



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 20, 2024

Alan Perkins
2704 Corunna Rd
Flint, MI 48503

RE: License #:	AS250010662
Investigation #:	2025A0123009
	Perkins AFC Home

Dear Alan Perkins:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

If you desire technical assistance in addressing these issues, please feel free to 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 (517) 643-7960.

Sincerely,

A handwritten signature in cursive script, appearing to read "Shamidah Wyden".

Shamidah Wyden, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48607
989-395-6853

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250010662
Investigation #:	2025A0123009
Complaint Receipt Date:	11/21/2024
Investigation Initiation Date:	11/25/2024
Report Due Date:	01/20/2025
Licensee Name:	Alan Perkins
Licensee Address:	2704 Corunna Rd Flint, MI 48503
Licensee Telephone #:	(810) 233-0399
Administrator:	Alan Perkins
Licensee Designee:	N/A
Name of Facility:	Perkins AFC Home
Facility Address:	1027 W Second St Flint, MI 48503
Facility Telephone #:	(810) 239-4543
Original Issuance Date:	08/21/1976
License Status:	REGULAR
Effective Date:	12/04/2024
Expiration Date:	12/03/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Member of Household 1 has had ongoing hygiene issues for about a year. On 11/19/2024, Member of Household 1 was observed with dirty hands and fingernails. Member of Household 1's clothing was not clean, and often smells of urine.	No
Member of Household 1 has been out of medication for at least a week and the AFC home did not contact their provider or pharmacy.	No
Additional Findings	Yes

III. METHODOLOGY

11/21/2024	Special Investigation Intake 2025A0123009
11/22/2024	APS Referral Information received regarding APS referral.
11/25/2024	Special Investigation Initiated - On Site I conducted an unannounced on-site at the facility.
11/25/2024	Contact - Telephone call made I spoke with Alan Perkins.
11/25/2024	Contact - Telephone call made I left a voicemail requesting a return call from Complainant 1.
12/02/2024	Contact - Telephone call received I spoke with Individual 1 via phone.
12/04/2024	Contact - Telephone call made I made a call to Hurley Medical Center.
12/18/2024	Exit Conference I spoke with licensee Alan Perkins via phone.

ALLEGATION:

- **Member of Household 1 has had ongoing hygiene issues for about a year. On 11/19/2024, Member of Household 1 was observed with dirty hands and fingernails. Member of Household 1's clothing was not clean, and often smells of urine.**
- **Member of Household 1 has been out of medication for at least a week and the AFC home did not contact their provider or pharmacy.**

INVESTIGATION: On 11/25/2024, I conducted an unannounced on-site at the facility. I interviewed staff Christine Adamson. Staff Adamson stated that Member of Household 1 was not a resident of the facility. Member of Household 1 only rented a room in the home. Member of Household 1 is now living at Kith Haven, a nursing home. Staff Adamson stated that there are six residents in the facility, and Member of Household 1 made seven people in the facility. Staff Adamson stated that they had no knowledge of whether Member of Household 1 has a case manager. Staff Adamson stated that Member of Household 1 did have hygiene issues and did not bathe.

During this on-site, I interviewed Resident A on the porch. Resident A stated that Member of Household 1 did have hygiene issues. Member of Household 1 never showered. Resident A stated that they do not know if Member of Household 1 was a resident or not. During this on-site, I observed four residents total, including Resident A. No observable issues were noted regarding cleanliness and hygiene.

