives HUD the power to receive, investigate, and conciliate complaints of discrimination, including complaints that a state or local government has discriminated in exercising its land use and zoning powers. HUD may not issue a charge of discrimination pertaining to "the legality of any State or local zoning or other land use law or ordinance." Rather, after investigating, HUD refers matters it believes may be meritorious to DOJ, which, in its discretion, may decide to bring suit against the state or locality within 18 months after the practice at issue occurred or terminated. DOJ may also bring suit by exercising its authority to initiate litigation alleging a pattern or practice of discrimination or a denial of rights to a group of persons which raises an issue of general public importance.

If HUD determines that there is no reasonable cause to believe that there may be a violation, it will close an investigation without referring the matter to DOJ. But a HUD or DOJ

decision not to proceed with a land use or zoning matter does not foreclose private plaintiffs from pursuing a claim.

Litigation can be an expensive, time-consuming, and uncertain process for all parties. HUD and DOJ encourage parties to land use disputes to explore reasonable alternatives to litigation, including alternative dispute resolution procedures, like mediation or conciliation of the HUD complaint. HUD attempts to conciliate all complaints under the Act that it receives, including those involving land use or zoning laws. In addition, it is DOJ's policy to offer prospective state or local governments the opportunity to engage in pre-suit settlement negotiations, except in the most unusual circumstances.

## **27. How can I find more information?**

For more information on reasonable accommodations and reasonable modifications under the Fair Housing Act:

- HUD/DOJ Joint Statement on Reasonable Accommodations under the Fair Housing Act, available at <https://www.justice.gov/crt/fair-housing-policy-statements-and-guidance-0> or <http://www.hud.gov/offices/fheo/library/huddojstatement.pdf>.
- HUD/DOJ Joint Statement on Reasonable Modifications under the Fair Housing Act, available at <https://www.justice.gov/crt/fair-housing-policy-statements-and-guidance-0> or [http://www.hud.gov/offices/fheo/disabilities/reasonable\\_modifications\\_mar08.pdf](http://www.hud.gov/offices/fheo/disabilities/reasonable_modifications_mar08.pdf).

For more information on state and local governments' obligations under Section 504:

- HUD website at [http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/fair\\_housing\\_equal\\_opp/disabilities/sect504](http://portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp/disabilities/sect504).

For more information on state and local governments' obligations under the ADA and *Olmstead*:

- U.S. Department of Justice website, [www.ADA.gov](http://www.ADA.gov), or call the ADA information line at (800) 514-0301 (voice) or (800) 514-0383 (TTY).
- Statement of the Department of Justice on Enforcement of the Integration Mandate of Title II of the Americans with Disabilities Act and *Olmstead v. L.C.*, available at [http://www.ada.gov/olmstead/q&a\\_olmstead.htm](http://www.ada.gov/olmstead/q&a_olmstead.htm).
- Statement of the Department of Housing and Urban Development on the Role of Housing in Accomplishing the Goals of *Olmstead*, available at <http://portal.hud.gov/hudportal/documents/huddoc?id=OlmsteadGuidnc060413.pdf>.

For more information on the requirement to affirmatively further fair housing:

- Affirmatively Furthering Fair Housing, 80 Fed. Reg. 42,272 (July 16, 2015) (to be codified at 24 C.F.R. pts. 5, 91, 92, 570, 574, 576, and 903).
- U.S. Department of Housing and Urban Development, Version 1, Affirmatively Furthering Fair Housing Rule Guidebook (2015), *available at* <https://www.hudexchange.info/resources/documents/AFFH-Rule-Guidebook.pdf>.
- Office of Fair Housing and Equal Opportunity, U.S. Department of Housing and Urban Development, Vol. 1, Fair Housing Planning Guide (1996), *available at* <http://www.hud.gov/offices/fheo/images/fhpg.pdf>.

For more information on nuisance and crime-free ordinances:

- Office of General Counsel Guidance on Application of Fair Housing Act Standards to the Enforcement of Local Nuisance and Crime-Free Housing Ordinances Against Victims of Domestic Violence, Other Crime Victims, and Others Who Require Police or Emergency Services (Sept. 13, 2016), *available at* <http://portal.hud.gov/hudportal/documents/huddoc?id=FinalNuisanceOrdGdnce.pdf>.

HERITAGE COVE FARM  
A NORTHERN MICHIGAN THERAPEUTIC COMMUNITY

PO Box 368  
Indian River, MI 49749  
231.290.0580 fax: 231.238.0582

Sent Via email:  
mturisk@cheboygancounty.net  
June 10, 2018

Michael Turisk  
Director of Planning & Zoning  
870 S. Main Street  
Cheboygan, MI 49721

RE: Heritage Cove Farm

Dear Mr. Turisk,

The Cheboygan County Planning Commission's responsibility at this time is to determine if Heritage Cove Farm (hereinafter "HCF") will place any unreasonable increased burden beyond the current capacity of law enforcement, and whether such an increase, **if any**, must be allowed as a reasonable accommodation to HCF's disabled residents under § 18.7.e. of the County zoning ordinance.

Given the views stated at the recent Public Hearing, and those presented in written filings, I ask that you please keep in mind that pursuant to the 2016 **JOINT STATEMENT OF THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT AND THE DEPARTMENT OF JUSTICE ("Joint Statement")** and Michigan and Federal law: both the Americans with Disabilities Act ("ADA") and Fair Housing Amendments Act ("FHAA") apply to municipal zoning decisions. *Pacific Shores Props, LLC v Newport Beach*, 730 F3d 1142, 1157 (CA 9, 2013). Congress enacted the ADA and FHAA in part "to provide a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities." 42 USC 12101(b)(1). The ADA and FHAA recognize that discrimination against people with disabilities persists in areas such as housing. 42 USC 12101(a)(3). Disabilities include mental impairments that substantially limit one or more major life activities. 42 USC 12102(1)(a). The FHAA prohibits discrimination in housing on the basis of "handicap," 42 USC 3604(f)(1), which includes a mental impairment which substantially limits one or more major life activities, 42 USC 3602(h)(1). Discrimination includes "a refusal to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford such person equal opportunity to use and enjoy a dwelling[.]" 42 USC 3604(f)(3)(b). Accordingly, an accommodation is required for persons with disabilities "if the accommodation is (1) reasonable and (2) necessary (3) to afford handicapped persons equal opportunity to use and enjoy housing." *Bryant Woods Inn, Inc v Howard Co, Md*, 124 F3d 597, 603 (CA 4, 1997). An accommodation is reasonable "if it imposes no fundamental alteration in the nature of a program or undue financial and administrative burdens." *Hollis v Chestnut Bend Homeowners Ass'n*, 760 F3d 531, 542 (CA 6, 2014).

Further, pursuant to the Joint Statement: "Even absent a discriminatory intent, state or local governments may be liable under the ADA and FHAA for any land use or zoning law or practice that has an unjustified discriminatory effect because of a protected characteristic." That Joint Statement also states that "When enacting or applying zoning or land use laws, state and local governments may not act because of the fears, prejudices, stereotypes, or unsubstantiated assumptions that community members may have about current or prospective residents because of the residents' protected characteristics. Doing so violates the Acts, even if the officials themselves do not personally share such bias."

Although not a requirement of the Special Use Permit Application (SUP App), we thought it might be beneficial to outline some of the admission, staffing and safety features that will be incorporated when HCF accepts its first resident.

1. As outlined in the SUP App, this project is scheduled to be opened in Phases. Phase I would accommodate up to 12 residents. Our projection is that we will draw 4-6 residents per year. When we get close to reaching our maximum accommodation of 12 residents, we will begin moving into Phase II, admitting up to an additional 12 residents.
2. Potential residents will begin their admission process with a phone call or email communication with HCF, permitting both parties to evaluate if HCF might be a "good fit". If they desire to continue with the process, each applicant will be required to complete admissions materials, which will include: psychiatric recommendations from their referring psychiatrist and/or licensed mental health professional; a physical evaluation from their primary care; a family history; an application and authorization for Release of Information from past treatment hospitals and/or prior residential programs. If appropriate, the applicant will be invited for a site visit with family member(s). The admission decision will be based on the recommendations, admissions materials, documentation from prior treatment programs, a personal interview and goals of the applicant as evaluated by the admissions team.
3. Residents must be voluntary (not court ordered); medication compliant; if recovering from substance abuse, resident must be in remission. HCF will not accept those with a history of violence or sexual offense. No history of dangerous felonies will be permitted, and any criminal history must be revealed and evaluated individually. Persons with a diagnoses of certain psychological disorders, including but not limited to antisocial personality disorder, conduct disorder, or intermittent explosive disorder; and persons with severe developmental disorders, will not be candidates for admission.
4. The admissions team will be comprised of the admissions director, clinical director, and program manager. At this time, there has been no staff hired; specific program designs and policies will be established by the leadership team and Board of Directors once in place. Clinical staffing will include persons with the following professional qualifications: Psychiatrist; Psychologist; Licensed Master Social Workers; Licensed

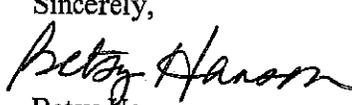
Bachelor's Social Workers; Licensed Counselors; and/or Nurses (RN, CMA). Contrary to what has been suggested by others, Mr. & Ms. Hanson will not be working in a clinical capacity at HCF.

5. HCF will be staffed 24 hours per day. Clinical personnel will be staffed daily and available on-call.
6. HCF is currently working with a security consultant; each cabin will be equipped with an electronic visual-monitoring system for the benefit and security of the residents.

The design as stated above, has been generated based on the interaction of HCF's Board of Directors, community members, consultations with psychiatrists, psychologists, licensed therapists and other similar residential programs. It is of no benefit to HCF to admit a resident that will cause distraction or harm to the other residents or community at large. Success at HCF depends on many factors, the most important of which is to create a safe, healing and nurturing environment where persons with serious and persistent mental illnesses can continue to heal.

On behalf of our Board of Director's, HCF wishes to maintain an open relationship with each of the first responders in our community, and we welcome any feedback or questions you may have.

Sincerely,

  
Betsy Hanson

  
Lawrence P. Hanson

cc: Cheboygan County Planning Commission Members

## Deborah Tomlinson

---

**From:** Gretchen Monette <gmonette@allseasonscommunications.com>  
**Sent:** Tuesday, July 10, 2018 5:16 PM  
**To:** Jodi Beauchamp; pd@tuscarorapolice.com  
**Cc:** Michael C. Turisk; Deborah Tomlinson; Keith Wregglesworth; Karen Johnson; Richard Sangster; Mike Newman; Cal Gouine; Roberta Matelski; John B. Wallace; Robert Bolinger; editor@resorter.com  
**Subject:** Heritage Cove

Dear Sheriff Clarmont of Cheboygan County, Police Chief Temple of Tuscarora Township, and members of the Cheboygan County Planning & Zoning Department and Cheboygan County Board of Commissioners-

I attended a recent Cheboygan County Planning Commission meeting specifically on the issue of the poorly-construed and considered Heritage Cove proposal.

The meeting was to determine if the "proposed project would place demands that would exceed the current capacity of area emergency services." The impact on this proposed residence for 24 mentally unbalanced individuals with little-to-no-supervision will be far-reaching and widespread—make no misjudgment on that—but ultimately it is the safety of the area population, including those deeply troubled souls at Heritage Cove, that is of utmost importance.

I've taken the initiative to compile some details, taken from special reports and studies, which demonstrate the proposed mental health facility will indeed become an undue burden on the public safety resources and first responders. As these examples show, these undue burdens include time spent responding to calls from the proposed mental health assisted living business, depriving officers and resources to other emergencies or requested services, the financial burden to educating officers on treatment of dangerous mentally ill patients and quite possibly the ultimate burden—death.

While many of the details are compiled from larger cities, it is not a stretch to see how their experiences will correlate to our dear communities of Indian River, Topinabee and Cheboygan.

Take from a 2011 Miami Herald special report "Neglected to Death" <https://www.miamiherald.com/news/special-reports/neglected-to-death/article1938076.html>

- "At Nueva Vida, a cluster of cottages (for mentally ill) in Miami-Dade, police were called 38 times in 2008, and investigated six assaults and a brutal murder..."
- "In Lauderhill, a special enclave set aside for a group of ALFs (assisted living facilities) catering to people with mental illness draws police or rescues calls an average of every four hours – 10,703 in five years..."
- "(again in Lauderhill) ...the problems continued: In just 18 months, sheriff's deputies were called to the home 174 times to investigate assaults, thefts and missing persons, records show."

Taken from series of in depth articles in the Star Tribune (Minnesota) <http://www.startribune.com/part-1-police-being-forced-to-front-lines-of-mental-health-crisis/374510841/> and <http://www.startribune.com/bolster-police-training-for-mental-health-crisis-intervention/382540861/>

- "Minnesota's police officers and sheriff's deputies say they're spending more time than ever responding to mental health calls."

- “The Minneapolis Police Department responded to 4,344 “emotionally disturbed person” calls in 2014 and 4,700 such calls in 2015, according to a records query.”

Taken from an April 16, 2015 article in Berkley Side, (California) Mental health calls #1 drain on Berkeley police resources <http://www.berkeleyside.com/2015/04/16/mental-health-calls-are-1-drain-on-berkeley-police-resources>

- “Nationally, 10 percent of police calls are for people having a mental health crisis, according to Berkeley Police Officer Jeff Shannon.”

Taken from Mental Illness Policy [www.mentalillnesspolicy.org](http://www.mentalillnesspolicy.org)

- “In a carefully controlled study comparing individuals with severe mental illness living in the community in New York with other community residents, the former group was found to be three times more likely to commit violent acts ... the sicker the individual, the more likely they were to have been violent.”
- “In 1998, people with mental illnesses killed law enforcement officers at a rate 5.5 times greater than the rest of the population.
- “People with severe mental illnesses are killed by police in justifiable homicides at a rate nearly four times greater than the general public.”

From a 2015 USA Today article <https://www.usatoday.com/story/news/nation/2014/05/12/mental-health-system-crisis/7746535/> :

- “According to the National Alliance on Mental Illness, 40% of adults with serious mental illness are arrested at some point, often for petty crimes – such as loitering or causing a public disturbance – that are caused by their illness...”
- “Experts note that providing home care doesn’t guarantee that people won’t end up hospitalized or jailed.”

From a MLive story, April 2018

[https://www.mlive.com/news/detroit/index.ssf/2018/04/mentally\\_ill\\_man\\_killed\\_by\\_pol.html](https://www.mlive.com/news/detroit/index.ssf/2018/04/mentally_ill_man_killed_by_pol.html)

- “Troy police has previously responded to the home...at least three times on mental health calls... police reports show.”

Additionally, there are numerous examples and references to the dangers and abuses suffered by patients themselves at the hands of assisted living facilities workers. Your department will be called to handle these situations as they occur, which will happen at Heritage Cove, a private sector business poorly managed by people with zero clinical or professional experience with dangerous mental health patients.

While Councilman Freese professed that “he knows, without a doubt” that Sheriff Clarmont and his deputies have experience in handling people in the throes of a mental illness episode, I ask- have any of your officers undergone any type of crisis intervention training (CIT) to deal with the eventuality of interaction with a confused and quite possibly violent adult male? If not, do you plan on spending appropriate funds for that? Where will those funds come from? Are those funds that could helping instead with multiple other issues (opioids, etc.) facing your constituents and creating undue burden on existing services?

While there is no doubt your deputies and the other local officers and emergency responders are skilled and professional, there is also little doubt that their expertise and capabilities will be called upon and challenged in greater and more dangerous capacity if the Heritage Cove mental facility business is ultimately approved.

Sincerely,  
Gretchen A. Monette  
248-981-3852  
vanmonette@att.net

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OLSON, BZDOK & HOWARD

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July 11, 2018

via Email: [debbiet@cheboygancounty.net](mailto:debbiet@cheboygancounty.net)

Cheboygan County Planning Commission  
807 S. Main Street  
Cheboygan, MI 49721

RE: Heritage Cove Farm

Members of the Planning Commission:

I represent the Grandview Beach Association. The Association is extremely concerned with the failure to provide and evaluate a safety impact study for the Heritage Cove Farm project. It is clear from the Court of Appeals opinion that the impact study is separate and independent from comments from the police and sheriff's departments: "The record before us does not include the results of the impact study. It is unclear whether the study has been conducted yet *or* if intervenors have requested comment on the safety issue from the police and sheriff's departments." In other words, the Court of Appeals expected the County to receive and consider *both* an impact study *and* comments from the police and sheriff's departments. They are not one and the same.

