



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 21, 2025

Amitkumar Kalasariya
Caring Professionals BH, LLC
240 Applewood Ln.
Bloomfield Township, MI 48302

RE: License #: AS630418050
Investigation #: 2025A0991020
Caring Professionals AFC Group Home

Dear Amitkumar Kalasariya:

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 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 (248) 972-9136.

Sincerely,

A handwritten signature in dark ink, reading "Kristen Donnay". The signature is written in a cursive, flowing style. The first name "Kristen" is written in a slightly larger, more prominent script than the last name "Donnay". The signature is positioned below the word "Sincerely,".

Kristen Donnay, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd. Ste 9-100
Detroit, MI 48202
(248) 296-2783

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630418050
Investigation #:	2025A0991020
Complaint Receipt Date:	06/25/2025
Investigation Initiation Date:	06/26/2025
Report Due Date:	08/24/2025
Licensee Name:	Caring Professionals BH, LLC
Licensee Address:	240 Applewood Ln. Bloomfield Township, MI 48302
Licensee Telephone #:	(586) 224-9909
Licensee Designee:	Amitkumar Kalasariya
Name of Facility:	Caring Professionals AFC Group Home
Facility Address:	240 Applewood Ln. Bloomfield Township, MI 48302
Facility Telephone #:	(586) 224-9909
Original Issuance Date:	05/28/2024
License Status:	REGULAR
Effective Date:	11/28/2024
Expiration Date:	11/27/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Caring Professionals AFC Group Home has severe sanitation issues, including sewage backup, yellow water, and an ant infestation affecting residents, which the owner has failed to address.	Yes
Additional Findings	Yes

III. METHODOLOGY

06/25/2025	Special Investigation Intake 2025A0991020
06/25/2025	APS Referral Received from Adult Protective Services (APS) - denied for investigation
06/26/2025	Special Investigation Initiated - On Site Unannounced onsite inspection
06/26/2025	Inspection Completed On-site Unannounced onsite inspection- interviewed staff, Precious Dunn; attempted to interview residents
06/30/2025	Contact - Telephone call made To licensee designee, Amitkumar Kalasariya
06/30/2025	Contact - Document Received Invoices from plumbing company
06/30/2025	Contact - Document Received Text from staff - re: moldy food in the home
06/30/2025	Contact - Telephone call made To staff, Precious Dunn
06/30/2025	Contact - Document Sent Requested additional documentation from licensee designee
07/03/2025	Contact - Document Received Staff schedules, menus, grocery receipts, and ant bait receipts

07/16/2025	Contact - Telephone call made Left message for Resident B's guardian
07/16/2025	Contact - Telephone call made Left message for Resident C's guardian
08/21/2025	Exit Conference Via telephone with licensee designee, Amitkumar Kalasariya

ALLEGATION:

Caring Professionals AFC Group Home has severe sanitation issues, including sewage backup, yellow water, and an ant infestation affecting residents, which the owner has failed to address.

INVESTIGATION:

On 06/25/25, I received a complaint from Adult Protective Services (APS) alleging that there are deplorable living conditions at Caring Professionals AFC Group Home. The complaint alleged that the toilet in the home was broken for several weeks, and there was a sewage backup in the home from the toilet. The running water in the home is yellow. The complaint also stated that there was an ant infestation, and residents had ants crawling on their bodies. The homeowner failed to address the ongoing concerns. The complaint was not assigned for investigation by APS.

I initiated my investigation on 06/26/25, by conducting an unannounced onsite inspection. I interviewed direct care worker, Precious Dunn. Ms. Dunn stated that she has worked in the home since January 2025. She stated that there was recently an issue with sewage backing up in the home. It was coming up from the drain in the shower area in the main bathroom, as well as from a drain in the laundry room. She stated that it first happened when she was on shift on or around 06/18/25. Someone came out the following day and plunged it, but then it backed up again that same day. She stated that a plumber came out again on 06/20/25. It has not backed up since then. Ms. Dunn stated that there are three residents in the home. Resident A has a bathroom in her room, which was not affected by the backup. Resident A was still able to use the toilet and shower. Resident B and Resident C wear briefs and receive bed baths, so they were not impacted by the plumbing issues. Ms. Dunn stated that nothing was coming up from the toilet, and the toilet would still flush. The sewage was only coming up from the shower drain. Ms. Dunn stated that when they were experiencing issues with the plumbing on 06/19/25, the water in the laundry room was running yellow. It was only yellow on that day, and she has not observed any yellow water since that time.

