



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

October 25, 2019

Branden Acklen  
4017 Morris Street  
Saginaw, MI 48601

RE: License #:	AF730385752
Investigation #:	2019A0872049
	Acklen AFC Home

Dear Mr. Acklen:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On October 8, 2019, you submitted an acceptable written corrective action plan.

It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. Once this investigation is closed, I recommend that this Adult Foster Care license is closed, per the licensee's written request.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (810) 787-7031.

Sincerely,

Susan Hutchinson, Licensing Consultant  
Bureau of Community and Health Systems  
4809 Clio Road  
Flint, MI 48504  
(989) 293-5222

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AF730385752
<b>Investigation #:</b>	2019A0872049
<b>Complaint Receipt Date:</b>	08/29/2019
<b>Investigation Initiation Date:</b>	08/29/2019
<b>Report Due Date:</b>	10/28/2019
<b>Licensee Name:</b>	Branden Acklen
<b>Licensee Address:</b>	4017 Morris Street Saginaw, MI 48601
<b>Licensee Telephone #:</b>	(989) 385-2140
<b>Administrator:</b>	N/A
<b>Licensee Designee:</b>	N/A
<b>Name of Facility:</b>	Acklen AFC Home
<b>Facility Address:</b>	4017 Morris Street Saginaw, MI 48601
<b>Facility Telephone #:</b>	(989) 714-2247
<b>Original Issuance Date:</b>	09/05/2017
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	03/05/2018
<b>Expiration Date:</b>	03/04/2020
<b>Capacity:</b>	4
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
On 8/28/19, Resident A presented to the hospital with clothes soaked in urine. He has wounds on his legs and his feet are filthy. He appears to have not bathed in a long time and is not being cared for properly.	Yes
Additional Findings	Yes

## III. METHODOLOGY

08/29/2019	Special Investigation Intake 2019A0872049
08/29/2019	APS Referral This complaint was referred by APS
08/29/2019	Special Investigation Initiated - On Site Unannounced
09/03/2019	Contact - Telephone call received I received a message from the licensee, Branden Acklen
09/04/2019	Contact - Document Received I received documentation from Mr. Acklen
09/13/2019	Contact - Document Sent I exchanged emails with APS Worker, Katrice Humphrey
10/08/2019	Contact - Document Received Documentation received from Deloria Acklen
10/10/2019	Contact - Document Sent I exchanged emails with Ms. Humphrey
10/10/2019	Contact - Telephone call made I interviewed Relative A1
10/14/2019	Contact - Telephone call made I interviewed Relative A2
10/22/2019	Contact - Telephone call made I interviewed Resident A

10/22/2019	Contact - Telephone call made I spoke to Relative A1
10/22/2019	Inspection Completed On-site Unannounced
10/25/2019	Inspection Completed-BCAL Sub. Compliance
10/25/2019	Exit Conference I conducted an exit conference with Mr. Acklen via email

**ALLEGATION:**

**On 8/28/19, Resident A presented to the hospital with clothes soaked in urine. He has wounds on his legs and his feet are filthy. He appears to have not bathed in a long time and is not being cared for properly.**

**INVESTIGATION:**

On 8/29/19, I conducted an unannounced inspection of Acklen Adult Foster Care facility. I interviewed the licensee, Branden Acklen and his wife, Deloria Acklen. I attempted to obtain paperwork related to Resident A, but Mr. Acklen said that he did not have any written documentation on Resident A. Resident A was not present and therefore, I was unable to interview him.

Mr. Acklen stated that Resident A was admitted to this facility in April 2019. Mr. Acklen acknowledged that on 8/28/19, Resident A was admitted to the hospital. He said that on the morning of 8/28/19, he found Resident A on the floor in his bedroom. Resident A had soiled himself. Mr. Acklen helped Resident A shower, and he helped him dress in clean clothes. He noticed that Resident A's testicles were swollen, and he seemed to be in distress, so Mr. Acklen had a volunteer transport Resident A to the hospital. Mr. Acklen said that according to the volunteer, Resident A again soiled himself on the way to the hospital.