In order to fully evaluate the impacts of the project under 18.7.e, the Planning Commission must both seek input from the police and sheriff's departments, *and also* review the findings of an independent, fact-based impact study. The Court of Appeals was also clear that the County does not have to accept any increase in demands to services or hazards as a "reasonable accommodation." The Court expressly stated that "our decision should not be read to suggest that any increase in the demands on fire, police, or other public resources is permissible under § 18.7.e or that any such increase must be allowed as a reasonable accommodation." Once the County has the independent impact study, then it should evaluate if there is any increase in hazards as mentioned in 18.7.e and if so, then the ordinance requires that the Special Use Permit be denied. The only way for the County to do this is through a scientific, independent and fact-based study. Nothing fitting that description has been submitted to the County.

Heritage Cove Farm did apparently submit a document that purports to be a "study" related to safety of the proposed development, but it is no such thing. To begin with, the document does not contain an author. We are left to guess who wrote this purported "study." Additionally, the purported study does nothing but cite to generic information that does not dispute the underlying safety concerns about the project. None of the cited studies actually pertains to the proposed

Planning Commission  
July 11, 2018  
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development. The conclusion is a series of unsupported assertions about the project with a series of unrelated articles.

Finally, I understand that at the last meeting there was reference to a Joint Statement of The Department of Housing and Urban Development and The Department of Justice concerning local land use laws. That document reiterates some important points that are directly applicable here. First, the Act is intended to make decisions about persons with disabilities neutral. In other words, the County should not apply special rules or exemptions to any class of person. As the Joint Statement explains at page 4: "Decisions motivated by a purported desire to benefit a particular group can also violate the Act if they result in differential treatment because of a protected characteristic."

Second, the procedural rules for asking for a variance or rezoning of property still apply. In other words, the County is not supposed to rezone or grant a variance under the guise of "reasonable accommodation: "Where a local land use or zoning code contains specific procedures for seeking a departure from the general rule, courts have decided that these procedures should ordinarily be followed." (Joint Statement at 16). In this case, the Developer has pushed the County to simply ignore its procedural requirements for varying the standards in the Ordinance for special use permits. As the Joint Statement indicates, the Developer should not be allowed to do so without following the proper process. This is particularly relevant to the requirement that an independent, scientific and fact-based impact study be done to evaluate the safety issues in 18.7.e. The Developer should not be able to skip this step and rely on conclusory or incomplete statements about the safety concerns for the project.

Third and finally, the Joint Statement makes it clear that the Developer should not simply dictate the terms of the reasonable accommodation. Instead, there should be an interactive process to determine what (if any) accommodations are appropriate and narrowly tailored to address the reason for the requested accommodation. The Joint Statement explains the process as follows:

[T]he local government should discuss with the requester whether there is an alternative accommodation that would effectively address the disability-related needs of the group home's residents without imposing an undue financial and administrative burden. This discussion is called an "interactive process." If an alternative accommodation would effectively meet the disability-related needs of the residents of the group home and is reasonable (that is, it would not impose an undue financial and administrative burden or fundamentally alter the local government's zoning scheme), the local government must grant the alternative accommodation. An interactive process in which the group home and the local government discuss the disability-related need for the requested accommodation and possible alternative accommodations is both required under the Act and helpful to all concerned, because it often results in an effective accommodation for the group home that does not pose an undue financial and administrative burden or

Planning Commission  
July 11, 2018  
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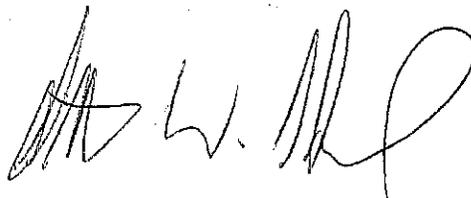
fundamental alteration for the local government.

In this case, the Developer has been anything but interactive. Instead, the Developer has demanded to have its way with the project without evaluating alternatives to minimize impacts on the community or require fundamental alterations to the project. When the County did not respond positively right away, the Developer sued in Federal Court. It is important that the County stick to the process required by the conditions for approval and reiterated by the Court of Appeals: an unbiased scientific impact study for the proposed project. It is critical that the County stick to this requirement and not allow the Developer to bully its way to an unsupported decision under the guise of "reasonable accommodation."

The Developer has also repeatedly suggested that the community concerns about safety are based on "fears and prejudice." Nothing could be further from the truth. Protecting both the community and the patients of the proposed development are of paramount concern. The evidence submitted to the Planning Commission establishes serious safety concerns about the development. Ignoring this evidence is contrary both to the zoning ordinance requirements and common sense. As an example, it would be irresponsible to approve a facility with dementia patients that simply let the patients wander around without restriction. Such a project would have to be denied based on safety concerns for the patients and community. However, in this case, this is exactly the Developer's proposal. As such, this development should be denied based on safety concerns for the patients and community.

For the reasons stated above, we urge the Planning Commission to procure an independent, fact-based study of safety issues for the proposed project under 18.7.e. or, alternatively, deny the special Use Permit based on the limited factual basis that it meets the requirements under 18.7.e. Anything less will fall short of what is required by the Court of Appeals' opinion and what should happen under the law.

Sincerely,

A handwritten signature in black ink, appearing to read "S.W. Howard", with a large, stylized flourish at the end.

Scott W. Howard

SWH/klg  
xc: Peter Wendling, [pwendling@upnorthlaw.com](mailto:pwendling@upnorthlaw.com) (via email only)

**HERITAGE COVE FARM**  
A NORTHERN MICHIGAN THERAPEUTIC COMMUNITY

PO Box 368  
Indian River, MI 49749  
231.290.0580 fax: 231.238.0582

July 9, 2018

Dallas Hyde, Director  
Cheboygan Life Support Systems, Inc.  
536 M.M. Riggs Dr  
Cheboygan, MI 49721

RE: Heritage Cove Farm

Dear Dallas,

Thank you for taking the time to speak with me today regarding Heritage Cove Farm (HCF). As you and I have discussed in the past, the Planning Commission's responsibility is to determine if HCF will place any unreasonable increased burden beyond the current capacity under § 18.7.e. of the County zoning ordinance.

Although not a requirement of the Special Use Permit Application (SUP App), I thought it might be beneficial to outline some of the admissions, staffing and safety features that will be incorporated when HCF accepts its first resident.

1. As outlined in the SUP App, this project is scheduled to be opened in Phases. Phase I would accommodate up to 12 residents. Our projection is that we will draw 4-6 residents per year. When we get close to reaching our maximum accommodation of 12 residents, we will begin moving into Phase II, admitting up to an additional 12 residents.
2. Potential residents will begin their admission process with a phone call or email communication with HCF, permitting both parties to evaluate if HCF might be a "good fit". If they desire to continue with the process, each applicant will be required to complete admissions materials, which will include: psychiatric recommendations from their referring psychiatrist and/or licensed mental health professional; a physical evaluation from their primary care; a family history; an application and authorization for Release of Information from past treatment hospitals and/or prior residential programs. If appropriate, the applicant will be invited for a site visit with family member(s). The admission decision will be based on the recommendations, admissions materials, documentation from prior treatment programs, a personal interview and goals of the applicant as evaluated by the admissions team.
3. Residents must be voluntary (not court ordered); medication compliant; if recovering from substance abuse, resident must be in remission. HCF will not accept those with a history of violence or sexual offense. No history of dangerous felonies will be

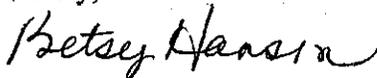
permitted, and any criminal history must be revealed and evaluated individually. Persons with a diagnoses of certain psychological disorders, including but not limited to antisocial personality disorder, conduct disorder, or intermittent explosive disorder; and persons with severe developmental disorders, will not be candidates for admission.

4. The admissions team will be comprised of the admissions director, clinical director, and program manager. At this time, there has been no staff hired; specific program designs and policies will be established by the leadership team and Board of Directors once in place. Clinical staffing will include persons with the following professional qualifications: Psychiatrist; Psychologist; Licensed Master Social Workers; Licensed Bachelor's Social Workers; Licensed Counselors; and/or Nurses (RN, CMA). Contrary to what has been suggested by others, Mr. & Ms. Hanson will not be working in a clinical capacity at HCF.
5. HCF will be staffed 24 hours per day. Clinical personnel will be staffed daily and available on-call.
6. HCF is currently working with a security consultant; each cabin will be equipped with an electronic visual-monitoring system for the benefit and security of the residents.

The design as stated above, has been generated based on the interaction of HCF's Board of Directors, community members, consultations with psychiatrists, psychologists, licensed therapists and other similar residential programs. It is of no benefit to HCF to admit a resident that will cause distraction or harm to the other residents or community at large. Success at HCF depends on many factors, the most important of which is to create a safe, healing and nurturing environment where persons with serious and persistent mental illnesses can continue to heal.

On behalf of our Board of Director's, HCF wishes to maintain an open relationship with each of the first responders in our community, and we welcome any feedback or questions you may have.

Sincerely,



Betsy Hanson, Director  
Heritage Cove Farm

cc: Cheboygan County Planning Dept

**HERITAGE COVE FARM**  
A NORTHERN MICHIGAN THERAPEUTIC COMMUNITY

PO Box 368  
Indian River, MI 49749  
231.290.0580 fax: 231.238.0582

July 9, 2018

Gordon Temple  
Tuscarora Township Police Chief  
3546 S. Straits Hwy.  
Indian River, MI 49749

RE: Heritage Cove Farm

Dear Chief Temple,

Thank you for speaking with me today regarding Heritage Cove Farm (HCF). As you and I have discussed in the past, the Planning Commission's responsibility is to determine if HCF will place any unreasonable increased burden beyond the current capacity under § 18.7.e. of the County zoning ordinance.

Although not a requirement of the Special Use Permit Application (SUP App), I thought it might be beneficial to outline some of the admissions, staffing and safety features that will be incorporated when HCF accepts its first resident.

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permitted, and any criminal history must be revealed and evaluated individually. Persons with a diagnoses of certain psychological disorders, including but not limited to antisocial personality disorder, conduct disorder, or intermittent explosive disorder; and persons with severe developmental disorders, will not be candidates for admission.

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On behalf of our Board of Director's, HCF wishes to maintain an open relationship with each of the first responders in our community, and we welcome any feedback or questions you may have.

Sincerely,



Betsy Hanson, Director  
Heritage Cove Farm

cc: Cheboygan County Planning Dept

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PO Box 368

Indian River, MI 49749

231.290.0580 fax: 231.238.0582

July 9, 2018

Dave Carpenter  
Tuscarora Township Volunteer Fire Chief  
4761 S. Straits Hwy  
Indian River, MI 49749

RE: Heritage Cove Farm

Dear Dave,

Thanks for speaking with me today regarding Heritage Cove Farm (HCF). As you and I have discussed in the past, the Planning Commission's responsibility is to determine if HCF will place any unreasonable increased burden beyond the current capacity under § 18.7.e. of the County zoning ordinance.

Although not a requirement of the Special Use Permit Application (SUP App), I thought it might be beneficial to outline some of the admissions, staffing and safety features that will be incorporated when HCF accepts its first resident.

1. As outlined in the SUP App, this project is scheduled to be opened in Phases. Phase I would accommodate up to 12 residents. Our projection is that we will draw 4-6 residents per year. When we get close to reaching our maximum accommodation of 12 residents, we will begin moving into Phase II, admitting up to an additional 12 residents.
2. Potential residents will begin their admission process with a phone call or email communication with HCF, permitting both parties to evaluate if HCF might be a "good fit". If they desire to continue with the process, each applicant will be required to complete admissions materials, which will include: psychiatric recommendations from their referring psychiatrist and/or licensed mental health professional; a physical evaluation from their primary care; a family history; an application and authorization for Release of Information from past treatment hospitals and/or prior residential programs. If appropriate, the applicant will be invited for a site visit with family member(s). The admission decision will be based on the recommendations, admissions materials, documentation from prior treatment programs, a personal interview and goals of the applicant as evaluated by the admissions team.
3. Residents must be voluntary (not court ordered); medication compliant; if recovering from substance abuse, resident must be in remission. HCF will not accept those with a history of violence or sexual offense. No history of dangerous felonies will be

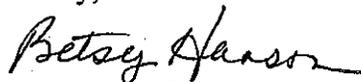
permitted, and any criminal history must be revealed and evaluated individually. Persons with a diagnoses of certain psychological disorders, including but not limited to antisocial personality disorder, conduct disorder, or intermittent explosive disorder; and persons with severe developmental disorders, will not be candidates for admission.

4. The admissions team will be comprised of the admissions director, clinical director, and program manager. At this time, there has been no staff hired; specific program designs and policies will be established by the leadership team and Board of Directors once in place. Clinical staffing will include persons with the following professional qualifications: Psychiatrist; Psychologist; Licensed Master Social Workers; Licensed Bachelor's Social Workers; Licensed Counselors; and/or Nurses (RN, CMA). Contrary to what has been suggested by others, Mr. & Ms. Hanson will not be working in a clinical capacity at HCF.
5. HCF will be staffed 24 hours per day. Clinical personnel will be staffed daily and available on-call.
6. HCF is currently working with a security consultant; each cabin will be equipped with an electronic visual-monitoring system for the benefit and security of the residents.

The design as stated above, has been generated based on the interaction of HCF's Board of Directors, community members, consultations with psychiatrists, psychologists, licensed therapists and other similar residential programs. It is of no benefit to HCF to admit a resident that will cause distraction or harm to the other residents or community at large. Success at HCF depends on many factors, the most important of which is to create a safe, healing and nurturing environment where persons with serious and persistent mental illnesses can continue to heal.

On behalf of our Board of Director's, HCF wishes to maintain an open relationship with each of the first responders in our community, and we welcome any feedback or questions you may have.

Sincerely,



Betsy Hanson, Director  
Heritage Cove Farm

cc: Cheboygan County Planning Dept

**HERITAGE COVE FARM**  
A NORTHERN MICHIGAN THERAPEUTIC COMMUNITY

PO Box 368  
Indian River, MI 49749  
231.290.0580 fax: 231.238.0582

July 10, 2018

Lieutenant Todd Ross  
Cheboygan County Sheriff Department  
870 S. Main Street  
Cheboygan, MI 49721

RE: Heritage Cove Farm

Dear Lieutenant Ross,

Thank you for taking the time to speak with me today regarding Heritage Cove Farm (HCF). As you and I have discussed in the past, the Planning Commission's responsibility is to determine if HCF will place any unreasonable increased burden on your Department, beyond the current capacity under § 18.7.e. of the County zoning ordinance.

Although not a requirement of the Special Use Permit Application (SUP App), I thought it might be beneficial to outline some of the admissions, staffing and safety features that will be incorporated when HCF accepts its first resident.

1. As outlined in the SUP App, this project is scheduled to be opened in Phases. Phase I would accommodate up to 12 residents. Our projection is that we will draw 4-6 residents per year. When we get close to reaching our maximum accommodation of 12 residents, we will begin moving into Phase II, admitting up to an additional 12 residents.
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permitted, and any criminal history must be revealed and evaluated individually. Persons with a diagnoses of certain psychological disorders, including but not limited to antisocial personality disorder, conduct disorder, or intermittent explosive disorder; and persons with severe developmental disorders, will not be candidates for admission.

4. The admissions team will be comprised of the admissions director, clinical director, and program manager. At this time, there has been no staff hired; specific program designs and policies will be established by the leadership team and Board of Directors once in place. Clinical staffing will include persons with the following professional qualifications: Psychiatrist; Psychologist; Licensed Master Social Workers; Licensed Bachelor's Social Workers; Licensed Counselors; and/or Nurses (RN, CMA). Contrary to what has been suggested by others, Mr. & Ms. Hanson will not be working in a clinical capacity at HCF.
5. HCF will be staffed 24 hours per day. Clinical personnel will be staffed daily and available on-call.
6. HCF is currently working with a security consultant; each cabin will be equipped with an electronic visual-monitoring system for the benefit and security of the residents.

The design as stated above, has been generated based on the interaction of HCF's Board of Directors, community members, consultations with psychiatrists, psychologists, licensed therapists and other similar residential programs. It is of no benefit to HCF to admit a resident that will cause distraction or harm to the other residents or community at large. Success at HCF depends on many factors, the most important of which is to create a safe, healing and nurturing environment where persons with serious and persistent mental illnesses can continue to heal.

On behalf of our Board of Director's, HCF wishes to maintain an open relationship with each of the first responders in our community, and we welcome any feedback or questions you may have.

Sincerely,



Betsy Hanson, Director  
Heritage Cove Farm

cc: Cheboygan County Planning Dept

**JULY 10, 2018**

**TO: CHEBOYGAN COUNTY PLANNING COMMISSION MEMBERS**

**RE: HERITAGE COVE FARM ("HCF") - FAILURE TO SATISFY 18.7e**

There are two separate and distinct requirements within Section 18.7e of the Cheboygan County Zoning Ordinance ("ZO") and HCF must satisfy both requirements in order to receive a special use permit. It does not. One of those requirements states,

***"the special land use will not "...increase hazards from fire or other dangers as to the subject property or adjacent properties." ("Safety Standard")***

Disregarding the fact that the letters from local first responders do not constitute an "impact study" (which is a separate requirement), they fail to address the Safety Standard. In fact, not one of the letters makes a single reference to "hazards from fire or other dangers".

