



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 12, 2025

Thomas Hart
Independent Living Solutions, LLC
2786 Cecelia Street
Saginaw, MI 48602

RE: License #: AS730285023
Investigation #: 2025A0580032
Saginaw Valley AFC

Dear Thomas Hart:

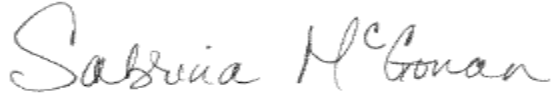
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 that reads "Sabrina McGowan". The ink is dark and the signature is fluid.

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS730285023
Investigation #:	2025A0580032
Complaint Receipt Date:	04/30/2025
Investigation Initiation Date:	05/02/2025
Report Due Date:	06/29/2025
Licensee Name:	Independent Living Solutions, LLC
Licensee Address:	2786 Cecelia Street Saginaw, MI 48602
Licensee Telephone #:	(989) 752-6142
Administrator:	Thomas Hart
Licensee Designee:	Thomas Hart
Name of Facility:	Saginaw Valley AFC
Facility Address:	2786 Cecelia Saginaw, MI 48602
Facility Telephone #:	(989) 752-6143
Original Issuance Date:	01/31/2007
License Status:	REGULAR
Effective Date:	08/26/2023
Expiration Date:	08/25/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Resident A's pants were observed as dirty and smelled of urine. There was dried up feces on the inside of his jacket. Extra clothing that had been provided for him to change into had dried feces on it.	Yes

III. METHODOLOGY

04/30/2025	Special Investigation Intake 2025A0580032
04/30/2025	APS Referral Opened for investigation.
05/02/2025	Special Investigation Initiated - Telephone Call to Jessire Ramos, APS.
05/08/2025	Contact - Face to Face Attempted face to face with Resident A.
05/12/2025	Contact - Telephone call received Call from Witness 1.
05/15/2025	Contact - Face to Face Interview with Witness 2.
05/15/2025	Contact - Face to Face Interview with Witness 3.
05/15/2025	Contact - Face to Face Face to face observation with Resident A.
05/15/2025	Inspection Completed On-site Unannounced onsite. Interview with staff, Lacrosha Burt and Johnathan Oehring.
06/06/2025	Contact - Telephone call made Call to Home Manager, Chelene Scott.
06/09/2025	Contact - Telephone call made Call to SCCMH Case Manager for Resident A.

06/11/2025	Contact - Telephone call made Call to Public Guardian A.
06/12/2025	Exit Conference Exit conference with Licensee Designee, Tom Hart.

ALLEGATION:

Resident A's pants were observed as dirty and smelled of urine. There was dried up feces on the inside of his jacket. Extra clothing that had been provided for him to change into had dried feces on it.

INVESTIGATION:

On 04/30/2025, I received a complaint via LARA-BCHS-Complaints. This complaint was opened by Adult Protective Services (APS) for investigation.

On 05/02/2025, I spoke with Jessire Ramos, assigned APS Investigator in Saginaw County. Investigator Ramos stated that she substantiated against the home for neglect. The complaint alleged that Resident A's hygiene has been poor, including his clothes being caked in feces. Investigator Ramos did not observe any feces on Resident A at the time of her in-person visit. During the onsite inspection of Resident A's room at Saginaw Valley AFC, the room reeked of feces. Staff reported that Resident A has a habit of defecating, then hiding his underwear, and/or smears the feces. Staff also report that Resident A wears underwear, not briefs. As a resolve, Investigator Ramos spoke with Public Guardian A, who agreed that Resident A should be switched to briefs. Resident A's PCP has since been able to prescribe briefs for Resident A. The prescription ensures payment for the briefs through Medicaid.

On 05/08/2025, I conducted an onsite at Community Ties North (CTN) Day Program located in Saginaw County. Resident A did not attend program on this day.

On 05/12/2025, I received a phone call from Witness 1. Witness 1 stated that Resident A has been observed with dried feces on both his jacket and his pants while at day program. Stained clothes that were sent home with Resident A to be cleaned were returned, without having been washed.

On 05/15/2025, I conducted an onsite at CTN Day Program located in Saginaw County. While onsite I interviewed Witness 2. Witness 2 stated that on 03/06/2025, Resident A had diarrhea. Upon changing his clothes Resident A was observed with hard caked on bowel movement, stuck to his bottom. On 04/04/2025, Resident A had an accident and his soiled clothes were sent home. On 04/10/2025, Resident A was observed with filthy jogging pants, full of dirt and old urine as well as a sweater jacket with dry feces on it. Upon pulling out his spare clothes, it was discovered that the spare clothes were the

same soiled clothes that were sent home with Resident A for cleaning on 04/04/2025. Resident A continues to wear underwear, not briefs.

On 05/15/2025, while onsite at CTN Day Program, I interviewed Witness 3. Witness 3 stated that she can attest to the fact that Resident A was observed with feces on both Resident A's clothing and Resident A's jacket, adding that you could smell it and that it has occurred several times.

On 05/15/2025, I observed Resident A while at CTN Day Program. Resident A was observed sleeping while in a lounge chair at day program. Resident A awakened briefly, acknowledging that his name was being called and then went back to sleep. Resident A was observed as being adequately dressed and groomed. No hygiene concerns were noted. Resident A is currently wearing a brief. Extra clothing sent with Resident A was observed as clean, consisting of a pair of clean pants and a new shirt.