Ms. Dunn shared pictures that she took when the backup occurred. The pictures are dated 06/18/25 at 2:45pm. The pictures show a brownish black sludge covering the laundry room floor and surrounding the drain area in the shower. Ms. Dunn shared an additional picture dated 06/19/25 at 11:50am, which shows the laundry room floor covered in a thick layer of brownish black sludge.

During the onsite inspection, I observed that the toilet in the main bathroom and the toilet in the bathroom connected to Resident A's bedroom both flushed properly. I also observed that both showers appeared to be draining properly. I did not observe any sewage coming up from the drains. I observed that the shower located in the bathroom connected to Resident A's bedroom was dirty and the grout was stained with mold/mildew. Ms. Dunn stated that she cleaned the sewage from the laundry room and bathroom; however, I observed there were still some stains from the sludge near the baseboards in the laundry room and at the threshold by the laundry room door. There were also dryer sheets and other debris behind the washer and dryer. During the onsite inspection, I observed that the water in the kitchen, bathrooms, and laundry room was clear and was not yellow in color.

With regards to ants in the home, Ms. Dunn stated that there was an ant infestation in January or February. She stated that she saw ants in the home, primarily in the kitchen area. She never saw any ants on the residents or in their beds. She stated that she believed the owner had a pest control company come out, as there were ant traps around the home. During the onsite inspection, I did not observe any ants or insects in the home, including in the kitchen area or resident bedrooms.

During the onsite inspection, I attempted to interview Resident A. Resident A has limited English language skills and had difficulty understanding and answering questions. She stated "no" when asked if she saw ants or bugs in the home. She stated "no" when asked if there was ever a bad smell in the home. She stated "yes" the home is clean and "no" it is never dirty. During the onsite inspection, I observed Resident B and Resident C in their beds. They were not alert and were unable to participate in the interview process.

On 06/30/25, I interviewed the licensee designee, Amitkumar Kalasariya, via telephone. Mr. Kalasariya stated that there was no issue with the plumbing. The problem was that a caregiver was putting wipes down the toilet. He stated that a plumber came out and fixed the issue. I requested documentation from Mr. Kalasariya regarding the plumber's visits to the home.

I received and reviewed an invoice from G & C Sewer Service dated 05/30/25 for \$250 for camera sewer services. It notes, "camera sewer for inspection drain in good shape." I received and reviewed a second invoice from G & C Sewer Service dated 06/23/25 for

\$275. The invoice notes, "Roof vent- cable roof vent to clear blockage of wipes and heavy sludge. Laundry line- cable laundry line to clear blockage of buildup."

When asked for clarification regarding the dates of the invoices, as the backup occurred on 06/18/25 and 06/19/25, the owner replied, "Upon experiencing issues, Rick tried to quick fix these issues in two instances, but could not clear complete blockage. So Rick scheduled a technician for repair immediately. Our regular technician could not come in till 06/23/2025, Invoice showing 06/23/2025 repair was completed. Meanwhile, both areas have been cleaned and sanitized and were put out of service till 06/23/25. Please note that this has not interrupted house operations, care, safety and security for our residents."

With regards to ants in the home, the owner stated that as soon as staff noticed ant activity, ant baits were placed in multiple places inside and outside of the home. Insect spray was also spread inside and outside the home, as another layer of protection. No issues have been reported since that time. A receipt from Amazon was provided showing that eight Raid Max Ant Bait Stations and twelve Terro T300B Liquid Ant Killer Bait Stations were purchased on 01/31/25.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that the home did have an ant infestation. Ants were observed in the home in January 2025. The owner purchased ant bait stations on 01/31/25 and sprayed the inside and outside of the home for ants, which resolved the issue. I did not observe any ants or insects in the home during my onsite inspection.
CONCLUSION:	VIOLATION ESTABLISHED (BUT CORRECTED)

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that the home was not maintained to provide for the health, safety, and well-being of the residents. On 06/18/25 and 06/19/25, sewage backed up from the drains in the shower and laundry room and black sludge covered the floor and drain area. During my onsite inspection on 06/26/25, I observed there were still some stains from the sludge near the baseboards in the laundry room and at the threshold by the laundry room door. There were also dryer sheets and other debris behind the washer and dryer. I also observed that the shower located in the bathroom connected to Resident A's bedroom was dirty and the grout was stained with mold/mildew.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that the plumbing was not in good working condition when sewage backed up into the shower and laundry room on 06/18/25 and 06/19/25. There was black sludge covering the floor of the laundry room and surrounding the shower drain in the main bathroom. The plumbing issues were addressed on 06/23/25 when G & C Sewer Service came to the home and cleared a blockage of wipes and heavy sludge from the line in the bathroom and cleared the laundry line of a blockage of buildup. There have not been any plumbing issues since that time.
CONCLUSION:	VIOLATION ESTABLISHED (BUT CORRECTED)