Furthermore, the Grandview Beach Association and I have provided you with several studies, articles and data regarding the proven increase in violent behavior associated with patients diagnosed with bipolar and schizophrenia. You are also in possession of a document titled *Heritage Cove Farm Study Regarding Cheboygan County Zoning Ordinance 18.7e* prepared by an unknown author. This document also clearly indicates a direct correlation between mental illness and increased violence but blames such increase in violence on the failure to take medication, drugs, alcohol and lack of proper treatment, as if it's okay. The reason for the increased danger is irrelevant. This document goes on to state, *"...fewer than one third of adults and half of children with a diagnosed mental illness receive mental health services in a given year."* In other words, more than two thirds of adults with mental illness do not receive treatment which according to this "study", means they are in fact more prone to violent behavior!

To his credit, Mr. Freese read these studies and attempted to form his own opinion. He quoted and accepted various statistics as true and relevant. For example, and I quote:

***"I would have to agree that there is enough information provided that establishes that people with schizophrenia or bipolar disease do pose an increased risk." and the report "reaffirms that they are more likely to commit violent crime."***

That should be the end of this discussion. However, regarding the increase in crime in connection with HCF, Mr. Freese goes on to state in his statistical thesis the following and suggests not only is a 1.3% increase in crime not relevant, it will be offset by a reduction in crime due to the declining county population!

***"...that average would be about 13.8 times for the whole population. If you increase the likelihood of crime by 13.8 times based on the percentage of the population you get an increase in the crime rate in Cheboygan County of .0127374 or about 1.3%. Now, is that an undue burden on the police, fire and the rest of it in the county? I don't know what undue burden is. But I do know that the Cheboygan County population has decreased by 1,000 since the last census. That happens to be 3.8% or 3 times as much lost population and therefore less crime than the increase caused by these 26 people (at HCF)."***

**JULY 10, 2018**

Wow! Aside from being the most absurd and irresponsible comment I've ever heard from a public official (or anyone for that matter) whose duty it is to promote and safeguard the health and safety of the people of Cheboygan County, the issue has nothing to do with "undue burden". The specific flaw with Mr. Freese's logic is that he is trying to determine if the increase in crime (1.3% according to his calculation) would create an undue burden on local responders (see underlined portion of quote above). That is only part of the question. Mr. Freese apparently forgot that 18.7e also contains a requirement that the special use can't increase hazards from fire or other dangers (the Safety Standard). The threshold for such increase in hazards is 0.0%, yet he has acknowledged that HCF will increase crime by 1.3%.

There were 1,583 crimes committed in Cheboygan County in 2016 according to Michigan State Police's Uniform Crime Reports (see Exhibit A attached). Using Mr. Freese's logic and his 1.3% increase in crime, that would translate to an additional 20+ crimes/year as a result of HCF and those crimes would have to occur at HCF or in the Grandview Beach neighborhood as HCF would be the cause for such increase!

**How can any of you be in favor of a project that, by Mr. Freese's own admission, will result in a 1.3% increase in crime (20 crimes per year) in Cheboygan County? Any additional risk to the life and safety of people that live nearby or work /reside at HCF, however small it may be, is not acceptable and violates 18.7e (due to increased hazards). In fact, Section 1.2 of the Zoning Ordinance specifically states that the provisions herein are intended to "reduce hazards to life and property" - not increase them.**

You really should consider the personal risk you are exposing yourself to if you vote in favor of this application. This debacle you have created is absolutely no different than the situation in Flint, MI where officials were charged with manslaughter for intentionally ignoring the evidence in front of them. Mr. Wendling has stated in meetings that there is plenty of evidence on the record to deny the application. In fact, it's overwhelming and now, more incriminating than ever.

**I urge you to do your job, consider the evidence and deny/revoke this application for failing to satisfy all requirements of 18.7e of the ZO.**

Sincerely,

*Thomas Mangum*

cc: Scott Howard  
Cheboygan County Board of Commissioners

# EXHIBIT A



## MICHIGAN CRIME STATISTICS

Requested On: 7/10/2018

Population Served: 28,134

Criteria: 2016 Cheboygan County Offenses By Agency Type

Crime Type	File Class	Sheriffs	Police Departments	State Police	Total
<b>Crimes Against Person</b>					
MURDER/NONNEGLIGENT MANSLAUGHTER (VOLUNTARY)	9001	0	0	0	0
NEGLIGENT HOMICIDE/MANSLAUGHTER (INVOLUNTARY)	9002	0	0	0	0
NEGLIGENT HOMICIDE VEHICLE/BOAT	9003	0	0	0	0
KIDNAPPING/ABDUCTION	10001	0	0	0	0
PARENTAL KIDNAPPING	10002	0	0	0	0
SEXUAL PENETRATION PENIS/VAGINA CSC 1ST	11001	5	4	4	13
SEXUAL PENETRATION PENIS/VAGINA CSC 3RD	11002	0	0	2	2
SEXUAL PENETRATION ORAL/ANAL CSC 1ST	11003	1	1	2	4
SEXUAL PENETRATION ORAL/ANAL CSC 3RD	11004	0	0	0	0
SEXUAL PENETRATION OBJECT CSC 1ST	11005	0	0	0	0
SEXUAL PENETRATION OBJECT CSC 3RD	11006	0	0	0	0
SEXUAL CONTACT FORCIBLE CSC 2ND	11007	1	6	3	10
SEXUAL CONTACT FORCIBLE CSC 4TH	11008	1	8	2	11
NONAGGRAVATED ASSAULT	13001	46	86	18	150
AGGRAVATED/FELONIOUS ASSAULT	13002	1	8	4	13
INTIMIDATION/STALKING	13003	2	10	2	14
SEXUAL PENETRATION NONFORCIBLE BLOOD/AFFINITY	36001	0	0	0	0
SEXUAL PENETRATION NONFORCIBLE OTHER	36002	0	0	0	0
SEX OFFENSE OTHER	36004	2	7	0	9
HUMAN TRAFFICKING COMM SEX ACTS	64001	0	0	0	0
HUMAN TRAFFICKING INVOL SERVITUDE	64002	0	0	0	0
<b>Total For Crimes Against Persons</b>		<b>59</b>	<b>130</b>	<b>37</b>	<b>226</b>
<b>Crimes Against Property</b>					
ROBBERY	12000	0	1	0	1
ARSON	20000	1	1	0	2
EXTORTION	21000	0	0	0	0
BURGLARY FORCED ENTRY	22001	24	14	12	50
BURGLARY ENTRY WITHOUT FORCE (INTENT)	22002	3	0	0	3
BURGLARY ENTRY W/OUT AUTH. W/OR W/OUT FORCE	22003	2	4	1	7
LARCENY POCKETPICKING	23001	0	0	0	0
LARCENY PURSESNAATCHING	23002	0	0	0	0
LARCENY THEFT FROM BUILDING	23003	4	44	4	52
LARCENY THEFT FROM COIN OPERATED MACHINE/DEV.	23004	0	0	0	0
LARCENY THEFT FROM MOTOR VEHICLE	23005	4	25	2	31
LARCENY THEFT OF MOTOR VEH PARTS/ACCESSORIES	23006	0	1	0	1
LARCENY OTHER	23007	33	98	6	137
MOTOR VEHICLE THEFT	24001	2	4	0	6
MOTOR VEHICLE AS STOLEN PROPERTY	24002	0	0	0	0
MOTOR VEHICLE FRAUD	24003	0	0	0	0
FORGERY/COUNTERFEITING	25000	0	4	0	4
FRAUD FALSE PRETENSE/SWINDLE/CONFIDENCE GAME	26001	5	7	0	12
FRAUD CREDIT CARD/ATM	26002	1	4	0	5
FRAUD IMPERSONATION	26003	0	7	0	7
FRAUD WELFARE	26004	0	0	0	0
FRAUD WIRE	26005	0	3	0	3
FRAUD BAD CHECKS	26006	5	17	1	23
FRAUD IDENTITY THEFT	26007	1	1	1	3
FRAUD HACKING/COMPUTER INVASION	26008	0	0	0	0
EMBEZZLEMENT	27000	1	4	1	6
STOLEN PROPERTY	28000	0	0	0	0
DAMAGE TO PROPERTY	29000	21	55	8	84
RETAIL FRAUD MISREPRESENTATION	30001	0	0	0	0
RETAIL FRAUD THEFT	30002	0	64	0	64
RETAIL FRAUD REFUND/EXCHANGE	30003	0	2	0	2

RETAIL FRAUD ORGANIZED CRIME	30004	0	0	0	0
BRIBERY	51000	0	0	0	0
<b>Total For Crimes Against Property</b>		<b>107</b>	<b>360</b>	<b>36</b>	<b>503</b>
<b>Crimes Against Society</b>	<b>File Class</b>	<b>Sheriffs</b>	<b>Police Departments</b>	<b>State Police</b>	<b>Total</b>
JUSTIFIABLE HOMICIDE	9004	0	0	0	0
VIOLATION OF CONTROLLED SUBSTANCE	35001	45	21	121	187
NARCOTIC EQUIPMENT VIOLATIONS	35002	0	1	0	1
PEEPING TOM	36003	0	0	0	0
OBSCENITY	37000	0	3	1	4
FAMILY ABUSE/NEGLECT NONVIOLENT	38001	1	2	2	5
FAMILY NONSUPPORT	38002	0	0	0	0
GAMBLING BETTING/WAGERING	39001	0	0	0	0
GAMBLING OPERATING/PROMOTING/ASSISTING	39002	0	0	0	0
GAMBLING EQUIPMENT VIOLATIONS	39003	0	0	0	0
GAMBLING SPORTS TAMPERING	39004	0	0	0	0
COMMERCIALIZED SEX PROSTITUTION	40001	0	0	0	0
COMMERCIALIZED SEX ASSISTING/PROMOTING PROST.	40002	0	0	0	0
PURCHASING PROSTITUTION	40003	0	0	0	0
LIQUOR LICENSE ESTABLISHMENT	41001	0	1	0	1
LIQUOR VIOLATIONS OTHER	41002	12	18	10	40
DRUNKENNESS	42000	0	0	0	0
WEAPONS OFFENSE CONCEALED	52001	2	2	6	10
WEAPONS OFFENSE EXPLOSIVES	52002	0	0	0	0
WEAPONS OFFENSE OTHER	52003	1	1	1	3
DISORDERLY CONDUCT	53001	2	43	3	48
PUBLIC PEACE OTHER	53002	0	1	5	6
OUTL OR OUID	54002	53	54	39	146
TRESPASS	57001	0	8	5	13
VAGRANCY	63000	0	0	0	0
ANIMAL CRUELTY	72000	0	0	0	0
<b>Total For Crimes Against Society</b>		<b>116</b>	<b>155</b>	<b>193</b>	<b>464</b>
<b>Crimes Against All Other</b>	<b>File Class</b>	<b>Sheriffs</b>	<b>Police Departments</b>	<b>State Police</b>	<b>Total</b>
SOVEREIGNTY	1000	0	0	0	0
MILITARY	2000	0	0	0	0
IMMIGRATION	3000	0	0	0	0
ABORTION	14000	0	0	0	0
POSSESSION OF BURGLARY TOOLS	22004	0	0	0	0
FAMILY OTHER	38003	2	2	0	4
OBSTRUCTING POLICE	48000	5	7	1	13
ESCAPE/FLIGHT	49000	1	0	0	1
OBSTRUCTING JUSTICE	50000	164	81	42	287
HIT AND RUN MOTOR VEHICLE ACCIDENT	54001	4	14	5	23
HEALTH AND SAFETY	55000	8	13	1	22
CIVIL RIGHTS	56000	0	0	0	0
INVASION OF PRIVACY OTHER	57002	0	1	1	2
SMUGGLING	58000	0	0	0	0
ELECTION LAWS	59000	0	0	0	0
ANTITRUST	60000	0	0	0	0
TAX/REVENUE	61000	0	0	1	1
CONSERVATION	62000	1	17	7	25
JUVENILE RUNAWAY	70000	2	4	1	7
MISCELLANEOUS CRIMINAL OFFENSE	73000	1	4	0	5
SOLICITATION (ALL CRIMES EXCEPT PROSTITUTION)	75000	0	0	0	0
CONSPIRACY (ALL CRIMES)	77000	0	0	0	0
<b>Total For Crimes Against All Other</b>		<b>188</b>	<b>143</b>	<b>59</b>	<b>390</b>
<b>Grand Total of All Crime Types:</b>		<b>470</b>	<b>788</b>	<b>325</b>	<b>1,583</b>

Total Crime Cheboygan County 2016 (above) 1,583  
Increase in Crime Rate due to HCF per Mr. Freese 1.3%  
Increase in Crimes/Yr due to HCF 20.6

The Board of the Grandview Beach Association (GBA), representing more than 60 owners on Grandview Beach, request answers to the following questions based upon documents sent prior to the Public Hearing on June 26, 2018 as well as comments made at the June 26<sup>th</sup> Public Hearing.

- 1) According to Planning Commission Chairperson, Patty Croft, the plans presented and approved by the Planning Commission for Heritage Cove Farm are "not the final plans."
  - A) *How can the comments from first responders/EMS personnel accurately represent the possible impact on their resources if the plans for Heritage Cove Farm have not been finalized?*
  - B) *How can the Planning Commission properly and accurately approve a major development of this size and possible impact if the plans have not be finalized?*
  - C) *Is it Standard Operating Procedure to summarily approve plans for a major development in Cheboygan County without finalized plans?*
  - D) *How can an impact study be completed without knowing what amenities, services, and safety protocols will be in place?*
  - E) *How can you confirm that Heritage Cove Farm will not increase hazards from fire or other dangers without final plans? For example, Betsy Hanson refused to disclose whether or not the units would contain gas fireplaces. A fireplace in a unit for a patient who has severe mental illness would likely pose a significant increase in hazard from fire which would be reason to deny the application. Why was this not addressed?*
- 2) We agree that all people – Heritage Cove Farm patients and Grandview Beach residents - should be treated as human beings and deserve dignity. Nursing homes strive to treat their residents with dignity, but have safety and security features so that those with dementia and Alzheimer's do not leave. Homes for juvenile delinquents have safety and security features for obvious reasons. Commissioner Freese confirmed that those with schizophrenia and bipolar disorders have a higher incidence of committing violent crimes (an average of 13.8 TIMES as likely). *So what safety and security features have been built into Heritage Cove Farm?*
- 3) The Tuscarora Township Police Chief, in his second letter to the Planning Commission clearly stated that his previous letter "was NOT based on an impact study, nor is this one." *Since his department is the first responder, how can the Planning Commission possibly call what has been submitted an impact study? Why are you ignoring his second letter?*
- 4) The Tuscarora Township Police Chief said in his second letter, "the mental well-being of these residents is an unknown variable at this time." Clearly, he does not know what impact these severely mentally ill adults will have on his department. *How can the Planning Commissioners?*
- 5) The Zoning Ordinance in 18.7.e says that "the proposed special use permit will not place demands on fire, police or other public resources in excess of current capacity **NOR increase hazards from fire or other dangers in the subject property or adjacent properties.**" Commissioner Freese said at the Public Hearing that he agrees that "there is enough information provided that establishes that people with schizophrenia and bipolar pose an increased risk..." He went on to say, "They are more likely to commit violent crimes – men are

4.6 times as likely and woman are 23.2 times more likely – the average is 13.8 times more likely than the general population.” Whatever the chances of violent crime, 18.7.e clearly states that it must not increase this danger. *How can this the Special Use Permit be approved knowing that it WILL INCREASE the danger to the adjacent property?*

- 6) While Grandview Beach residents were required to state their name and address in the Public Hearing and identify the documents that they submitted, there was a document submitted on June 26<sup>th</sup> that had no author. *Who was the author of the Heritage Cove Farm Study Regarding Cheboygan County Zoning Ordinance 18.7.e?*
- 7) *Since the plans for Heritage Cove Farm are not “final” how do Planning Commissioners know for sure what the plans are for making certain that the patients are regularly receiving their medications.*
- 8) *Since the plans for Heritage Cove Farm are not “final” how do Planning Commissioners know what the “voluntary admission and recommendation” of patients will entail? Will they have a history of violent or petty crime or drug abuse?*
- 9) The residents of Grandview Beach who attended the Public Hearing were struck by the contradictions and unresponsiveness of most Planning Commissioner’s to their letters and concerns. Since it was not required to be held, this Public Hearing appeared to be conducted for no other reason than to provide the appearance of thoroughness in connection with future litigation. *Why were our concerns – especially those of the development’s next door neighbors - not addressed or even considered?*

We request that the Planning Commission review these questions and provide answers in writing to the GBA Board President prior to the Planning Commission meeting on 7/18/2018.