According to Mr. Acklen, he assisted Resident A with showering every day. Mr. Acklen said that since Resident A did not have a primary care physician, he was working on getting him one. Mr. Acklen denied that Resident A was filthy and denied that he was not being taken care of properly. Mr. Acklen said that he took Resident A to a doctor on several occasions to treat any medical concerns. He said that Resident A had sores on his legs and was receiving treatment from a wound clinic.

On 10/08/19, I received documentation from Mrs. Acklen. I reviewed a statement for Resident A from Great Lakes Bay Health Center. According to the statement, Resident A was seen on 5/07/19 for blood work. He was seen on 6/06/19 to evaluate him as a new patient and again on 7/19/19 to establish him as a patient.

On 10/08/19, I received a letter from Mr. Acklen asking that his AFC license be closed. He said that he has notified the existing residents and their guardians and the current residents will remain in the home as room and board individuals.

On 10/10/19, I interviewed Relative A1 via telephone. Relative A1 said that she had a lot of concerns while Resident A resided at Acklen AFC. She said that things at the facility were very unorganized and she does not feel Resident A was being cared for properly. He was often dirty, wearing ill-fitting clothing. She said that Resident A often appeared confused and he was not happy. She said that she helped Resident A move to a new facility which is closer to family.

On 10/11/19, I reviewed the Adult Protective Services Investigation report completed by APS Worker, Katrice Humphrey. According to the report, Resident A is diagnosed with congestive heart failure, dementia, and diabetes and he is his own guardian. Ms. Humphrey met with Resident A at Covenant Hospital on 8/29/19 and spoke with hospital staff. The hospital social worker told Ms. Humphrey that Resident A has been to the hospital frequently for medical issues. She told Ms. Humphrey that whenever Resident A comes to the hospital, he always appears to be filthy and unkept. On 8/28/19, he presented to the hospital in clothes soaked in fresh and old urine. His feet were "disgustingly dirty" and it appeared that he is not being taken care of properly. He had sores on his legs and an abrasion on his face from his glasses.

On 10/14/19, I interviewed Relative A2 via telephone. Relative A2 said that he saw Resident A last month and he was in terrible condition. He appeared to be confused and his clothes were ill fitting and dirty. He also said that Resident A appeared to be filthy and he had not shaved nor had a hair cut in a long time. Relative A2 said that Resident A is now in an AFC home closer to him and he appears to be doing much better.

On 10/21/19, I interviewed Resident A via telephone. Resident A said that he resided at Acklen AFC from April 2019 until 9/30/19. He stated that he did not bathe on a regular basis and staff did not encourage him or assist him in doing so. He said that he and Relative A1 bought him several clothing items, but other residents would steal them from him. Therefore, he would often just pick up dirty clothes from the floor and wear them. He said that the clothing he wore was usually not his and was usually dirty. He said that he would often have "accidents" and would urinate in his clothing, but he would just "try and clean myself up" without assistance from staff. He confirmed that Mr. Acklen took him to the doctor on a few occasions but said that he did not feel that the medical treatment he received was "good."

At my request, Mr. Acklen attempted to gather health care information from Great Lakes Bay Regions Health Centers regarding Resident A's doctor visits. Mr. Acklen said that he was told that the medical information would not be available to him since he is not Resident A's guardian.

<b>APPLICABLE RULE</b>	
<b>R 400.1408</b>	<b>Resident care; licensee responsibilities.</b>
	<b>(1) A licensee shall provide basic self-care and habilitation training in accordance with the resident's written assessment plan.</b>
<b>ANALYSIS:</b>	<p>Hospital staff said that Resident A often presented to the hospital and was filthy and did not appear to be taken care of properly.</p> <p>Mr. Acklen denied that Resident A was ever filthy and said that he feels he took good care of him.</p> <p>Resident A said that he did not bathe on a regular basis and staff did not encourage him to do so. He said that he often wore dirty clothes and would have accidents without being cleaned up properly.</p> <p>Relatives A1 and A2 said that when they saw Resident A, he was dirty, wearing dirty, ill-fitting clothing, and appeared to be disheveled.</p> <p>I conclude that there is sufficient evidence to substantiate this rule violation at this time.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

Resident A and Relative A1 said that they never received a fee policy when Resident A was admitted to this facility.