ADDITIONAL FINDINGS:

INVESTIGATION:

During the onsite inspection on 06/26/25, I observed Resident A in the home. Resident A is 38 years old. Direct care worker, Precious Dunn, stated that Resident A moved into

the home because she is diagnosed with schizophrenia. I reviewed Resident A's discharge paperwork from an inpatient psychiatric stay at Corewell Health dated 05/06/25. It notes that Resident A is diagnosed with schizoaffective disorder. I reviewed the facility information in the Bureau Information Tracking System (BITS) as well as the facility's original licensing study report and program statement. The home is approved for aged, Alzheimer's, and physically handicapped populations only. There is no documentation showing that they are approved to accept residents with a mental illness.

APPLICABLE RULE	
R 400.14103	Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.
	(5) An applicant or licensee shall give written notice to the department of any changes in information that was previously submitted in or with an application for a license, including any changes in the household and in personnel-related information, within 5 business days after the change occurs.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that the licensee did not contact the department to change the population served by the facility prior to admitting Resident A who has a mental illness. The facility is approved for aged, Alzheimer's, and physically handicapped populations, and is not approved for residents with a mental illness.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions: (c) The resident appears to be compatible with other residents and members of the household.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that Resident A is not compatible with the population served by the home. Resident A is 38 years old and was admitted to the facility due to having a

	mental illness. The facility is approved for aged, Alzheimer's, and physically handicapped populations only.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 06/27/25, I received a text message from direct care worker, Precious Dunn. The message included pictures of a bag of mini cucumbers and a bag of tomatoes that were rotten and moldy. The pictures were dated 06/27/25 at 5:32pm. On 07/01/25, I interviewed Ms. Dunn via telephone. She stated that the bags of vegetables had not been opened. She threw them out and they were not served to the residents. She stated that the residents do receive fresh fruits and vegetables, as well as canned vegetables. There is always food in the home, and the residents do not miss any meals. She stated that at times, the home does not have the ingredients to serve what is on the menu. Staff make substitutions and write it on the menu.

I received and reviewed copies of the home's menus as well as grocery receipts from Walmart delivery orders dated 06/15/25, 06/22/25, and 06/30/25. The receipts show fresh fruit, eggs, meat, soups, and other grocery items were ordered and delivered to the home. A copy of the home's food and supplies procedures was also received and reviewed. It notes that staff are to label and date everything to help with rotation and spoilage prevention. Staff are instructed to deep clean the refrigerator, freezer, pantry, drawers, and storage areas weekly. They are also supposed to check for expired or spoiled items weekly, and toss any expired or spoiled items. I reviewed a copy of the staff schedule, which shows Precious Dunn was working on 06/27/25 from 8:00am-8:00pm at the time the photographs of the moldy vegetables were taken.

APPLICABLE RULE	
R 400.14402	Food service.
	(1) All food shall be from sources that are approved or considered satisfactory by the department and shall be safe for human consumption, clean, wholesome and free from spoilage, adulteration, and misbranding.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that food in the home was not free from spoilage. Staff did not follow the home's procedures to check and toss any spoiled items from the refrigerator. On 06/27/25, there were bags of vegetables in the refrigerator, which were rotten and moldy.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

During the onsite inspection on 06/26/25, I observed cardboard boxes, a mop bucket, and cleaning supplies being stored in the furnace room, directly next to the furnace and hot water heater.

On 08/21/25, I conducted an exit conference via telephone with the licensee designee, Amitkumar Kalasariya. Mr. Kalasariya stated that several of the violations have already been corrected. He did not have any additional information to share and agreed to submit a corrective action plan.

APPLICABLE RULE	
R 400.14511	Flame-producing equipment; enclosures.
	(4) Combustible materials shall not be stored in rooms that contain heating equipment, a water heater, an incinerator, or other flame-producing equipment.
ANALYSIS:	During the onsite inspection on 06/26/25, combustible materials were being stored in a room that contained heating equipment. I observed cardboard boxes, a mop bucket, and cleaning supplies being stored in the furnace room, directly next to the furnace and hot water heater.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, I recommend no change to the status of the license.

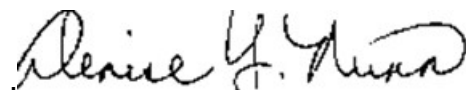


08/21/2025

Kristen Donnay
Licensing Consultant

Date

Approved By:



08/21/2025

Denise Y. Nunn
Area Manager

Date