Signed,

David Lurie, Board President [dlurie2001@comcast.net](mailto:dlurie2001@comcast.net)

Walt Czapiga, Vice President

Judy Boyer, Treasurer

Roger Harris, Director

Julie Osterlund, Director

Pat Monette, Director

Bill Hahn, Director

Tom Mangum, Director

Chris Tucker, Director

Steve Winchell, Director

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OLSON, BZDOK & HOWARD

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July 16, 2018

via Email: [debbiet@cheboygancounty.net](mailto:debbiet@cheboygancounty.net)

Cheboygan County Planning Commission  
807 S. Main Street  
Cheboygan, MI 49721

RE: Heritage Cove Farm

To Cheboygan County Planning Commissioners:

I understand that the Applicant has requested the Heritage Cove Farm be tabled to allow the Developer time to submit additional information.

This request should be categorically denied. The Applicant has had more than 900 days to provide additional details about their development. Furthermore, the Applicant should have provided all details to the Planning Commission prior to the approval of the Special Use Permit in January 2016. The Applicant should have already defined and presented all the details necessary for your consideration.

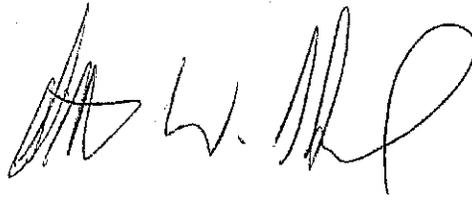
The minutes indicate this exact point was reiterated by the County's legal counsel: "*Mr. Wendling stated that he recommends that the Planning Commission provide a minimum of two weeks to obtain this material and allow any more materials to come in. Mr. Wendling stated this will allow plenty of time before the meeting to be able to review the exhibits. Ms. Croft stated that the next Planning Commission meeting will be July 11, 2018 and there will be another meeting on July 18, 2018. Mr. Turisk stated that there is one application for the July 11, 2018 at this time. Mr. Wendling stated that July 18, 2018 will be a better date for this to be reviewed.*"

Notably, this 11<sup>th</sup> hour request is only for the Applicant and nobody else. You have given specific deadlines to both the applicant and the citizens and taxpayers of Cheboygan County to comment. You established a hard deadline for all documents to be sent in by July 11, 2018. This was communicated clearly and emphatically at the June 26<sup>th</sup> Public Meeting. My clients have abided by that deadline. The Applicant needs to abide by the deadline too.

Planning Commission  
July 16, 2018  
Page 2 of 2

The County needs to treat the Applicant the same as it is treating the general public. Giving the Applicant additional time to submit information while cutting off the public is unfair and unjust. Please keep this matter on the agenda and hold the deadline that you gave to all parties.

Sincerely,

A handwritten signature in black ink, appearing to read "S.W. Howard". The signature is stylized with a large, looped initial "S" and a long, sweeping tail.

Scott W. Howard

SWH/klg  
xc: Peter Wendling, [pwendling@upnorthlaw.com](mailto:pwendling@upnorthlaw.com) (via email only)

HERITAGE COVE FARM  
A NORTHERN MICHIGAN THERAPEUTIC COMMUNITY

PO Box 368

Indian River, MI 49749

231.290.0580 fax: 231.238.0582

Sent Via email:

mturisk@cheboygancounty.net

June 10, 2018

Michael Turisk  
Director of Planning & Zoning  
870 S. Main Street  
Cheboygan, MI 49721

RE: Heritage Cove Farm

Dear Mr. Turisk,

The Cheboygan County Planning Commission's responsibility at this time is to determine if Heritage Cove Farm (hereinafter "HCF") will place any unreasonable increased burden beyond the current capacity of law enforcement, and whether such an increase, if any, must be allowed as a reasonable accommodation to HCF's disabled residents under § 18.7.e. of the County zoning ordinance.

Given the views stated at the recent Public Hearing, and those presented in written filings, I ask that you please keep in mind that pursuant to the 2016 **JOINT STATEMENT OF THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT AND THE DEPARTMENT OF JUSTICE ("Joint Statement")** and Michigan and Federal law: both the Americans with Disabilities Act ("ADA") and Fair Housing Amendments Act ("FHAA") apply to municipal zoning decisions. *Pacific Shores Props, LLC v Newport Beach*, 730 F3d 1142, 1157 (CA 9, 2013). Congress enacted the ADA and FHAA in part "to provide a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities." 42 USC 12101(b)(1). The ADA and FHAA recognize that discrimination against people with disabilities persists in areas such as housing. 42 USC 12101(a)(3). Disabilities include mental impairments that substantially limit one or more major life activities. 42 USC 12102(1)(a). The FHAA prohibits discrimination in housing on the basis of "handicap," 42 USC 3604(f)(1), which includes a mental impairment which substantially limits one or more major life activities, 42 USC 3602(h)(1). Discrimination includes "a refusal to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford such person equal opportunity to use and enjoy a dwelling[.]" 42 USC 3604(f)(3)(b). Accordingly, an accommodation is required for persons with disabilities "if the accommodation is (1) reasonable and (2) necessary (3) to afford handicapped persons equal opportunity to use and enjoy housing." *Bryant Woods Inn, Inc v Howard Co, Md*, 124 F3d 597, 603 (CA 4, 1997). An accommodation is reasonable "if it imposes no fundamental alteration in the nature of a program or undue financial and administrative burdens." *Hollis v Chestnut Bend Homeowners Ass'n*, 760 F3d 531, 542 (CA 6, 2014).

Further, pursuant to the Joint Statement: "Even absent a discriminatory intent, state or local governments may be liable under the ADA and FHAA for any land use or zoning law or practice that has an unjustified discriminatory effect because of a protected characteristic." That Joint Statement also states that "When enacting or applying zoning or land use laws, state and local governments may not act because of the fears, prejudices, stereotypes, or unsubstantiated assumptions that community members may have about current or prospective residents because of the residents' protected characteristics. Doing so violates the Acts, even if the officials themselves do not personally share such bias."

Although not a requirement of the Special Use Permit Application (SUP App), we thought it might be beneficial to outline some of the admission, staffing and safety features that will be incorporated when HCF accepts its first resident.

1. As outlined in the SUP App, this project is scheduled to be opened in Phases. Phase I would accommodate up to 12 residents. Our projection is that we will draw 4-6 residents per year. When we get close to reaching our maximum accommodation of 12 residents, we will begin moving into Phase II, admitting up to an additional 12 residents.
2. Potential residents will begin their admission process with a phone call or email communication with HCF, permitting both parties to evaluate if HCF might be a "good fit". If they desire to continue with the process, each applicant will be required to complete admissions materials, which will include: psychiatric recommendations from their referring psychiatrist and/or licensed mental health professional; a physical evaluation from their primary care; a family history; an application and authorization for Release of Information from past treatment hospitals and/or prior residential programs. If appropriate, the applicant will be invited for a site visit with family member(s). The admission decision will be based on the recommendations, admissions materials, documentation from prior treatment programs, a personal interview and goals of the applicant as evaluated by the admissions team.
3. Residents must be voluntary (not court ordered); medication compliant; if recovering from substance abuse, resident must be in remission. HCF will not accept those with a history of violence or sexual offense. No history of dangerous felonies will be permitted, and any criminal history must be revealed and evaluated individually. Persons with a diagnoses of certain psychological disorders, including but not limited to antisocial personality disorder, conduct disorder, or intermittent explosive disorder; and persons with severe developmental disorders, will not be candidates for admission.
4. The admissions team will be comprised of the admissions director, clinical director, and program manager. At this time, there has been no staff hired; specific program designs and policies will be established by the leadership team and Board of Directors once in place. Clinical staffing will include persons with the following professional qualifications: Psychiatrist; Psychologist; Licensed Master Social Workers; Licensed

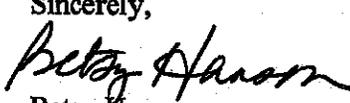
Bachelor's Social Workers; Licensed Counselors; and/or Nurses (RN, CMA).  
Contrary to what has been suggested by others, Mr. & Ms. Hanson will not be working in a clinical capacity at HCF.

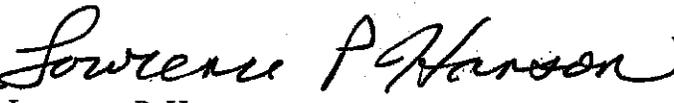
5. HCF will be staffed 24 hours per day. Clinical personnel will be staffed daily and available on-call.
6. HCF is currently working with a security consultant; each cabin will be equipped with an electronic visual-monitoring system for the benefit and security of the residents.

The design as stated above, has been generated based on the interaction of HCF's Board of Directors, community members, consultations with psychiatrists, psychologists, licensed therapists and other similar residential programs. It is of no benefit to HCF to admit a resident that will cause distraction or harm to the other residents or community at large. Success at HCF depends on many factors, the most important of which is to create a safe, healing and nurturing environment where persons with serious and persistent mental illnesses can continue to heal.

On behalf of our Board of Director's, HCF wishes to maintain an open relationship with each of the first responders in our community, and we welcome any feedback or questions you may have.

Sincerely,

  
Betsy Hanson

  
Lawrence P. Hanson

cc: Cheboygan County Planning Commission Members

# Impact Study

## Police, Fire, and Other Resources Heritage Cove Farm

Cheboygan County, Michigan

July 25, 2018

# IMPACT STUDY

## Purpose

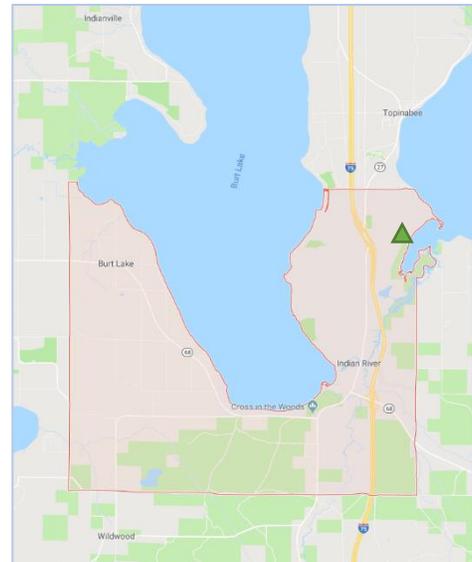
The purpose of this study is to examine the likely impact of the proposed development of a 24-person therapeutic farm community and ancillary facilities upon police, fire, and other public resources currently provided by Tuscarora Township, Cheboygan County, and/or private entities. Information in the study is intended to respond to questions and comments posed at the County Planning Commission's June 26 public hearing regarding this development.

## Project Understanding

The proposed project consists of a farm, community house, dining hall, and cabins to be located on a 33-acre parcel on the southwest end of Mullett Lake, just east of I-75. Ultimately, the farm could be occupied by no more than 24 residents in efficiency cabins, along with three staff members and their families. As planned, the project is expected to occur in two phases with up to 12 residents in each phase, over a period of years. Other staff would be employed during the day but would not reside on the property.

Activities associated with the proposed use would include individual and group therapy, farming, crafts, woodworking, and recreational pursuits. No retail sales would occur on the subject site.

The subject site abuts the west shore of Mullett Lake. Much of the property is heavily wooded, providing a natural buffer and screening from surrounding properties. The nearest neighboring home is east of the site and separated from the proposed building area by more than 300 feet of dense woods.



## Project Status

Both site plan approval and, to the extent required for individual uses, special land use approval have been granted by the Cheboygan County Planning Commission for the proposed development. This determination has been affirmed by both the Cheboygan County Circuit Court and the Michigan Court of Appeals. However, the special land use approval has been conditioned upon obtaining additional information in support of Section 18.7e of the County Zoning Ordinance. This section is one of several review criteria to be considered in evaluating the appropriateness of a special land use. All other special use standards have been satisfied. Specifically, Section 18.7e requires a finding by the Planning Commission that:

“the proposed special use will not place demands on police, fire, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.”

The term “other public resources”, while not defined in the ordinance, has been determined to reference impact on ambulance services and potential impact on public roads.

## Zoning Requirements

Beyond the language of Section 18.7e, the ordinance doesn't offer any guidance regarding the format or content of a statement that would enable such a finding by the Commission. In the absence of such specific requirements, this impact study provides relevant information regarding available public facilities, anticipated project impacts, and typical demands of other potential uses to allow the Planning Commission to reach its decision.

## Current First-Responder and Public Resources

The subject property is located within Tuscarora Township which maintains its own police force and fire department. Other resources are available from Cheboygan County and private providers, as described below:

- **Police:**  
According to the Township's website, the Tuscarora Township police department "is a 24 hour, 7 day a week operation, with officers on patrol at all times." It consists of eight officers, including the chief and a sergeant.

In addition, the Cheboygan County Sherriff's Department provides supplementary services, as needed, and maintains 12 certified officers on road patrol, including two K-9 units. The department also staffs a detective unit and a variety of specialty services (dive team, mounted unit, and search and rescue) available to the community.

- **Fire:**  
The Tuscarora Township Fire Department is located in Indian River, less than five miles from the subject property. However, an even closer fire station in Mullett Township is located approximately 3.6 miles north of the site. According to the Cheboygan County Master Plan, three fire stations are located within a five-mile radius of the subject property. Adjacent departments are available, through mutual aid agreements, to provide support and assistance if needed. It should be noted that some locations within the Cheboygan County are as much as 12 miles from the nearest fire station.



- **Ambulance:**  
Cheboygan Life Support Services is the ambulance provider throughout Cheboygan and Emmet Counties. Its primary office is located in the City of Cheboygan but a supplementary service facility is located within Tuscarora Township within 3.5 miles of the site.
- **Roads:**  
As is the case in Michigan, townships have no direct control over their roads. All roads, except for State and Federal highways, are under the jurisdiction of the county. The Cheboygan County Road Commission is responsible for the local roads within Tuscarora Township.

## Service Demands

- *Development Under Existing Zoning:*  
Currently, as zoned, the subject site could be developed, by right, for a wide array of uses, including: single-family and two-family dwellings. Assuming a minimum one-acre lot for each dwelling and approximately 20 percent of the subject property would be devoted to interior streets to provide access to those lots, 26 homes could be built on the site. According to the 2010 US Census, the average household population of Tuscarora Township was 2.23 persons. Using that figure, the potential 26 homes, allowed as a matter of right, would add 58 residents to the Township, more than double the number to be generated by the proposed development.
- *Population Change:*  
Unlike many communities concerned that growth and development will create impacts and generate demands that exceed their ability to efficiently and economically provide services, both the Township and County have experienced continued loss of population at least since 2000, as shown in the following table:

Historic Population Change (2000 – 2016)*				
Census Year	Tuscarora Township		Cheboygan County	
	Number	% Change	Number	% Change
2000	3,091		26,448	
2010	3,038	-1.7	26,152	-1.1
2016	2,971	-2.2	25,369	-3.0

\* US Census

According to the most recent (2016) estimates available from the Census Bureau, the Township lost 120 persons between 2000 and 2016, more than four times the number of persons that would reside on the subject property.

- *Statements from Local Service Providers:*  
In response to requests from the County, each of the emergency service agencies responsible for providing assistance to the users of the subject property has submitted letters indicating that the development would not cause any undue demands on their ability to provide the needed service. Likewise, the County Road Commission has also provided a statement, indicating improvements will be necessary within the subject property but acknowledging that the Road Commission cannot require improvements to the road. Those letters are attached to this study.

## Conclusions/Findings of Fact

Typically, assurances regarding potential or perceived impacts on local services are imposed in communities concerned that rapid growth will out-pace the capacity of streets, utilities, or municipal services and impose an undue burden. In Tuscarora Township, as in Cheboygan County overall, the population has been declining for years. Services are available to accommodate a population threshold that is no longer present. Therefore, the addition of 24 residents and support staff will not impose an undue burden on the available service capacity.

With respect to police services, in particular, Tuscarora Township maintains a police department at a level above what is commonly found in other townships throughout Michigan and certainly for communities of its size. Most rural townships in the State rely on the county sheriff to provide policing.

Even larger suburban townships frequently contract with the sheriff to provide services rather than creating their own department. One illustration of this not uncommon arrangement is found in Cannon Township, a nearly 36 square mile suburb of Grand Rapids with a population of approximately 14,000. Rather than staffing its own force, the Township contracts with the Kent County Sheriff to supplement routine County services by having one dedicated patrol officer in the community for 12 hours each day.

