



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

March 5, 2024

April Germani  
1446 Mabel Ave  
Flint, MI 48506

RE: License #: AS250383869  
Sincere AFC Home  
1446 Mabel Ave  
Flint, MI 48506

Dear April Germani:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

Please contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, you may contact the local office at (517) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "C. Garza".

Christina Garza, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 240-2478

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS250383869
<b>Licensee Name:</b>	April Germani
<b>Licensee Address:</b>	1446 Mabel Ave Flint, MI 48506
<b>Licensee Telephone #:</b>	(810) 620-6154
<b>Licensee:</b>	April Germani
<b>Administrator:</b>	April Germani
<b>Name of Facility:</b>	Sincere AFC Home
<b>Facility Address:</b>	1446 Mabel Ave Flint, MI 48506
<b>Facility Telephone #:</b>	(810) 620-6154
<b>Original Issuance Date:</b>	03/10/2017
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/29/2024

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 2

No. of others interviewed 1 Role: Licensee

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.  
Inspection did not take place during meal time.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
2/5/22; AS510(5), AS403(1), AS506(2), AS510(3), AS301(10) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

**R 400.14205            Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

**(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.**

At time of inspection, Licensee and Administrator, April Germani did not have verification of being tested for tuberculosis within the last 3 years. April Germani stated she has not been tested for tuberculosis in the last 3 years and would set up an appointment to get testing completed.

**R 400.14301            Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

**(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.**

At time of inspection, resident care agreement for Resident A was not reviewed at least annually. Resident A's resident care agreement was last completed in 2022. Licensee April Germani stated she has not been able to get paperwork completed due to her printer being inoperable.

**R 400.14310            Resident health care.**

**(2) A licensee shall maintain a copy of the annual health care appraisal on file for not less than 2 years.**

At time of inspection, Resident A did not have an annual health care appraisal completed. Resident A was admitted to the home in August 2017 and his last health care appraisal was completed in March 2022. Licensee April Germani stated she has not been able to get paperwork completed due to her printer being inoperable.

**R 400.14310 Resident health care.**

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

At time of inspection, Resident A did not have his weight recorded monthly. Resident A's weight was last recorded in August 2023. Licensee April Germani reported she became sick last year causing her to neglect some of the duties at the home.

**R 400.14312 Resident medications.**

(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:

(b) Complete an individual medication log that contains all of the following information:

(i) The medication.

(ii) The dosage.

(iii) Label instructions for use.

(iv) Time to be administered.

(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

(vi) A resident's refusal to accept prescribed medication or procedures.

At time of inspection, Resident A and Resident B did not have medication logs indicating their medications, dosage, label instructions for use, time medication is to be administered, and the initials of the person who administered the medication. Licensee April Germani reported she has not been able to print medication records due to her printer being inoperable.

**R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least

once per quarter. A record of the practices shall be maintained and be available for department review.

At time of inspection, the licensee did not practice evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. The last evacuation drill was completed in January 2024, and prior to that March 2023. Licensee April Germani reported she became sick last year causing her to neglect some of the duties at the home.

**REPEAT VIOLATION ESTABLISHED.** Reference Renewal LSR dated 3/4/2022. Corrective action plan dated for 5/19/2022 indicated Licensee April Germani demonstrated emergency preparation with the residents on 5/1/2022 and will continue as required and at least once per month.

**R 400.14401          Environmental health.**

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

At time of inspection, water temperature was measured to be in excess of 120 degrees Fahrenheit.

**R 400.14403          Maintenance of premises.**

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

At time of inspection, stairway to the second floor of the home was dirty and in need of thorough cleaning.

**R 400.14403          Maintenance of premises.**

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

At time of inspection, flooring in second floor bathroom was damaged and in need of repair. Ceiling in Resident C's bedroom (upstairs, north bedroom) was damaged and in need of repair. Flooring in 2 upstairs bedrooms need repair. Licensee April Germani explained that the carpet in the upstairs bedrooms was pulled up due to it being soiled and there may be a leak causing damage to Resident C's bedroom ceiling.

**R 400.14407 Bathrooms.**

(6) At least 1 bathing facility that is available for resident use shall be provided on each floor that has resident bedrooms.

At time of inspection, upstairs bathroom shower has broken plumbing fixtures and need repair.

**R 400.14408 Bedrooms generally.**

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

At time of inspection, Resident B bedroom door had a lock that is not non-locking-against-egress.

**R 400.14507 Means of egress generally.**

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

At time of inspection, a door (front) that forms a part of a required means of egress had a lock that is not non-locking-against-egress.

**REPEAT VIOLATION ESTABLISHED.** Reference Renewal LSR dated 3/4/2022. Corrective action plan dated for 5/19/2022 indicated Licensee April Germani will have front door lock fixed.



#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



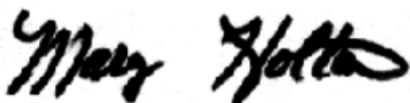
3/5/2024

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Christina Garza  
Licensing Consultant

Date

Approved by:



3/5/2024

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Mary E. Holton  
Area Manager

Date