<b>APPLICABLE RULE</b>	
<b>R 400.1407</b>	<b>Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.</b>
	<p><b>(11) A licensee shall provide a resident or his or her designated representative and responsible agency with a statement of the fee policy at the time of admission. A fee statement shall include all of the following:</b></p> <p>    <b>(a) A description of services to be provided and the fee.</b></p> <p>    <b>(b) A description of additional costs above the basic fee policy.</b></p>

	<b>(c) A description of the transportation costs in the basic fee structure and the transportation which is provided at extra cost.</b>
<b>ANALYSIS:</b>	Resident A and Relative A1 said that they never received a fee policy when Resident A was admitted to this facility.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

Mr. Acklen said that Resident A was admitted to this facility in April 2019 as an emergency admission. During my onsite inspection on 8/29/19, Mr. Acklen said that an Assessment Plan has not been completed on Resident A.

<b>APPLICABLE RULE</b>	
<b>R 400.1407</b>	<b>Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician’s instructions; health care appraisal.</b>
	<b>(4) In situations where a resident is referred for emergency admission and the licensee agrees to accept the admission, a resident assessment plan shall be conducted within 15 calendar days following the emergency admission. The resident assessment plan shall be conducted in accordance to the provisions outlined in subrules (2) and (3) of this rule.</b>
<b>ANALYSIS:</b>	Mr. Acklen said that Resident A was admitted to this facility in April 2019 as an emergency admission. During my onsite inspection on 8/29/19, Mr. Acklen said that an Assessment Plan has not been completed on Resident A.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

Mr. Acklen, Resident A, and Relative A1 said that a Resident Care Agreement was not completed while Resident A was living at this facility.

<b>APPLICABLE RULE</b>	
<b>R 400.1407</b>	<b>Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.</b>
	<b>(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.</b>
<b>ANALYSIS:</b>	Mr. Acklen, Resident A, and Relative A1 said that a Resident Care Agreement was not completed while Resident A was living at this facility.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

Mr. Acklen said that Resident A was not under the care of a physician at the time he was admitted to this facility. During my onsite inspections on 8/29/19 and 10/22/19, Mr. Acklen said that he did not have a Health Care Appraisal completed on Resident A.

<b>APPLICABLE RULE</b>	
<b>R 400.1407</b>	<b>Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.</b>
	<b>(9) If a resident is not under the care of a physician at the time of the resident's admission to the home, the licensee shall require that the resident or the resident's designated representative provide a written health care appraisal completed within the 90-day period before the resident's admission to the home. If a written health care appraisal is not available, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.</b>



<b>ANALYSIS:</b>	Mr. Acklen said that Resident A was not under the care of a physician at the time he was admitted to this facility. During my onsite inspections on 8/29/19 and 10/22/19, Mr. Acklen said that he did not have a Health Care Appraisal completed on Resident A.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 10/10/19, I interviewed Relative A1 via telephone. She said that on one occasion, she mailed Resident A a letter and \$50 in cash. She spoke to Resident A via telephone and asked him if he received the money. Resident A told her that he had not. While on the phone with Resident A, she heard Mr. Acklen tell him, "it's right here." She overheard Mr. Acklen tell Resident A that he was holding on to the \$50 so Resident A did not lose it.

On 10/14/19, I interviewed Relative A2 via telephone. He said that Resident A told him that Mr. Acklen opened a letter he received from Relative A1 and kept the money from him until he asked for it.