While the focus of this study is on first-responders, roads have also been cited as a “public resource”. It should be recognized that any new development will contribute some additional traffic to the adjacent road network. The impact of that traffic varies by type of use. The proposed therapeutic farm will generate some added traffic, primarily a result of employees going to and from work. However, this is far less than would be created if the subject site was developed as a single-family subdivision, as current zoning would permit by right. According to the Institute of Transportation Engineers, *Trip Generation Manual*, a single-family home generates approximately 10 vehicle trips per day. At that rate, a 26-lot subdivision could reasonably be expected to contribute 260 new trips each day to the abutting road network, far more than the traffic to be added by the proposed use.

The most compelling finding supporting Section 18.7e comes from the first responders themselves. Each of the experts who head the various police, fire, and ambulance services has stated that the proposed use will not place demands on their resources in excess of current capacity. Assurances have been provided, in writing, from all first responder agencies that the addition of the proposed residential use will “not place any hardship on...”, “not impact”, and “not impose a burden” upon their ability to provide needed service.

Finally, Section 18.7e cites concern over the potential to “increase hazards from fire or other dangers to the subject property or adjacent properties.” The proposed use is a residential development that, at most, will house 24 persons whose activities will be supervised by trained staff. There is an equal or greater potential that a conventional subdivision of 26 homes could create fire hazards from back-yard barbeques or safety hazards due to young children going into the lake unsupervised. Likewise, other special uses such as campgrounds, travel trailer courts, restaurant/bars, bed & breakfasts, social event facilities, and entertainment establishments all present the potential for increasing fire hazards or other dangers. If each of these uses was held to this standard due to a potential “increase”, it is unlikely that they would be permitted anywhere in Cheboygan County. Transforming vacant land into developed land will inherently increase the potential for fire or other dangers. However, the proposed use is not one that poses a greater than normal potential for such hazards and is far more benign than many of the uses listed above.

Based on this author’s extensive experience and the research conducted during the preparation of this study, no empirical or other convincing evidence has been discovered or reviewed that would support a conclusion that the proposed use of the subject property would create undue demands on police, fire, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.

  
\_\_\_\_\_

7/25/18  
\_\_\_\_\_

## Appendix A – Agency Responses



### CHEBOYGAN COUNTY SHERIFF DEPARTMENT

**DALE V. CLARMONT**  
SHERIFF

TIMOTHY C. COOK  
UNDERSHERIFF

870 S. Main St.  
Cheboygan, MI 49721

231-627-3155  
Fax: 231-627-8880  
[sheriff@cheboygancounty.net](mailto:sheriff@cheboygancounty.net)

Brenda Beckwith  
Jail Administrator

Jodi Beauchamp  
Administrative Assistant

March 20, 2018

Cheboygan County Planning Commission  
Cheboygan County Building  
870 South Main Street  
P.O. Box 70  
Cheboygan, MI. 49721

RE: Heritage Cove Farms  
625 Grandview Beach Road  
Tuscarora Township  
Cheboygan County  
State of Michigan

Planning Commission,

The Cheboygan County Sheriff Department is staffed 24/7/365 with both Road Patrol and Corrections Deputies. While the proposed site for Heritage Cove Farms falls within the borders of Tuscarora Township, which has its own 24/7/365 dedicated police department, The Cheboygan County Sheriff Department stands ready to assist should a request be received.

I have reviewed the plan for Heritage Cove Farm. I understand that Heritage Cove Farm will be modeled after Gould Farm. I have reviewed the correspondence from Gould Farm along with Gould Farm's website. Additionally, I have attended meetings held by Heritage Cove Farms and believe I have an understanding of their plan.

At this time I do not believe that Heritage Cove Farm will place any hardship on, nor will it cause any burden for the Cheboygan County Sheriff Department. Should a request for assistance come from either the Tuscarora Township Police Department or directly from Heritage Cove Farm, the Cheboygan County Sheriff Department stands ready to fulfill such request.

Sincerely,

A handwritten signature in black ink that reads "Todd Ross".

Lieutenant Todd Ross  
Road Patrol and Operations Supervisor  
Cheboygan County Sheriff Department  
870 South Main Street, Cheboygan

2

Cheboygan County Sheriff is an equal opportunity provider and employee. TDD# 1-800-649-3777



## Cheboygan Life Support Systems Inc.

536 M.M Riggs Drive  
Cheboygan, Michigan 49721  
(231)627-9348



March 7, 2018

Jeff Lawson  
Cheboygan County Planning Department  
870 S. Main Street  
Cheboygan, MI 49721

Dear Mr. Lawson,

I have reviewed the Heritage Cove Farm project for the purpose of evaluating what impact the farm and its residents will have on our ambulance service capacity in Cheboygan County. Based on my review and discussion with Betsy Hanson, the addition of these residents and the staff will not impose a burden beyond the current capacity of Cheboygan Life Support System.

If you have any questions, please contact me at the above number.

Sincerely,

Dallas Hyde,  
Director of CLSS

March 1, 2018

Betsy Hanson  
Heritage Cove Farm  
PO Box 368  
Indian River, MI 49749

RE: Heritage Cove Farm

Dear Ms. Hanson,

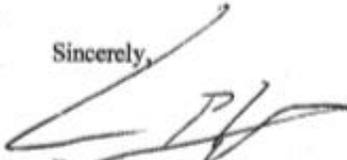
This letter is to outline the communication we had relating to the Special Use Permit Heritage Cove Farm submitted to Cheboygan County, and the impact this application and use would have on the services of Tuscarora Township's Volunteer Fire Department.

In the spring of 2015, you and I met in my office in Indian River. You provided me with the Special Use Permit application and we reviewed the site survey drawing you provided. As I recall, we discussed road access based on the site plan, and the potential use of the on-site pond as a water resource. I understood the application described up to 24 residents with mental illness residing on the site, with support staff also living on site. We also discussed some of the services our department has provided to local adult foster homes in the area regarding "walk-offs" of persons with dementia. You answered any questions I presented, and it was my opinion that Heritage Cove Farm would not impact our volunteer fire department beyond its capacity.

After you and I spoke I did receive the application from the County and responded back telling them that I didn't see any major concerns regarding the fire department.

Should you have any further questions, please feel free to contact me.

Sincerely,



Dave Carpenter,  
Tuscarora Township Volunteer Fire Chief

**Deborah Tomlinson**

---

**From:** Dave Carpenter <dpcarpenter@voyager.net>  
**Sent:** Wednesday, May 23, 2018 9:07 AM  
**To:** Deborah Tomlinson  
**Subject:** Re: Heritage Cove Farm

Hi Deb,

I don't see any major concerns regarding the Fire Department for the Heritage Cove Farm project. Should you have any questions please feel free to contact me anytime at my office.

Respectfully,

David Carpenter  
Fire Chief

**From:** Deborah Tomlinson  
**Sent:** Tuesday, May 22, 2018 2:30 PM  
**To:** Brent Shank ([mgr@chcrc.com](mailto:mgr@chcrc.com)) ; Hobie Kirsch ; Kyle Keller ; Kyle Keller ; David Carpenter ([dpcarpenter@voyager.net](mailto:dpcarpenter@voyager.net))  
**Subject:** Heritage Cove Farm

The following is a link to the documents that will be reviewed at the 06/06/18 Planning Commission meeting regarding Heritage Cove Farm: <http://is0.gaslightmedia.com/cheboygancounty/ ORIGINAL /fs13-1527012821-53525.pdf>. Please review and call me or e-mail me if you have any questions or comments. Thank you!!!

Debbie

**Debbie Tomlinson**  
*Cheboygan County*  
*Community Development Department*  
PO Box 70, 870 South Main Street  
Cheboygan, MI 49721  
(231)627-8489 phone  
(231)627-3646 fax  
[debbiet@cheboygancounty.net](mailto:debbiet@cheboygancounty.net)



## **Tuscarora Township Police Dept.**

Chief Gordon M. Temple  
P.O. Box 208 - 3546 Sturgeon Avenue  
Indian River, Michigan 49749

March 6, 2018

Cheboygan County Planning Commission  
Cheboygan County Building  
870 S. Main St.  
Cheboygan, MI 49721

RE: Heritage Cove Farms

To Whom It May Concern:

The Tuscarora Township Police Department always has officers on duty. I do not believe that any incidents (requiring police assistance) at Heritage Cove Farms would overwhelm our resources.

On the rare occasion when additional law enforcement assistance may be needed, it is common practice in northern Michigan for police departments to request assistance from other area law enforcement agencies.

Based on the stated purpose of Heritage Cove Farms, I do not anticipate it creating an undue hardship on my police department.

Should you have any questions, please do not hesitate to contact me.

Sincerely:

A handwritten signature in black ink, appearing to read "Gordon Temple", written over a horizontal line.

Chief Gordon Temple

<sup>5</sup>  
(231) 238-9481 • (231) 238-8311  
Fax: (231) 238-0931



## Tuscarora Township Police Dept.

Chief Gordon M. Temple  
P.O. Box 208 - 3546 Sturgeon Avenue  
Indian River, Michigan 49749

April 30, 2018

**RECEIVED**  
MAY 02 2018  
CHEBOYGAN COUNTY  
COMMUNITY DEVELOPMENT DEPT.

Cheboygan County Planning Commission  
Cheboygan County Building  
P.O. Box 70  
Cheboygan, MI 49721

Re: Heritage Cove Farms

To Whom It May Concern:

The purpose of this letter is to clarify a statement I made in a previous letter dated March 6, 2018. In that letter addressed to you, one of my statements was "I do not believe that any incidents (requiring police assistance) at Heritage Cove Farms would overwhelm our resources". My statement was based on information provided that Heritage Cove Farms will be housing 24 residents. (The mental well-being of these residents is an unknown variable at this time.)

My previous letter was NOT based on an impact study, nor is this one. The previous letter was based on having an additional 24 residents in the township.

I have been requested by the Grandview Beach Association to complete a "proper analysis" of the proposed Heritage Cove Farms and its impact on available resources.

As far as I am concerned, it is your responsibility as the Planning Commission to conduct this "impact study".

To quote the Cheboygan County website:

"Cheboygan County zoning authority covers all township except Burt..."

"The Planning Commission's responsibilities include reviewing Special Use Permits, Planned Unit Developments and Site Plan Reviews...."

Sincerely:

A handwritten signature in black ink, appearing to read "Gordon Temple".

Chief Gordon Temple

cc Dave Lurie-President Grandview Beach Association.

(231) 238-9481 • (231) 238-8311  
Fax: (231) 238-0931

Ⓟ

----- Forwarded Message -----

**Subject:**FW: FW: Heritage Cove Farm

**Date:**Mon, 2 Jul 2018 14:35:04 +0000

**From:**Michael C. Turisk <[mturisk@cheboygancounty.net](mailto:mturisk@cheboygancounty.net)>

**To:**Peter Wendling ([pwendling@upnorthlaw.com](mailto:pwendling@upnorthlaw.com)) <[pwendling@upnorthlaw.com](mailto:pwendling@upnorthlaw.com)>

**CC:**Jeff Lawson <[adminlawson@cheboygancounty.net](mailto:adminlawson@cheboygancounty.net)>

Peter, FYI I received the following comments from Brent Shank regarding Heritage Cove/Grandview Beach Rd.:

Sincerely,

Michael Turisk  
Director, Cheboygan County Planning and Zoning  
870 South Main St.  
Cheboygan, MI 49721

Phone: 231.627.8489  
Fax: 231.627.3646  
Email: [mturisk@cheboygancounty.net](mailto:mturisk@cheboygancounty.net)

-----Original Message-----

From: Brent Shank [<mailto:mgr@chcrc.com>]

Sent: Monday, July 02, 2018 7:11 AM

To: Michael C. Turisk

Subject: Re: FW: Heritage Cove Farm

Michael,

The proposed Heritage Farm Cove development will be required to upgrade the existing driveway to a commercial driveway with concrete curb and gutter along with paving according to Road Commission driveway policy. The Road Commission can not require any upgrades to the road.

Please let me know if you need additional information.

Thank you,

Brent Shank, P.E.  
Engineer/Manager  
Cheboygan County Road Commission  
[mgr@chcrc.com](mailto:mgr@chcrc.com)  
(231) 238-7775

## Appendix B – PLB Planning Group, LLC Qualifications

Paul LeBlanc is a community planner with over 40 years of professional experience in land use planning and zoning. His qualifications include:

- **AICP**  
He holds certification from the American Institute of Certified Planners as a professional.
- **Zoning**  
Throughout most of his career, Mr. LeBlanc has worked with communities to prepare and administer local zoning regulations.
- **National Experience**  
During the past 10 years, Mr. LeBlanc has assisted communities throughout the United States with the preparation of zoning and other land development regulations. In addition to Michigan, he has worked in: Indiana, Ohio, Iowa, Texas, Georgia, North Carolina, South Carolina, Pennsylvania, Colorado, and Alaska.
- **Certified Trainer**  
As a certified trainer for the Michigan Association of Planning, he regularly conducts zoning seminars for local planning commissions and boards of appeals. He has also assisted MAP in developing several of their training programs.
- **Expert Witness**  
Mr. LeBlanc's expertise in local zoning is well-regarded among land use attorneys. He has been called upon to testify in over a dozen zoning litigation matters throughout the state.
- **Planning Commission Member**  
In addition to being a practicing professional, Mr. LeBlanc has served as a member of a local planning commission.
- **Township Trustee**  
Currently, Mr. LeBlanc serves as a township trustee in the community where he resides. He is serving his second term on the Township Board.



## Paul M. LeBlanc, AICP

Principal, PLB Planning Group, LLC



### Education:

- BA, University of Wisconsin, Urban Analysis
- MPA, Western Michigan University, Public Administration

### Memberships/Affiliations:

- American Institute of Certified Planners
- American Planning Association
- Michigan Association of Planning
- Former member City of Kentwood Planning Commission
- Trustee, Ada Township, Michigan

### Professional Experience

- 1971-1973, *Saginaw County Metropolitan Planning Commission*  
Senior Planner
- 1974-1979, *West Michigan Regional Planning Commission*  
Assistant Director-Land Use
- 1979-1991, *The WBDC Group*  
Vice-President/Manager-Community Development Division
- 1991-1995, *Design Plus*  
Partner, Manager-Planning and Landscape Architecture
- 1996-2016, *LSL Planning*  
Co-founder, Principal
- 2016-Present, *PLB Planning Group*  
Founder, Principal

### Representative Project Experience

- Comprehensive and Master Planning:  
Cannon Township (MI) Master Plan / Peters Township (PA) Comprehensive Plan / Algoma Township (MI) Master Plan / Park Township (MI) Master Plan / Johnson County (IN) Comprehensive Plan / Stone Mountain (GA) Master Plan / Cedar Lake (IN) Comprehensive Plan / West Side Business District (Grand Rapids, MI) Area Specific Plan / Town of Whiteland (IN) Comprehensive Plan
  - Zoning and Land Development Regulation:  
East Grand Rapids (MI) Zoning Ordinance / Rockford (MI) Zoning Ordinance / Yellow Springs (OH) Zoning Ordinance / Cannon Township (MI) Zoning Ordinance / Richmond Hill (GA) UDO / Fort Mill (SC) UDO / Wilmington (NC) UDO / North Olmsted (OH) Business District Regulations / La Porte County (IN) Joint Zoning Ordinance / Palmetto (GA) Zoning Ordinance / Hilliard (OH) Zoning Code / Kodiak Island Borough (AK) Zoning Code / Novi (MI) Grand River Corridor Overlay District
  - Expert Testimony (Circuit Court):  
Berrien County, Kent County, Livingston County, Macomb County, Monroe County, Oakland County, Ottawa County
-



# CHEBOYGAN COUNTY SHERIFF DEPARTMENT

**DALE V. CLARMONT**  
SHERIFF

TIMOTHY C. COOK  
UNDERSHERIFF

870 S. Main St.  
Cheboygan, MI 49721

231-627-3155  
Fax: 231-627-8880  
[sheriff@cheboygancounty.net](mailto:sheriff@cheboygancounty.net)

Brenda Beckwith  
Jail Administrator

Jodi Beauchamp  
Administrative Assistant

July 9, 2018

To whom it may concern,

Per the request from Mr. Charles Freese, the following 2017 criminal statistical data was retrieved from the Charlevoix, Cheboygan, Emmett County Tri-County Central Dispatch Authority (CCE) systems:

Non-Aggravated Assaults:	CHSH	43
	TTPD	11
Aggravated Assaults:	CHSH	12
	TTPD	2
Murder:	CHSH	0
	TTPD	0
CSC 1 <sup>st</sup> :	CHSH	8
	TTPD	1

Respectfully;

Dale V. Clarmont  
Sheriff

34

Subject: Re: test

From: imretire@yahoo.com

To: imretire@yahoo.com

Date: Friday, August 3, 2018 01:33:15 PM EDT

We are writing in regards to the proposed building of Heritage Cove facility. We live in Indian Woods Trail Association, are back and side yard will face this building. We have great concern for the safety of the residents of this facility. We have horses that are surrounded by an electric fence. The fence is marked with plates that warn it's an electric fence and has bright pink ribbons tied on it. I have seen this fence flip over and drop our 1200 LB horse. We don't know the health of the people who will reside there but were pretty sure if they grab it, it could cause serious harm or death, which we do not feel we should be held responsible if such an occurrence should happen. They will be able to see our horses from their front yard and might want to come and pet them. Further they could come to the gate open it go in and get kicked, run over if they startle the horses. Or leave the gate open and our horses get out and possibly get hit by a car causing injury or death to one of our horses or the driver. Grandview Beach Rd. used to be pretty quite and safe but now it has become a sort of race track. When Johnson's Motel sold to Indian River Sports Center things changed. Their customers test drive the Quads, 4 Wheelers, Snowmobiles ect. down Grandview Beach. They drive them as fast as they can go because it is a straight road. Once down and once back, sometimes they will try multiple units. They could run into a person crossing the street that is not aware of the danger. When we bought up here planning to retire here we never expected a business to be run right across the street. If we wanted that we would have stayed down state. We have no problem with a mental health facility being built around here, but we believe a better site should be considered. There is also a large swamp just behind and to the left of this proposed site we wouldn't want to hear someone drowned.

