



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 24, 2023

Bonnie Perkins/Crackel
116 Robert
Manton, MI 49663

RE: License #: AF830279137
Investigation #: 2023A0870023
SunShine Home

Dear Ms. Perkins/Crackel:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (231) 922-5309.

Sincerely,

A handwritten signature in dark ink, appearing to read "Bruce A. Messer".

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF830279137
Investigation #:	2023A0870023
Complaint Receipt Date:	02/16/2023
Investigation Initiation Date:	02/22/2023
Report Due Date:	04/17/2023
Licensee Name:	Bonnie Perkins/Crackel
Licensee Address:	116 Robert Manton, MI 49663
Licensee Telephone #:	(231) 620-8921
Name of Facility:	SunShine Home
Facility Address:	116 Robert Manton, MI 49663
Facility Telephone #:	(231) 620-8921
Original Issuance Date:	12/02/2005
License Status:	REGULAR
Effective Date:	06/01/2022
Expiration Date:	05/31/2024
Capacity:	6
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
Resident A is not allowed to go anywhere on her own even though she is capable.	Yes
Resident A is only allowed to shower once a week.	Yes
Additional Findings	Yes

III. METHODOLOGY

02/16/2023	Special Investigation Intake 2023A0870023
02/22/2023	Special Investigation Initiated - On Site Interviews conducted with Licensee Bonnie Perkins and Resident A.
02/22/2023	Exit Conference Completed with Licensee Bonnie Perkins.
02/23/2023	APS Referral Adult Protective Services referral made to the Michigan Department of Health and Human Services, Centralized Intake Unit.
02/23/2023	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Resident A is not allowed to go anywhere on her own even though she is capable.

INVESTIGATION: On February 22, 2023, I conducted an unannounced on-site special investigation at the SunShine AFC home. I met with Licensee Bonnie Perkins. I informed Ms. Perkins of the above stated allegations. Ms. Perkins confirmed that she does not allow Resident A to go unaccompanied into the community as Resident A has a history of falls, uses a walker and makes “inappropriate” purchases. She noted that Resident A was admitted into the facility on August 23, 2022, was placed by Northern Lakes Community Mental Health staff, and did not have a guardian when admitted. Ms. Perkins noted that a guardianship has since been put in place for Resident A. She further noted that Resident A’s guardian, Clarinda Starlin, has given her verbal instructions to not allow Resident A into the community unaccompanied.

Ms. Perkins provide me with Resident A’s Assessment Plan for AFC Residents (BCAL-3265), for my review. This form was signed by Ms. Perkins on August 23, 2022, and is marked “yes” for the questions “moved independently in the community.” Ms. Perkins stated that this is the only assessment plan on file for Resident A.

On February 22, 2023, I conducted a private interview with Resident A at the facility. Resident A stated she would like to go by herself into the community but her doctor from CMH and her guardian instructed Bonnie (Licensee Bonnie Perkins) to not let her go by herself.

APPLICABLE RULE	
R 400.1411	Resident behavior management; general requirements.
	(2) Methods of behavior management shall encourage cooperation, self-esteem, self-direction, and independence, and shall be administered in accordance with a resident's written assessment plan.
ANALYSIS:	<p>Resident A’s Assessment Plan for AFC Residents (BCAL-3265), signed by Ms. Perkins on August 23, 2022, is marked “yes” for the questions “moved independently in the community.”</p> <p>Ms. Perkins acknowledged that she does not allow Resident A to go unaccompanied into the community because Resident A has a history of falls, uses a walker and makes “inappropriate” purchases.</p> <p>Licensee Bonnie Perkins is using a method of behavior management which is contrary to Resident A’s written assessment plan.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Resident A is only allowed to shower once a week.

INVESTIGATION: Ms. Perkins acknowledged that, “to a degree I do restrict her showers.” She noted that because of Resident A’s “mental health issues” Resident A will “just stand in the shower and waste water.” As a result of this behavior, Ms. Perkins stated she does not allow Resident A to take daily showers.

Resident A stated she is only allowed to take one shower per week and further noted that she would like to shower more often than that.

APPLICABLE RULE	
R 400.1420	Resident hygiene.
	(1) A licensee shall afford a resident the opportunity for daily bathing.
ANALYSIS:	Licensee Bonnie Perkins is not affording Resident A the opportunity for daily bathing.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS: During the course of this special investigation, it was noted that Resident A's Assessment Plan for AFC Residents (BCAL-3265), which was completed and signed by Ms. Perkins on August 23, 2022, was not signed or dated by a representative of Resident A's Responsible Agency Northern Lakes Community Mental Health, nor was it signed or dated by Resident A's guardian/designated representative, Clarinda Starlin.

APPLICABLE RULE	
R 400.1407	Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.
	(3) In situations where a resident is referred for admission, the resident assessment plan shall be conducted in conjunction with the resident or the resident's designated representative, the responsible agency, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	Licensee Bonnie Perkins did not properly complete Resident A's assessment plan. The plan was not signed by representatives of Resident A's responsible agency nor by her designated representative.
CONCLUSION:	VIOLATION ESTABLISHED

On February 22, 2023, I conducted an exit conference with Licensee Bonnie Perkins. I explained my findings as noted above. Ms. Perkins stated that she understood the findings, had no further information to provide concerning this special investigation, and that she had no further questions concerning this special investigation. Ms. Perkins noted that she would submit a corrective action plan which addresses the above cited rule violations within 15 days of receipt of this report.

IV. RECOMMENDATION

I recommend, contingent upon the submission of an acceptable corrective action plan, that the status of the license remain unchanged.

 February 24, 2023

Bruce A. Messer Date
Licensing Consultant

Approved By:

 February 24, 2023

Jerry Hendrick Date
Area Manager