On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Member of Household 1 lived at Perkins AFC Home for about three weeks. Member of Household 1 was a tenant at another property Licensee Perkins owned. Licensee Perkins was trying to assist Member of Household 1 with finding a new residence, due to remodeling and selling the property Member of Household 1 was living in. Licensee Perkins stated that Member of Household 1 has been a tenant of his since around 1984, and Member of Household 1 was room and board at Perkin's AFC. Licensee Perkins stated that Member of Household 1 is their own guardian who went to the doctor regularly. Member of Household 1 had diarrhea regularly and their diabetes got to the point that it was not healthy. Licensee Perkins stated that Member of Household 1 agreed to be admitted to Kith Haven nursing home because Member of Household 1 could not take care of themselves. Licensee Perkins stated that they were informed by someone that Member of Household 1 was admitted to Kith Haven over the weekend. Licensee Perkins stated that Member of Household 1 received medical services from Genesee Health Systems, but Licensee Perkins did not know if Member of Household 1 received case management services. Licensee Perkins denied handling Member of Household 1's medications. Swartz Creek Pharmacy delivered the medications and Member of Household 1 dispensed their own medications. Licensee Perkins denied ever intervening in regard to Member of

Household 1's medications. Licensee Perkins stated that Member of Household 1's health recently deteriorated.

On 12/02/2024, I spoke with Individual 1 from Genesee Health Systems (GHS). Individual 1 confirmed that Member of Household 1 receives medical services from GHS. Member of Household 1 was seen by GHS medical staff recently. Member of Household 1 was observed at that time to smell of urine, appeared unclean, and was unstable on their feet. Individual 1 stated that medical notes show Member of Household 1 address was noted to be Perkins AFC, but Member of Household 1 did refer to Licensee Perkins as "landlord." Individual 1 stated that there was no information on file that Member of Household 1 was currently at Kith Haven nursing home. Individual 1 called back to inform me that Member of Household 1 is currently admitted to Hurley Medical Center.

On 12/04/2024, I made a phone call to Hurley Medical Center. I spoke with Hurley Medical Center staff person, Bonnie Raymond, who stated that Member of Household 1 passed away on 12/03/2024.

APPLICABLE RULE	
R 400.14314	Resident hygiene.
	(1) A licensee shall afford a resident the opportunity, and instructions when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.
ANALYSIS:	<p>On 11/25/2024, I conducted an unannounced on-site at the facility. Staff Adamson stated that Member of Household 1 was not a resident of the facility.</p> <p>On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Member of Household 1 lived at Perkins AFC Home for about three weeks.</p> <p>On 12/04/2024, I made a phone call to Hurley Medical Center. I spoke with Bonnie Raymond who stated that Member of Household 1 passed away on 12/03/2024.</p> <p>Member of Household 1 could not be interviewed due to passing away during the course of this investigation.</p> <p>There is no preponderance of evidence to substantiate a rule violation. It was reported during this course of this investigation that Member of Household 1 was not a resident</p>

	in the facility.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14312	Resident medications.
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.
ANALYSIS:	<p>On 11/25/2024, I conducted an unannounced on-site at the facility. Staff Adamson stated that Member of Household 1 was not a resident of the facility.</p> <p>On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Member of Household 1 lived at Perkins AFC Home for about three weeks. Licensee Perkins denied handling Member of Household 1's medications. Swartz Creek Pharmacy delivered the medications and Member of Household 1 dispensed their own medications. Licensee Perkins denied ever intervening in regard to Member of Household 1's medications.</p> <p>On 12/04/2024, I made a phone call to Hurley Medical Center. I spoke with Bonnie Raymond who stated that Member of Household 1 passed away on 12/03/2024.</p> <p>Member of Household 1 could not be interviewed due to passing away during the course of this investigation.</p> <p>There is no preponderance of evidence to substantiate a rule violation. It was reported during the course of this investigation that Member of Household 1 was not a resident in the facility, and the facility was not responsible for handling their medications.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: On 11/25/2024, I conducted an unannounced on-site at the facility. I interviewed staff Christine Adamson. Staff Adamson stated that Member of Household 1 was not a resident of the facility. Member of Household 1 only rented a room in the home. Staff Adamson stated that there are six residents in the facility, and Member of Household 1 made seven people in the facility.

On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Member of Household 1 lived at Perkins AFC Home for about three weeks.