Thank You,  
Lawrence and Sandra Drozdzevski  
647 E. Indian Woods Trail  
Indian River, MI 49749

On Friday, August 3, 2018 12:49:17 PM EDT, IMRETIRE IMRETIRE <imretire@yahoo.com> wrote:

When I tried to attach the message somehow it was deleted. So I am going to write it again just hope I don't forget something.

On Friday, August 3, 2018 11:34:21 AM EDT, Deborah Tomlinson <debbiet@cheboygancounty.net> wrote:

August 26, 2018

To: Cheboygan County Planning Commission Members  
CC: Cheboygan County Board of Commissioners

**RE: Cheboygan County Crime Statistics**

Numerous documents and studies have been submitted to you proving that HCF would increase hazards from fire or other dangers, and therefore, HCF does not satisfy the requirements under Section 18.7 of the zoning ordinance. Furthermore, Mr. Freese stated the following after reviewing such documents:

***"I would have to agree that there is enough information provided that establishes that people with schizophrenia or bipolar disease do pose an increased risk." and the report "reaffirms that they are more likely to commit violent crime."***

Mr. Freese also concluded, regarding the increase in crime as a result of HCF:

***"...that average would be about 13.8 times for the whole population. If you increase the likelihood of crime by 13.8 times based on the percentage of the population you get an increase in the crime rate in Cheboygan County of .0127374 or about 1.3%."***

I pointed out to you in a prior letter that a 1.3% increase in crime as a result of HCF would result in an additional 20 crimes per year based on 1,583 total crimes in Cheboygan County in 2016, based on crime statistics provided by Michigan State Police.

Mr. Freese has since requested partial crime statistics for 2017 from the CCE Central Dispatch System and such statistics are included in the letter dated July 9, 2018 from Sherriff Clarmont (CCE Report"). **The CCE Report is not a comprehensive list of crimes actually committed in Cheboygan County.** For example, it excludes crimes responded to by Michigan State Police, of which, there were 301 in 2017. Also, it excludes all sorts of crimes against persons, such as all non-1<sup>st</sup> degree sexual crimes (**including those involving mentally ill**), as well as property damage, burglary, trespassing and larceny, to name a few.

Attached as Exhibit A is a comprehensive crime report from the Michigan State Police representing all crimes committed in Cheboygan County in 2017 (the "Full Crime Report"). This report includes all crimes committed in Cheboygan County in 2017, including those responded to by Michigan State Police. According to the Full Crime Report, total crimes in 2017 in Cheboygan County totaled 1,348. Based on Mr. Freese's calculation that HCF would increase crime by 1.3%, HCF would generate an additional 17 crimes/year in the Grandview Beach neighborhood based on this data.

Even if you were to eliminate crimes such as fraud and liquor violations, for example, there were 695 violent and dangerous crimes in Cheboygan County in 2017 as summarized below. Applying Mr. Freese's 1.3% increase in the crime rate, that results in an additional 9 violent and dangerous crimes as a result of HCF. **Even if the increased risk is just 1 additional crime,**

that would be unacceptable and contrary to the purpose of the zoning ordinance and Section 18.7e.

	County Sherriff	Tuscarora Township PD	MI State Police	Total
Total Crimes Against Persons	68	105	33	206
Robbery	0	2	1	3
Burglary Forced Entry	15	14	6	35
Burglary	5	1	0	6
Burglary	0	6	1	7
Larceny from Building	5	30	3	38
Larceny from Motor Vehicle	7	10	0	17
Larceny Other	32	58	12	102
Motor Vehicle Theft	1	3	0	4
Damage to Property	14	43	7	64
Stolen Property	0	0	1	1
Violation Controlled Substance	38	17	107	162
Trespass	1	3	3	7
Disorderly Conduct	4	39	0	43
	190	331	174	695

HCF Increase in Crime per Mr. Freese	1.30%
Additional Crimes/Year due to HCF	9.0

Based on the data provided by Michigan State Police and Mr. Freese’s estimated annual increase in the crime rate of 1.3%, HCF does not satisfy Section 18.7e of the zoning ordinance as it would increase the hazards to the subject property and adjacent properties. Furthermore, an accommodation to waive that requirement would not be reasonable as such accommodation would result in a direct threat to the public’s safety. In fact, the joint statement on this topic states, “...the Act does not protect an individual whose tenancy would constitute a direct threat to the health or safety of other individuals...”.

**Based on this information, you are obligated to decline/revoke the special use application for HCF.**

Also attached are two recent news articles involving safety issues at a similar type of mental facility. Make no mistake, HCF and Cheboygan County are not immune to these issues.

Sincerely,

*Thomas Mangum*

Thomas Mangum  
Grandview Beach Drive



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**County Offenses by Agency Type Report**

Requested On: 8/8/2018

Population Served: 28,134

Criteria: 2017 Cheboygan County Offenses By Agency Type

- [Summary Based Statistics Search Years 1997 - 2006](#)
- Incident Based Statistics Search Years 2008 to Current**
- [Annual Publications of Crime in Michigan](#)
- [FBI Statistics](#)
- [Bureau of Justice Statistics](#)

Crime Type	File Class	Sheriffs	Police Departments	State Police	Total
<b>Crimes Against Person</b>					
MURDER/NONNEGLIGENT MANSLAUGHTER (VOLUNTARY)	9001	0	0	0	0
NEGLIGENT HOMICIDE/MANSLAUGHTER (INVOLUNTARY)	9002	0	0	0	0
NEGLIGENT HOMICIDE VEHICLE/BOAT	9003	0	0	0	0
KIDNAPPING/ABDUCTION	10001	0	1	1	2
PARENTAL KIDNAPPING	10002	0	0	0	0
SEXUAL PENETRATION PENIS/VAGINA CSC 1ST	11001	8	6	0	14
SEXUAL PENETRATION PENIS/VAGINA CSC 3RD	11002	0	0	1	1
SEXUAL PENETRATION ORAL/ANAL CSC 1ST	11003	2	2	1	5
SEXUAL PENETRATION ORAL/ANAL CSC 3RD	11004	0	0	1	1
SEXUAL PENETRATION OBJECT CSC 1ST	11005	0	0	0	0
SEXUAL PENETRATION OBJECT CSC 3RD	11006	1	0	0	1
SEXUAL CONTACT FORCIBLE CSC 2ND	11007	2	6	1	9
SEXUAL CONTACT FORCIBLE CSC 4TH	11008	0	4	0	4
NONAGGRAVATED ASSAULT	13001	43	59	17	119
AGGRAVATED/FELONIOUS ASSAULT	13002	4	9	5	18
INTIMIDATION/STALKING	13003	6	12	6	24
SEXUAL PENETRATION NONFORCIBLE BLOOD/AFFINITY	36001	0	0	0	0
SEXUAL PENETRATION NONFORCIBLE OTHER	36002	0	0	0	0
SEX OFFENSE OTHER	36004	2	6	0	8
HUMAN TRAFFICKING COMM SEX ACTS	64001	0	0	0	0
HUMAN TRAFFICKING INVOL SERVITUDE	64002	0	0	0	0
<b>Total For Crimes Against Persons</b>		<b>68</b>	<b>105</b>	<b>33</b>	<b>206</b>
<b>Crimes Against Property</b>					
ROBBERY	12000	0	2	1	3
ARSON	20000	0	0	0	0
EXTORTION	21000	0	0	0	0
BURGLARY FORCED ENTRY	22001	15	14	6	35
BURGLARY ENTRY WITHOUT FORCE (INTENT)	22002	5	1	0	6
BURGLARY ENTRY W/OUT AUTH. W/OR W/OUT FORCE	22003	0	6	1	7
LARCENY POCKETPICKING	23001	1	0	0	1
LARCENY PURSES/NATCHING	23002	0	0	0	0
LARCENY THEFT FROM BUILDING	23003	5	30	3	38
LARCENY THEFT FROM COIN OPERATED MACHINE/DEV.	23004	0	1	0	1

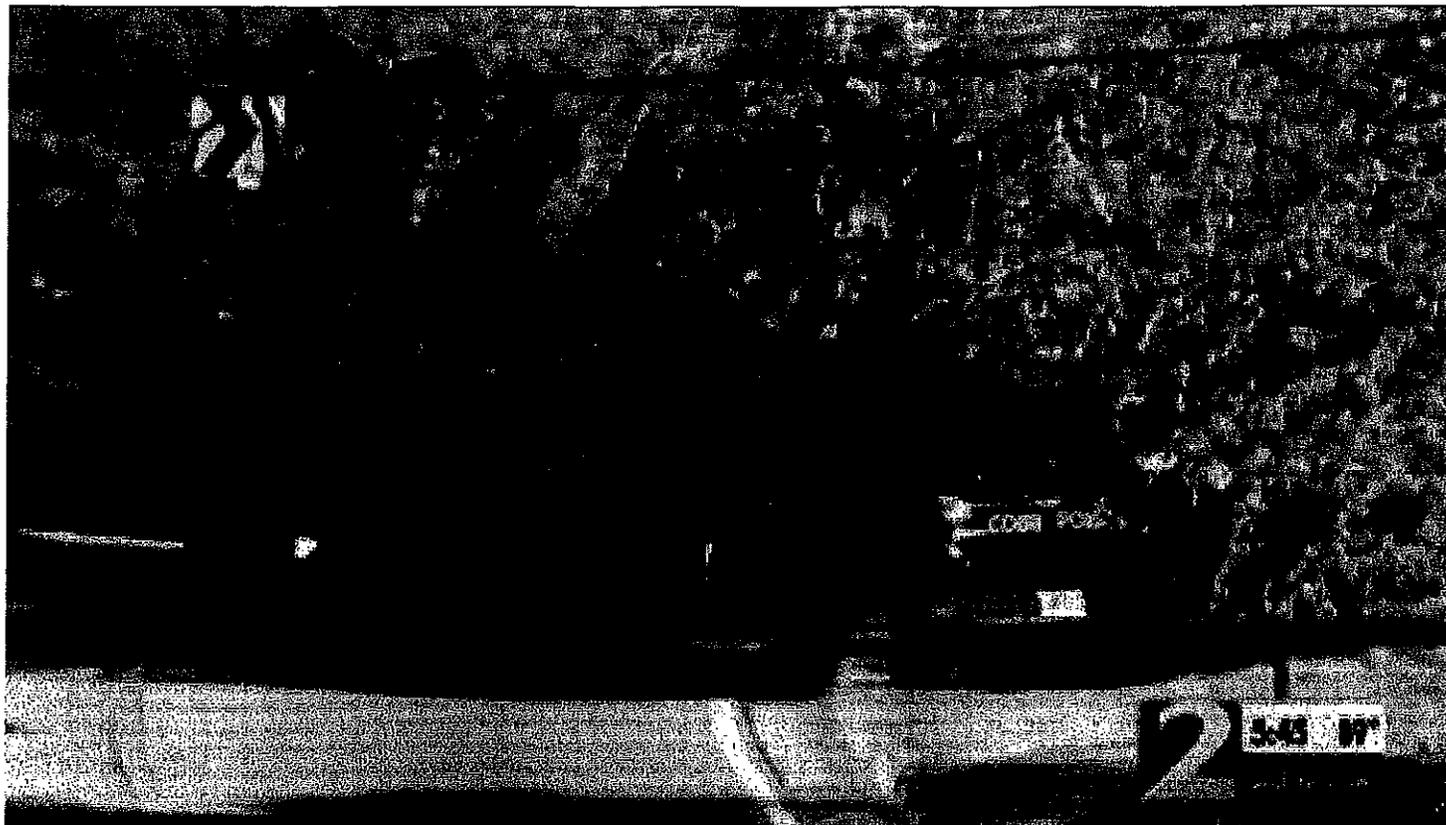
LARCENY THEFT FROM MOTOR VEHICLE	23005	7	10	0	17
LARCENY THEFT OF MOTOR VEH PARTS/ACCESSORIES	23006	0	1	0	1
LARCENY OTHER	23007	32	58	12	102
MOTOR VEHICLE THEFT	24001	1	3	0	4
MOTOR VEHICLE AS STOLEN PROPERTY	24002	2	1	0	3
MOTOR VEHICLE FRAUD	24003	0	0	0	0
FORGERY/COUNTERFEITING	25000	0	6	1	7
FRAUD FALSE PRETENSE/SWINDLE/CONFIDENCE GAME	26001	11	3	0	14
FRAUD CREDIT CARD/ATM	26002	8	1	1	10
FRAUD IMPERSONATION	26003	0	5	0	5
FRAUD WELFARE	26004	0	0	0	0
FRAUD WIRE	26005	0	0	0	0
FRAUD BAD CHECKS	26006	6	9	1	16
FRAUD IDENTITY THEFT	26007	2	5	0	7
FRAUD HACKING/COMPUTER INVASION	26008	0	1	0	1
EMBEZZLEMENT	27000	0	4	1	5
STOLEN PROPERTY	28000	0	0	1	1
DAMAGE TO PROPERTY	29000	14	43	7	64
RETAIL FRAUD MISREPRESENTATION	30001	0	0	0	0
RETAIL FRAUD THEFT	30002	0	51	0	51
RETAIL FRAUD REFUND/EXCHANGE	30003	0	2	0	2
RETAIL FRAUD ORGANIZED CRIME	30004	0	0	0	0
BRIBERY	51000	0	0	0	0
<b>Total For Crimes Against Property</b>		<b>109</b>	<b>257</b>	<b>35</b>	<b>401</b>
<b>Crimes Against Society</b>	<b>File Class</b>	<b>Sheriffs</b>	<b>Police Departments</b>	<b>State Police</b>	<b>Total</b>
JUSTIFIABLE HOMICIDE	9004	0	0	0	0
VIOLATION OF CONTROLLED SUBSTANCE	35001	38	17	107	162
NARCOTIC EQUIPMENT VIOLATIONS	35002	0	0	21	21
PEEPING TOM	36003	0	0	0	0
OBSCENITY	37000	0	0	0	0
FAMILY ABUSE/NEGLECT NONVIOLENT	38001	2	2	2	6
FAMILY NONSUPPORT	38002	0	0	0	0
GAMBLING BETTING/WAGERING	39001	0	0	0	0
GAMBLING OPERATING/PROMOTING/ASSISTING	39002	0	0	0	0
GAMBLING EQUIPMENT VIOLATIONS	39003	0	0	0	0
GAMBLING SPORTS TAMPERING	39004	0	0	0	0
COMMERCIALIZED SEX PROSTITUTION	40001	0	0	0	0
COMMERCIALIZED SEX ASSISTING/PROMOTING PROST.	40002	0	0	0	0
PURCHASING PROSTITUTION	40003	0	0	0	0
LIQUOR LICENSE ESTABLISHMENT	41001	0	0	0	0
LIQUOR VIOLATIONS OTHER	41002	9	14	10	33
DRUNKENNESS	42000	1	0	0	1
WEAPONS OFFENSE CONCEALED	52001	1	0	5	6

WEAPONS OFFENSE EXPLOSIVES	52002	0	0	0	0
WEAPONS OFFENSE OTHER	52003	5	4	1	10
DISORDERLY CONDUCT	53001	4	39	0	43
PUBLIC PEACE OTHER	53002	1	2	1	4
OUIL OR OUID	54002	39	53	26	118
TRESPASS	57001	1	3	3	7
VAGRANCY	63000	0	0	0	0
ANIMAL CRUELTY	72000	0	0	0	0
<b>Total For Crimes Against Society</b>		<b>101</b>	<b>134</b>	<b>176</b>	<b>411</b>
<b>Crimes Against All Other</b>	<b>File Class</b>	<b>Sheriffs</b>	<b>Police Departments</b>	<b>State Police</b>	<b>Total</b>
SOVEREIGNTY	1000	0	0	0	0
MILITARY	2000	0	0	0	0
IMMIGRATION	3000	0	0	0	0
OFFICER INVOLVED SHOOTING	9005	0	0	0	0
IN-CUSTODY DEATH	9006	0	0	0	0
ABORTION	14000	0	0	0	0
POSSESSION OF BURGLARY TOOLS	22004	0	0	0	0
FAMILY OTHER	38003	0	0	0	0
OBSTRUCTING POLICE	48000	6	4	2	12
ESCAPE/FLIGHT	49000	3	4	0	7
OBSTRUCTING JUSTICE	50000	134	77	35	246
HIT AND RUN MOTOR VEHICLE ACCIDENT	54001	3	7	6	16
HEALTH AND SAFETY	55000	1	17	5	23
CIVIL RIGHTS	56000	0	0	0	0
INVASION OF PRIVACY OTHER	57002	0	1	0	1
SMUGGLING	58000	0	0	0	0
ELECTION LAWS	59000	0	0	0	0
ANTITRUST	60000	0	0	0	0
TAX/REVENUE	61000	0	0	0	0
CONSERVATION	62000	1	7	9	17
JUVENILE RUNAWAY	70000	1	3	0	4
MISCELLANEOUS CRIMINAL OFFENSE	73000	0	2	0	2
SOLICITATION (ALL CRIMES EXCEPT PROSTITUTION)	75000	2	0	0	2
CONSPIRACY (ALL CRIMES)	77000	0	0	0	0
<b>Total For Crimes Against All Other</b>		<b>151</b>	<b>122</b>	<b>57</b>	<b>330</b>
<b>Grand Total of All Crime Types:</b>		<b>429</b>	<b>618</b>	<b>301</b>	<b>1,348</b>

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Caption ↓

## Neighbors concerned about security lapses at Cobb mental health facility

Aug 17, 2017

By Steve Burns - The Atlanta Journal-Constitution

Several recent incidents of residents wandering away from a Cobb County mental health facility have neighbors on edge and calling for better security, Channel 2 Action News reported.