On 05/15/2025, I conducted an unannounced onsite at Saginaw Valley AFC. Contact was made with direct staff members, Johnathn Oehring and Lucretia Burt. Staff Oehring and Staff Burt denied the allegations stating that Resident A does not require toileting assistance, however, they do ensure that he does a good job cleaning himself. Resident A wears briefs regularly. Resident A does require assistance with showering. Staff Oehring added that Home Manager (HM) Chelene Scott ensures that he is adequately dressed before heading out to program.

On 05/15/2025, while onsite I observed Resident A's bedroom. The room was clean. No feces smell was noted. Resident A's roommate was observed sleeping on top of his covers while on his bed. The resident was adequately dressed and groomed. His bed was made. No concerns regarding his care or cleanliness were noted. Two other residents were observed while sitting in their shared bedroom, watching TV. The residents were appropriately dressed and groomed. No immediate concerns regarding their care were noted.

On 06/02/2025, I received a copy of the AFC Assessment Plan for Resident A. The plan for Resident A, signed and dated by the HM, Chelene Scott, Licensee Designee Tom Hart and Saginaw County Community Mental Health (SCCMH) assigned case manager for Resident A, Shermica Chandler on 01/29/2025. The plan was signed by Public Guardian A on 05/14/2025. The plan indicates that Resident A does not require assistance with toileting; however, he does have incontinent briefs and pads. Resident A may need assistance with bathing, grooming and personal hygiene. Resident A requires assistance with mobility and has the use of both a walker and wheelchair as needed.

On 06/06/2025, I interviewed Chelene Scott, Home Manager (HM) at Saginaw Valley AFC. HM Scott denied the allegations. HM Scott stated that she and other staff in the home ensure that Resident A is adequately cleaned and groomed. HM Scott stated that she dresses Resident A herself prior to his leaving the home for program. HM Scott stated that Resident A is sent out with extra briefs and clothing. HM Scott stated that

Resident A does not require assistance with toileting, however, at times needs assistance with wiping himself.

On 06/09/2025, I placed a call to Shermica Chandler, Case Manager at SCCMH. A voice mail message was left requesting a return call.

On 06/11/2025, I interviewed Public Guardian A. Public Guardian A stated that it is his understanding that Resident A does not require assistance with toileting, however, due to Resident A's lower mentality, staff are to check Resident A after Resident A uses the bathroom to ensure that Resident A has wiped/cleaned himself appropriately. Public Guardian A also spoke with APS Investigator Ramos, who closed her APS case by ensuring that the staff at the home are more attentive to Resident A's hygiene, ensuring Resident A leaves the home in a presentable fashion.

On 06/12/2025, I spoke with Licensee Designee (LD), Tom Hart. LD Hart stated that staff will ensure that they are doing a better job making sure Resident A is clean and presentable when out in the public.

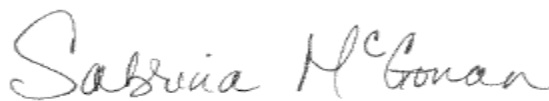
APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	<p>It was alleged that Resident A's pants were observed as dirty and smelled of urine. There was dried up feces on the inside of his jacket. Extra clothing that had been provided for him to change into had dried feces on it.</p> <p>Home Manager Chelene Scott and staff members Johanthan Oehring and Lacresha Burt denied the allegations. Witnesses 1, 2 and 3 stated that Resident A has been observed with dried feces on both his clothing and his jacket. Resident A was also observed with hard caked on bowel movement, stuck to Resident A's bottom.</p> <p>Resident A's assessment plan indicates that Resident A does not require assistance with toileting; however, Resident A does have incontinent briefs and pads. Resident A may need assistance with bathing, grooming and personal hygiene.</p> <p>APS Investigator Ramos did not observe any feces on Resident A at the time of her in-person visit, however, during the onsite inspection of Resident A's room at Saginaw Valley AFC, the</p>

	<p>room reeked of feces. Investigator Ramos substantiated against the home for neglect.</p> <p>Public Guardian A. Public Guardian A stated that it is his understanding that Resident A does not require assistance with toileting. Due to Resident A's lower mentality, staff are to check Resident A after he uses the bathroom to ensure that he has wiped/cleaned himself appropriately.</p> <p>Based upon my investigation, which consisted of interviews with multiple facility staff members, Witnesses 1, 2, and 3, APS Investigator Jessire Ramos, Public Guardian A, Licensee Designee Tom Hart, as well as a review of relevant facility documents pertinent to the allegation, there is enough evidence to substantiate the allegation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On 06/12/2025, I conducted an exit conference with LD, Tom Hart. LD Hart was informed of the findings of this investigation.

IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no change to the status of the license is recommended.

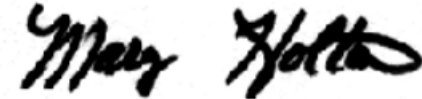


Sabrina McGowan
Licensing Consultant

June 12, 2025

Date

Approved By:



Mary E. Holton
Area Manager

June 12, 2025

Date