On 12/02/2024, I spoke with Individual 1 from Genesee Health Systems (GHS). Individual 1 stated that medical notes show Member of Household 1's address was noted to be Perkins AFC, but Member of Household 1 did refer to Licensee Perkins as "landlord."

On 12/18/2024, I conducted an exit conference with licensee Alan Perkins. He confirmed that at the time Member of Household 1 took residency at the facility, that there were already six residents in the home. I informed him of the findings and conclusion of this rule violation.

APPLICABLE RULE	
R 400.14105	Licensed capacity.
	(2) Any occupant of a home, other than the licensee or persons who are related to the licensee, live-in staff or the live-in staff's spouse and minor children, or a person related to a resident who is not in need of foster care, shall be considered a resident and be counted as a part of the licensed capacity.
ANALYSIS:	<p>On 11/25/2024, I conducted an unannounced on-site at the facility. I interviewed staff Christine Adamson. Staff Adamson stated that there are six residents in the facility, and Member of Household 1 made seven people in the facility. On 11/15/2024, I spoke with licensee Alan Perkins who stated that Member of Household 1 was an occupant of the home, but not a resident. On 12/18/2024, I confirmed with Licensee Perkins that Member of Household 1 was an occupant of the home, not in need of foster care, who was considered a resident in regard to capacity count.</p> <p>There is a preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Licensee Perkins stated that they did not do a background check on Member of Household 1 as a member of the household.

On 12/18/2024, I conducted an exit conference with licensee Alan Perkins via phone. He again confirmed that he did not conduct a background check for Member of Household 1. I informed Licensee Perkins of the findings and conclusion.

APPLICABLE RULE	
R 400.14201	Qualifications of administrator, direct care staff, licensee, and members of household; provision of names of employee, volunteer, or member of household on parole or probation or convicted of felony; food service staff.
	(10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.
ANALYSIS:	<p>On 11/15/2024, I spoke with licensee designee Alan Perkins via phone. Licensee Perkins stated that they did not do a background check on Member of Household 1 as a resident of the household.</p> <p>There is a preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Member of Household 1 lived at Perkins AFC Home for about three weeks.

On 12/18/2024, I conducted an exit conference with licensee Alan Perkins. Licensee Perkins confirmed that he did not obtain a physician's statement for Member of Household 1. I informed him of the findings and conclusion.

APPLICABLE RULE	
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.
	(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.
ANALYSIS:	<p>On 11/15/2024, licensee Alan Perkins reported that Member of Household 1 was not a resident. He confirmed during the course of this investigation that a physician's statement was not obtained for Member of Household 1 within 30 days of Member of Household 1's occupancy in the home.</p> <p>There is a preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: On 11/15/2024, I spoke with licensee Alan Perkins via phone. Licensee Perkins stated that Member of Household 1 was not a resident at the facility. Member of Household 1 lived at Perkins AFC Home for about three weeks.

On 12/18/2024, I conducted an exit conference with licensee Alan Perkins. Licensee Perkins stated that Member of Household 1 did get a TB test completed, but Licensee Perkins did not obtain the written evidence of the TB test results. I informed Licensee Perkins of the findings and conclusion.

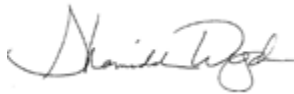
APPLICABLE RULE	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained

	before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.
ANALYSIS:	On 12/18/2024, I spoke with licensee Alan Perkins who stated that Member of Household 1 did complete a TB test, but Licensee Perkins did not obtain written evidence of the TB test results. There is a preponderance of evidence to substantiate a rule violation.
CONCLUSION:	VIOLATION ESTABLISHED

On 12/18/2024, I conducted an exit conference with licensee Alan Perkins. I informed him of the findings and conclusions.

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, I recommend continuation of the AFC small group home license (capacity 1-6).




12/18/2024

Shamidah Wyden
Licensing Consultant

Date

Approved By:



12/20/2024

Mary E. Holton
Area Manager

Date