On 10/21/19, I interviewed Resident A via telephone. Resident A confirmed that on one occasion, Relative A1 asked him about a letter she had mailed him. He told her that he had not received it. While on the phone with Relative A1, Mr. Acklen gave him a folded letter and \$50 and told him that he was keeping the money for him so he would not lose it. Resident A said that Mr. Acklen had opened his mail and did not tell him about it until he was on the phone with Resident A.

On 10/22/19, Mr. Acklen told me that he never opened Resident A's mail. He said that on one occasion, Resident A received an envelope from Relative A1. He overheard Resident A telling Relative A1 that he did not receive any money. Mr. Acklen said that he reached over and unfolded the envelope, revealing \$50. At that point, he told Resident A, "it's right there."

Residents B, C, and D said that to their knowledge, Mr. Acklen has never opened their mail.

<b>APPLICABLE RULE</b>	
<b>R 400.1409</b>	<b>Resident rights; licensee responsibility.</b>
	<b>(1) Upon a resident's admission to the home, the licensee shall inform and explain to the resident or the resident's designated representative all of the following resident rights:</b> <b>(d) The right to write, send, and receive uncensored and unopened mail at his or her own expense.</b>

<b>ANALYSIS:</b>	<p>Resident A, Relative A1, and Relative A2 said that on one occasion, Mr. Acklen opened Resident A's mail.</p> <p>Mr. Acklen said that he never opened Resident A's mail.</p> <p>Residents B, C, and D said that to their knowledge, Mr. Acklen never opened their mail.</p> <p>I conclude that there is sufficient evidence to substantiate this rule violation at this time.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 10/22/19, I conducted an unannounced inspection of Acklen Adult Foster Care. I was greeted at the door by Resident B. I entered the facility and found Residents B, C, D, and E home alone. Resident B said that Mr. Acklen left a few minutes ago and said that he would be back shortly. There were no staff present with the residents. I was at the facility for approximately 10-15 minutes before Mr. and Mrs. Acklen returned. I talked to Mr. Acklen about the residents being left unattended. Mr. Acklen said that he thought his AFC license had already been closed. He said that the people currently living at this facility are room and board clients and are capable of being left unattended. I told him that until he receives a closing letter from me, he must treat this facility as an AFC home and follow all the AFC rules and regulations. He agreed.

<b>APPLICABLE RULE</b>	
<b>R 400.1410</b>	<b>Resident protection.</b>
	<b>A licensee or responsible person shall always be on the premises when a resident is in the home.</b>
<b>ANALYSIS:</b>	On 10/22/19, I conducted an unannounced inspection of Acklen AFC facility. I found Residents B-E home alone. No staff or responsible persons were present.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

Resident A was hospitalized on 8/28/19. He had been hospitalized approximately two other times prior to this. The licensee did not contact me about these hospitalizations, nor did he complete an Incident/Accident Report regarding these hospitalizations.

<b>APPLICABLE RULE</b>	
<b>R 400.1416</b>	<b>Resident health care.</b>
	<b>(4) A licensee shall make a reasonable attempt to contact the resident's next of kin, designated representative, and</b>

	<b>responsible agency by telephone, followed by a written report to the resident's designated representative and responsible agency within 48 hours of the following: (b) Any accident or illness requiring hospitalization.</b>
<b>ANALYSIS:</b>	Resident A was hospitalized on 8/28/19. He had been hospitalized approximately two other times prior to this. The licensee did not contact me about these hospitalizations, nor did he complete an Incident/Accident Report regarding these hospitalizations.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

Relative A1 said that when she saw Resident A in August 2019, he was disheveled and was wearing dirty, ill-fitting clothes.

Relative A2 said that when he saw Resident A in September 2019, he appeared to be dirty and was wearing dirty, ill-fitting clothes.

Resident A said that he typically only had one pair of pants and a couple of shirts at a time. He said that he would often wear his clothes for multiple days in a row without them being laundered. He said that oftentimes, he only had dirty clothes to wear because staff did not provide him with clean clothes.