“I turned around and saw a lady, wild eyed, pushing her way through my garage trying to get into my house and she said, ‘You’ve got to let me in, you’ve got to let me in,’” a Smyrna resident who lives off Ridge Road near Ridgeview Institute told the station.

The woman appeared frightened and confused as she tried to push through a screen to get into the resident's house.

"And I said, 'No, you're not coming into my house,'" the resident said. "So with force I pushed and the dog started barking and she took off running."

Neighbors said it was the third time a Ridgeview resident has shown up in their subdivision, the news station reported.

**RELATED: Cobb man indicted; police say he shot his way out of a mental facility**

The most dangerous incident happened in November when police said a would-be patient named Tevin McDonald pulled out a gun and opened fire, as The Atlanta Journal-Constitution reported. A Ridgeview worker was injured, and police locked down the area until McDonald was caught.

**NEW: Join the discussion at the AJC's Crime & Safety Facebook group**

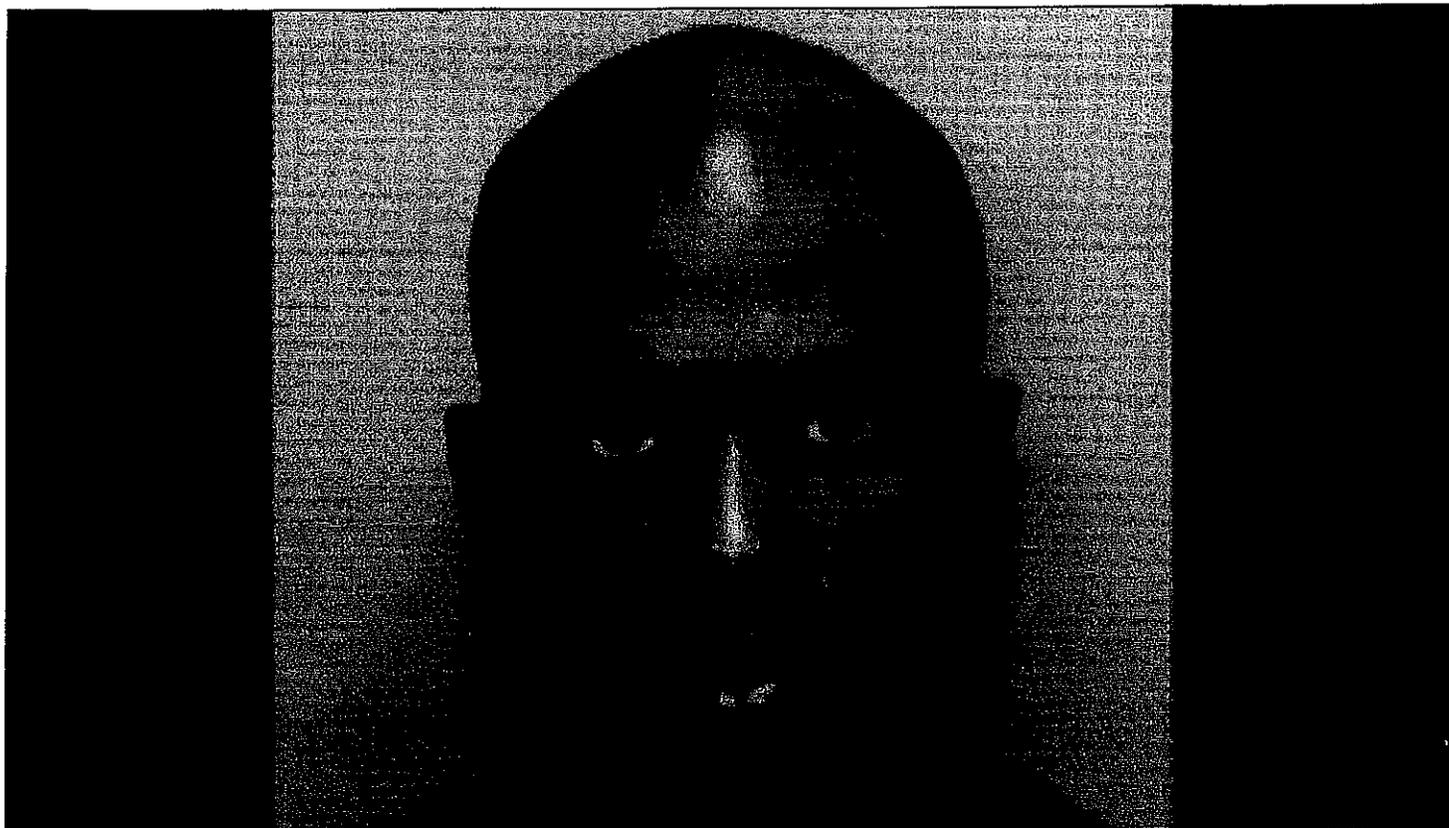
Days before the latest incident, Smyrna police put out a lookout for another woman who got out of the facility, Channel 2 reported. After wandering in the area for hours, she was located.

Neighbors want Ridgeview to improve security.

"You never know if this person is on drugs or has weapons, which one person did who was in here," the resident said, "and we just want to be safe."

***Know what's really going on with crime and public safety in your metro Atlanta community, including breaking news, trial coverage, trends and the latest on unsolved cases. Sign up for the AJC's crime and safety newsletter delivered weekly to your inbox.***

In other news:



Caption ↓

## Cobb man indicted; police say he shot his way out of a mental facility

May 04, 2017

By Ben Brasch - The Atlanta Journal-Constitution

He'd just gotten to the mental health facility, but Tevin McDonald decided he wanted to leave.

Prosecutors say staff were searching McDonald as part of his check-in to Smyrna's Ridgeview Institute on Nov. 16, 2016, when he pulled a pistol from his shorts and started shooting.

One round hit the buttocks of a worker, according to a warrant. Another bullet flew

down a hall and hit the ceiling right above someone else.

**Cobb father indicted for allegedly beating baby son to death**

McDonald leveled the gun at one employee's forehead and said "back the (expletive) up," police reported.

Nearly four months later on Thursday, a Cobb County grand jury indicted McDonald.



Police vehicles gather the Ridgeview Institute on South Cobb Drive, where a man walked in and opened fire Wednesday. BRANDEN CAMP / SPECIAL

The 24-year-old Smyrna man's mother **drove him to the facility that day.**

"He had been acting strangely, staring off into the distance, talking to himself," Smyrna Det. Andrew Grubb said in court. "She believed he was having a psychotic episode."

The detective also said the mother knew her son regularly carried a gun.

**Cobb man sentenced for shooting friend during argument over rent**

He shot his way out of the building and ran toward a wood line, police said.

More than 150 authorities searched for him for 40 minutes. Griffin Middle School and King Springs Elementary in Smyrna were placed on lockdowns during that time.

**A judge ordered he stay in a Cobb jail without bond**, and that's where he has been nearly 170 days.

*Like Cobb County News Now on Facebook | Follow us on Twitter and Instagram*

One person was wounded in the shooting.

August 25, 2018

To: Cheboygan County Planning Commission Members

**RE: The document titled "Impact Study" dated July 25, 2018 for Heritage Cove Farm ("HCF"), prepared by PLB Planning Group, LLC (the "New Study")**

At the July 18, 2018 Planning Commission ("PC") meeting, rather than declining/revoking the HCF application for failing to satisfy Section 18.7e of the zoning ordinance, the PC determined the applicant should be provided additional time to prepare another impact study, because the PC finally acknowledged that the letters prepared by local first responders and labeled "Impact Study" by the applicant (the "Letters"), did not adequately prove that HCF meets all requirements in Section 18.7e of the zoning ordinance, which is a requirement for a special use permit. These Letters from local first responders included nothing more than their opinions that HCF would not negatively impact their capacity. **The Letters were not based on research or analysis, did not address the mental illness component of HCF and not a single letter addressed the "increase in hazards from fire or other dangers" as a result of HCF, which is a critical component of 18.7e.**

Since then, the New Study has been submitted to the PC. This 2<sup>nd</sup> chance at an impact study consists of nothing more than a copy of the Letters (that you determined were insufficient) and a very poorly written cover letter prepared by a planning consultant that simply summarizes the content of the Letters! **It contains no new information, data, or evidence whatsoever. In fact, the New Study confirms that HCF would increase hazards and dangers and suggests that's okay because such increase would not be more than certain other uses. That is not the criteria for a special use permit identified in Section 18.7e. Like the Letters, the New Study contains no evidence, data or analysis to support any of the statements by the author. A summary of the significant flaws with this document include the following:**

- 1) In the "Project Understanding" section of the New Study, it defines the project as among other things, a "**farm**".
  - a. HCF is not a "farm". It is a mental health facility for patients diagnosed with severe mental illnesses including bipolar disorder and schizophrenia. **Yet, the New Study makes not a single reference that the project will be for patients diagnosed with such illnesses.** And for good reason...the author is attempting to avoid that very relevant detail as he is not qualified to address it. The author does not have a background in healthcare, mental illness, or design of psychiatric facilities. You cannot ignore the disability for this special use application any more than you would ignore the disability for a medical facility for patients with dementia, for example.
  
- 2) The New Study states, "*The most compelling finding supporting Section 18.7e comes from the first responders themselves.*"
  - a. If the author of the Study (or any of you) thinks the most compelling findings are from the first responders, why did he (and why would you) choose to ignore comments from Tuscarora Township Chief of Police (the very first responder) stating that his comments are not an impact study and they are only based on

having an additional 24 residents in the township? The Police Chief stated, “My statement was based on information provided that Heritage Cove Farm will be housing 24 residents (the mental well-being of those residents is an unknown variable at this time)”. This clearly indicates that the mental well-being of the patients at HCF would impact his opinion. **And again, none of the Letters address safety concerns or the increase in hazards.**

3) The New Study states, “The proposed use is a residential devleopment (development) that, at most, will house 24 persons whose activities will be supervised by trained staff. There is an equal or greater potential that a conventional subdivision of 26 homes could create fire hazards from back-yard barbeques or safety hazards due to young children going into the lake unsupervised.”

- a. Section 18.7e states there can be no increase in hazards from fire or other dangers, whatsoever. It does not allow for an increase in hazards comparable to other uses! Protecting the health and welfare of the citizens is the entire purpose of the zoning ordinance.
- b. The proposed use is not a “residential devleopment (development)”. If it were, the applicant would not be seeking a special use permit. It is a mental health facility for those with severe mental illness who are more prone to violent behavior based on independent 3<sup>rd</sup> party studies (this is not in dispute). Yet, the only safety concerns addressed in the New Study are the author’s opinion about barbeques (grills) and unsupervised swimming! The author failed to address/review basic items such as:
  - i. The possible existence of fireplaces in the living units at HCF;
  - ii. Building & site plans for specific safety features such as pull cords and restricted access to various parts of the facility;
  - iii. HCF’s operating procedures in the event of an emergency;
  - iv. Perimeter access such as fencing and controlled access gates;
  - v. HCF’s security plan, policies and procedures;
  - vi. HCF’s screening and background search procedures and criteria;
  - vii. Other documentation on the record such as letters about electric fences on adjacent properties;
  - viii. Studies confirming the increased risk of violence in patients with schizophrenia and bipolar disorder;
  - ix. The actual site. According to the New Study, the author did not personally inspect the proposed site, which would be a customary initial step for any credible consultant conducting an impact study for a real estate development

4) The New Study states, “Likewise, other special uses such as campgrounds, travel trailer courts, restaurant/bars, bed & breakfasts, social event facilities, and entertainment establishments all present the potential for increasing fire hazards or other dangers. If each of these uses was held to this standard due to a potential “increase”, it is unlikely that they would be permitted anywhere in Cheboygan County.

- a. These statements are not true. A mental health facility for those patients that are more likely to commit violent crime would certainly pose a greater risk than

- say a “social event facility” or “campground”, for example. Furthermore, the author offers no supporting evidence or analysis for his opinion, whatsoever.
- b. The New Study states that these other uses wouldn’t be permitted anywhere in Cheboygan County. This is also not true. They would be allowed in those areas that are already zoned for such uses, such as the “*Commercial Development District*”.
- 5) The very last paragraph of the New Study claims that there would be “*no increase in hazards or other dangers to the subject property or the adjacent properties.*”
- a. **The study contradicts itself.** The New Study concludes that there would be “no increase in hazards...”. Yet, in previous and other sections of the New Study, it indicates that HCF would increase hazards but such increases would be at reasonable levels (according to author) and would not be more than certain other uses. So, which is it?

The Fair Housing Act (the “Act”) does not protect individuals and developers that attempt to take advantage of such act. Furthermore, the Act was not designed to grant greater rights to those with disabilities than those without. And most importantly, the joint statement on this topic clearly indicates, “***...the Act does not protect an individual whose tenancy would constitute a threat to the health or safety of other individuals...***”. You are in possession of multiple studies indicating that patients with bipolar disorder and schizophrenia (the types of patients that would be at HCF) pose a significantly higher risk of committing violent crime and many of you, including Mr. Freese, have concurred with such reports. Why then, is this so difficult?

**Based on the New Study and the other information on the record, you have no legal option but to decline/revoke the special use application for HCF for failing to satisfy Section 18.7e of the zoning ordinance. Anything less, would be a breach of your duty and willful disregard for the zoning ordinance.**

Sincerely,

*Thomas Mangum*

Thomas Mangum  
Grandview Beach Drive

August 30, 2018

Dear Planning Commissioners:

On January 6, 2016, the Cheboygan County Planning Commission wrote:

“The Planning Commission finds that, if a special land use permit were to be granted, such approval should be conditioned on the results of a **police, fire and ambulance impact study** to determine whether this standard has been met by the Applicant.”

**Before** you make a decision about the impact study on Heritage Cove Farm, please consider that the “Impact Study” written by a Planning & Zoning consultant **failed** to consider that:

- 1) The Planning & Zoning consultant clearly never visited the property in question. How can an assessment of impact be done from over 200 miles away?
- 2) The Planning & Zoning consultant never talked with a single resident of Grandview Beach or Indian Wood Trails who would be directly impacted by this development.
- 3) The Planning & Zoning consultant seems not to have talked directly with the Tuscarora Township Police Chief who said in his letter that his comments did **not** represent an impact study.
- 4) The Planning & Zoning consultant seems not to have talked with the Sheriff of Cheboygan County.
- 5) The Planning & Zoning consultant seems to not have talked with the Fire Chief.
- 6) The Planning & Zoning consultant seems to not have talked with EMS.
- 7) The Planning & Zoning consultant is certainly not an expert in the geography or topography of Mullett Lake, the Indian River and the Indian River Spreads.
- 8) The Planning & Zoning consultant does not represent himself as an expert on police, fire or EMS.
- 9) The Planning & Zoning consultant does not mention the special needs of the patients who will be residing on the property. Is he unaware of that these adults have special needs?
- 10) The Planning & Zoning consultant is not a psychologist or experienced with the special needs of those with severe mental illness and the impact special needs patients may pose to police, fire and EMS.
- 11) The Planning & Zoning consultant likely did not know that the plan for Heritage Cove Farm was not their final plan (this, according to Commission Chair Ms. Croft)? If not, how can you be sure that his comments represent a true “impact study?”

There is no way – using simple plain common sense – that you can think that the “impact study presented represents a true police, fire or EMS study as you required by your own language.

**Please use common sense and vote against this so-called Impact Study.**

Best Regards,

David & Kay Lurie – 529 Grandview Beach Dr.

September 4, 2018

Dear Mr. Wendling,

I read the proposed Finding of Fact included in the HCF Packet on the Cheboygan County website. Why did you misquote Section 18.7e of the Zoning Ordinance ("ZO")?

I am respectfully requesting that you modify the Finding of Fact to accurately quote, and reference the meaning of, Section 18.7e, which includes two separate and distinct requirements as noted by the use of the word, "nor". Below is how Section 18.7e actually reads, in its entirety,

***"e. The proposed special land use will not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties."***

As you can see, there are two requirements within 18.7e and they are not dependent upon one another. The first requirement is that the proposed use does not place demands on police, fire, etc. in excess of current capacity. The second requirement is that the proposed use does not "increase hazards from fire or other dangers to the subject property or adjacent properties." (the second being referred to as the "Safety Requirement"). The Safety Requirement does not allow for an increase in hazards, whatsoever, and has nothing to do with capacity or "undue burden". Both requirements must be satisfied in order for a special use to be approved.

In the proposed finding, you added, "*in a manner which constitutes an undue burden*" at the end of the Safety Requirement after "properties". That is not how Section 18.7e reads and your rewriting of this requirement gives it an entirely different meaning. As written, you are suggesting that HCF would increase hazards (which is undisputed) but such increase in hazards would not be a burden on local resources and therefore, it would be okay and satisfy Section 18.7e. Again, Section 18.7 contains two separate requirements and does not allow for an increase in hazards, even if such increase in hazards is not an undue burden on police, fire, etc. I noted this at the June 26, 2018 Planning Commission meeting after Mr. Freese misapplied this concept when he stated at the hearing that HCF would increase crime in Cheboygan County by 1.3% (20+ crimes/year) and then stated, "Now, is that an undue burden? I don't know what an undue burden is". That issue aside, the undue burden concept applies only to capacity of local resources— not the Safety Requirement.

Lastly, you should emphasize in the Finding of Fact that a request for a reasonable accommodation is not "reasonable" if the accommodation results in tenancy that would constitute a threat to the health or safety of others, as would HCF. The Joint Statement confirms this.

Lastly, intentionally putting the safety of my family at risk as a result of a negligent interpretation of the ZO is an "undue burden" on all of us, not to mention illegal.

Thank you.

*Thomas Mangum*

cc: Cheboygan County Planning Commission Members, Scott Howard, Michael Turisk

## Deborah Tomlinson

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**From:** carl muscott <carlmuscott@yahoo.com>  
**Sent:** Monday, September 03, 2018 8:11 PM  
**To:** Jeff Lawson; Deborah Tomlinson  
**Cc:** John B. Wallace; Richard Sangster; Cal Gouine; Mike Newman; Roberta Matelski; Karen Johnson  
**Subject:** Heritage Cove Farm Hearing/ September 5, 2018

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

Mr Lawson,

I had previously requested that Legal Counsel Mr Wendling draft the findings of fact to minimize the chance of error or omission and avoid further delays, including another counter suit, to the applicants.

The wording of the Heritage Cove Farm hearing scheduled for September 5, 2018 seems to have been created by the current P & Z Director Michael Turisk. I do ask that you or Planning staff furnish these comments to the Planning Commission.

The "suggested finding for this standard" appears to be an open and obvious attempt to influence, bias, or suggest that the Planning Commission should support that finding. The public safety and first-responders input substantiated by the professional impact study clearly state there does not appear to be any undue burden created. Without the creation of a burden, any need to make a "reasonable accommodation" is negated. The Planning Commission should recognize and acknowledge that fact.

*SUGGESTED FINDING FOR THIS STANDARD WHICH WOULD SUPPORT REASONABLE ACCOMMODATION AND DETERMINE THAT HERITAGE COVE FARM, LLC PROJECT WOULD NOT PLACE AN UNDUE BURDEN OR DEMAND ON FIRE, POLICE OR PUBLIC RESOURCES IN EXCESS OF CURRENT CAPACITY 3 NOR INCREASE HAZARDS FROM FIRE OR OTHER DANGERS TO THE SUBJECT PROPERTY OR ADJACENT PROPERTIES.*

*1. The Planning Commission finds that based upon the letters from law enforcement, emergency services, and the Tuscarora Township Volunteer Fire Chief, as well as the study authored by Paul M. LeBlanc, of PLB Planning Group, LLC, being a certified planner and other exhibits, that the proposed special land use will not place demands on fire, police or other public resources in excess of current capacity or increase hazards from fire or other dangers either to the Heritage Cove Farm property or any adjacent properties. The Planning Commission further finds that the letters from the Tuscarora Township Fire Department, the Cheboygan County Sheriff's Department and the PLB Planning Group study clearly indicate that there would not be any increase in demand with respect to fire and police services in excess of current capacity regardless of whether the agencies are servicing the Heritage Cove Farm property or other adjacent properties within the township. The Planning Commission further finds that the amount of services provided by police and fire within Tuscarora Township and within the vicinity of Heritage Cove Farm has remained the same for several years while having to provide services to a declining population both within Tuscarora Township and Cheboygan County, thus negating any increase whatsoever of any potential hazards, including any criminal activity which may or may not occur within the township by adding Heritage Cove Farm operations as outlined in page 3 of the PLB Planning Group report. (See Exhibits 2, 3, 4, 5, 6 and 33).*

*2. The Planning Commission finds that ....*

The author of the findings language then identifies a "proposed finding", not the "suggested finding" of the proceeding paragraph.

*PROPOSED FINDING THAT DOES SHOW THAT THE DEMANDS PLACED ON FIRE, POLICE OR OTHER PUBLIC RESOURCES IN EXCESS OF CURRENT CAPACITY EXISTS AND/OR INCREASES HAZARDS FROM FIRE AND*

OTHER DANGERS TO THE SUBJECT PROPERTY OR ADJACENT PROPERTIES IN A MANNER WHICH CONSTITUTES AN UNDUE BURDEN.

*1. The Planning Commission finds that ....*

Mr Turisk omits the counter finding, approved by 7-1, 1 absent vote at the January 6, 2016 hearing, that demonstrates a possible increase in demands on emergency services.

*2. Testimony from a retired police officer indicated that there will be an increase in safety hazards and emergency room visits. Chris Blake, Clinical Psychologist, stated safety issues are a concern. There was general public testimony where numerous people testified that there would be numerous demands on fire, police and other resources.*

Those "previous findings", allegedly made on January 6, 2016, erroneously includes public comment from a retired police officer (not identified), and a "Chris Blake, Clinical Psychologist". Neither the unnamed retired police officer or self-proclaimed clinical psychologist can be accepted or identified as expert witnesses qualified to offer "testimony", a term incorrectly used by Planning Commission member Kavanaugh on January 6, 2016. Those comments are simply public comments.

The current P & Z Director Michael Turisk then leaves this unlabeled, cryptic, addendum after the DATE DECISION AND ORDER ADOPTED:

*Please place close attention when applying the evidence to the standard contained in Section 18.7.e. to the Court's Opinion beginning at the last paragraph on page 9 through page 10.*

Thank you,

Carl Muscott

**CHEBOYGAN COUNTY  
PLANNING COMMISSION  
FINDINGS OF FACT**

Lawrence and Elizabeth Hanson and Heritage Cove Farm, LLC  
Special Use Permit

- Applicant: Lawrence and Elizabeth Hanson, husband and wife, on behalf of Heritage Cove Farm, LLC  
625 N. Grandview Beach Road  
Indian River, MI 49749
- Owners: Lawrence and Elizabeth Hanson, husband and wife, on behalf of Heritage Cove Farm, LLC  
625 N. Grandview Beach Road  
Indian River, MI 49749
- Parcels: 625 N. Grandview Beach Road,  
Sections 5 and 6, Tuscarora Township  
Parcel No's. 162-005-300-002-00, 162-006-400-004-00 and  
162-006-400-005-00
- Hearing Date: Public Hearing on Wednesday, November 4, 2015 at 7:00 p.m. at the Cheboygan High School Auditorium  
Deliberations on Wednesday, December 2, 2015 at 7:00 p.m. at the Cheboygan High School Auditorium  
Deliberations on Wednesday December 16, 2015 at 7:00 p.m. at the Cheboygan County Building  
Public Hearing on Wednesday, June 6, 2018 at 7:00 p.m. at the Cheboygan High School Auditorium  
Deliberation on Wednesday, September 5, 2018 at 7:00 p.m. at the Cheboygan County Building, Commissioners' Room #135

PROPERTY DESCRIPTION

The property of Owners is described more fully as: Situated in the Township of Tuscarora, County of Cheboygan and State of Michigan.

*See attached legal descriptions.*

Hereinafter referred to as the "Property".

## APPLICATION

The purpose of this meeting and public hearing is to hear comments about and to further review standard 18.7.e. per the Michigan Court of Appeals' Opinion dated January 16, 2018. This project has been previously approved by the Cheboygan County Planning Commission at a meeting held on January 6, 2016. Subsequent to its approval, the decision was appealed by the Grandview Beach Association, a non-profit corporation. The approval was upheld on an appeal by the Hon. Donald J. McLennan, presiding on assignment at the Cheboygan County Circuit Court and by the Michigan Court of Appeals in an Opinion dated January 16, 2018. In the Michigan Court of Appeals Opinion of January 16, 2018, the Court noted that the Planning Commission needs to complete making a finding under Article 18, Section 18.7.e. In that Opinion the Michigan Court of Appeals notes that the Cheboygan County Planning Commission must determine under Section 18.7.e. of the Cheboygan County Zoning Ordinance, whether the use as proposed will increase demands on fire, police, or other public resources in excess of current capacity or increase hazards from fire or other dangers to the subject property or adjacent properties, while weighing in the balance the disabilities of the residents of Heritage Cove Farm, LLC, as applicable under 42 USC 3604(f)(3)(b). The term most commonly utilized when referencing a disability is "reasonable accommodation." This means that if the proposed special land use does place demands on fire, police or other public services in excess of current capacity and/or increases hazards from fire or other dangers to the subject property or adjacent properties, given the disabilities of the residents of Heritage Cove Farm, LLC, can a reasonable accommodation be made?

A reasonable accommodation, as stated by the Michigan Court of Appeals in its January 16, 2018 Opinion is whether any such increase in demands of governmental service providers constitutes an undue burden. The first part of the analysis is whether there is an increased demand to begin with. As the Court states on pages 9 and 10 of its Opinion, "An undue burden is a burden that requires more than 'reasonable costs' or modest, affirmative steps to accommodate the handicapped[.]' Citing *Quad Enterprises Co, LLC, v Town of Southold*, 369 Fed App'x 202, 207 (CA 2 2010)(citation omitted)." The Michigan Court of Appeals went on to state that "this analysis requires a court to 'balance the plaintiff's interest in equal housing against the defendant's interest in the integrity of the scheme that would be altered as a result of the accommodation.'" Weighing the costs of the proposed accommodation is an appropriate part of the fact-specific inquiry to determine whether an accommodation is reasonable. (See Michigan Court of Appeals Opinion in *Heritage Cove Farm, LLC* of January 16, 2018 page 10). Pages 9 and 10 of the Michigan Court of Appeals Opinion of January 16, 2018 is attached to these findings for the Planning Commission's review.

The Planning Commission having considered all of the evidence contained in the record as well as evidence presented prior to and at the public hearing held on June 6, 2018, the Planning Commission having heard statements of the applicants and/or the applicant's attorney(s) and/or agents, the Planning Commission having considered

correspondence submitted by members of the public, comments by members of the public, and/or attorneys who represent the members of the public and/or the Grandview Beach Association, and having reached a decision on this matter, states as follows:

SPECIFIC FINDINGS OF FACT UNDER 18.7.e. OF THE  
CHEBOYGAN COUNTY ZONING ORDINANCE

The Planning Commission makes the following findings of fact as required by Section 18.7.e. of the Cheboygan County Zoning Ordinance with respect to each of the following standards:

**STANDARDS FOR SPECIAL LAND USE APPROVAL**

18.7.e.	The proposed special land use will not place demands on fire, police, or other public resources in excess of current capacity nor increase hazards from fire or other dangers to the subject property or adjacent properties.
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**PREVIOUS** FINDINGS MADE ON JANUARY 6, 2016.

1. The Planning Commission finds that it has not received reports from law enforcement, ambulance, or fire personnel, under whose jurisdiction the subject site would fall. The Planning Commission notes that a 2012 study was referenced in the record from the *Emergency Medicine International Journal* cited by the *Washington Post*, “psychiatric patients make up 7 to 10 percent of emergency room visits[.]” (Khazan, Olga, [www.washingtonpost.com](http://www.washingtonpost.com), Jan 22, 2013.) (Exhibit 129). The Planning Commission find that, if a special land-use permit were to be granted, such approval should be conditioned on the results of a police, fire, and ambulance impact study to determine whether the standard has been met by Applicant.
2. Testimony from a retired police officer indicated that there will be an increase in safety hazards and emergency room visits. Chris Blake, Clinical Psychologist, stated safety issues are a concern. There was general public testimony where numerous people testified that there would be numerous demands on fire, police and other resources.

Motion by Mr. Kavanaugh, seconded by Mr. Freese, that findings 1-2 will not support standard 18.7.e. Motion carried. 7 Ayes (Croft, Freese, Kavanaugh, Bartlett, Ostwald, Jazdyk, Lyon), 1 Nay (Borowicz), 1 Absent (Churchill).

SUGGESTED FINDING FOR THIS STANDARD WHICH WOULD SUPPORT REASONABLE ACCOMMODATION AND DETERMINE THAT HERITAGE COVE FARM, LLC PROJECT WOULD NOT PLACE AN UNDUE BURDEN OR DEMAND ON FIRE, POLICE OR PUBLIC RESOURCES IN EXCESS OF CURRENT CAPACITY

NOR INCREASE HAZARDS FROM FIRE OR OTHER DANGERS TO THE SUBJECT PROPERTY OR ADJACENT PROPERTIES.

1. The Planning Commission finds that based upon the letters from law enforcement, emergency services, and the Tuscarora Township Volunteer Fire Chief, as well as the study authored by Paul M. LeBlanc, of PLB Planning Group, LLC, being a certified planner and other exhibits, that the proposed special land use will not place demands on fire, police or other public resources in excess of current capacity or increase hazards from fire or other dangers either to the Heritage Cove Farm property or any adjacent properties. The Planning Commission further finds that the letters from the Tuscarora Township Fire Department, the Cheboygan County Sheriff's Department and the PLB Planning Group study clearly indicate that there would not be any increase in demand with respect to fire and police services in excess of current capacity regardless of whether the agencies are servicing the Heritage Cove Farm property or other adjacent properties within the township. The Planning Commission further finds that the amount of services provided by police and fire within Tuscarora Township and within the vicinity of Heritage Cove Farm has remained the same for several years while having to provide services to a declining population both within Tuscarora Township and Cheboygan County, thus negating any increase whatsoever of any potential hazards, including any criminal activity which may or may not occur within the township by adding Heritage Cove Farm operations as outlined in page 3 of the PLB Planning Group report. (See Exhibits 2, 3, 4, 5, 6 and 33).
2. The Planning Commission finds that

PROPOSED FINDING THAT DOES SHOW THAT THE DEMANDS PLACED ON FIRE, POLICE OR OTHER PUBLIC RESOURCES IN EXCESS OF CURRENT CAPACITY EXISTS AND/OR INCREASES HAZARDS FROM FIRE AND OTHER DANGERS TO THE SUBJECT PROPERTY OR ADJACENT PROPERTIES IN A MANNER WHICH CONSTITUTES AN UNDUE BURDEN.

1. The Planning Commission finds that

The Planning Commission finds that this standard has/has not been met.

Motion made by \_\_\_\_\_, supported by \_\_\_\_\_  
that based upon the general findings of fact and the rezoning factors that the  
applicant's request for a special use permit is hereby recommended to be  
denied/approved/approved with conditions.

Ayes: \_\_\_\_\_

Nays: \_\_\_\_\_

DATE DECISION AND ORDER ADOPTED

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Secretary

Please place close attention when applying the evidence to the standard  
contained in Section 18.7.e. to the Court's Opinion beginning at the last paragraph on  
page 9 through page 10.