Mr. Acklen said that he always provided Resident A with clean clothes to wear.

<b>APPLICABLE RULE</b>	
<b>R 400.1420</b>	<b>Resident hygiene.</b>
	<b>(5) A licensee shall afford a resident who is capable, opportunities, or instructions when necessary, to routinely launder clothing. Clean clothing shall be available at all times.</b>
<b>ANALYSIS:</b>	Relative A1 saw Resident A in August 2019 and Relative A2 saw Resident A in September 2019. On both occasions, Resident A was wearing dirty, ill-fitting clothes.  Resident A said that he often had to wear dirty, ill-fitting clothing because there were no clean clothes for him to wear.  Mr. Acklen said that he always provided Resident A with clean clothes to wear.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

During my onsite inspection on 8/29/19, I asked Mr. Acklen to provide me with copies of Resident A's Funds and Valuables Part I and II forms. Mr. Acklen said that he has not completed any Funds and Valuables Part I or II forms on Resident A since he was admitted to this facility.

<b>APPLICABLE RULE</b>	
<b>R 400.1421</b>	<b>Handling of resident funds and valuables.</b>
	<b>(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.</b>
<b>ANALYSIS:</b>	During my onsite inspection on 8/29/19, I asked Mr. Acklen to provide me with copies of Resident A's Funds and Valuables Part I and II forms. Mr. Acklen said that he has not completed any Funds and Valuables Part I or II forms on Resident A since he was admitted to this facility.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

During my onsite inspections on 8/29/19 and 10/22/19, I asked Mr. Acklen for Resident A's resident record. Mr. Acklen said that he does not have any written records for Resident A.

<b>APPLICABLE RULE</b>	
<b>R 400.1422</b>	<b>Resident records.</b>
	<b>(1) A licensee shall complete and maintain a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:</b> <b>(a) Identifying information, including, at a minimum, all of the following:</b> <b>(i) Name.</b> <b>(ii) Social security number.</b> <b>(iii) Home address.</b> <b>(iv) Name, address, and telephone number of the next of kin or designated representative.</b> <b>(v) Name, address, and telephone number of person or agency responsible for the resident's placement in the home.</b>

	<p>(vi) Name, address, and telephone number of the preferred physician and hospital.</p> <p>(b) Date of admission.</p> <p>(c) Date of discharge and place to which resident was discharged.</p> <p>(d) Health care information, including all of the following:</p> <p>(i) Health care appraisals.</p> <p>(ii) Medication logs.</p> <p>(iii) Statements and instructions for supervising prescribed medication.</p> <p>(iv) Instructions for emergency care.</p> <p>(e) Resident care agreement.</p> <p>(f) Assessment plan.</p> <p>(g) Weight record.</p> <p>(h) Incident and accident reports.</p> <p>(i) Resident funds and valuables record.</p> <p>(j) Resident grievances and complaint record.</p>
<b>ANALYSIS:</b>	During my onsite inspections on 8/29/19 and 10/22/19, I asked Mr. Acklen for Resident A's resident record. Mr. Acklen said that he does not have any written records for Resident A.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 10/25/19, I conducted an exit conference with Mr. Acklen via email. I explained that I am substantiating several rule violations. I also explained that I will accept his letter from 10/08/19 as his corrective action plan and per his request, his AFC license will be closed at the conclusion of this special investigation. Mr. Acklen agreed.

#### IV. RECOMMENDATION

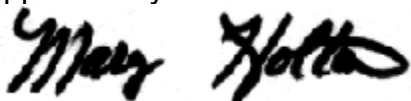
I have received an acceptable corrective action plan. I recommend that per the licensee's request, this AFC license shall be closed at the conclusion of this investigation.

*Susan Hutchinson, MA, LRC*

October 25, 2019

Susan Hutchinson Licensing Consultant	Date
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Approved By:



October 25, 2019

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Mary E Holton  
Area Manager

Date