



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 23, 2026

Achal Patel  
Divine Nest of Perry 1 Inc  
2045 Birch Bluff Dr  
Okemos, MI 48864

RE: License #: AL780418811  
Investigation #: 2026A0577026  
Divine Nest of Perry 1

Dear Mr. Patel:

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 (517) 335-5985.

Sincerely,

*Bridget Vermeesch*

Bridget Vermeesch, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL780418811
<b>Investigation #:</b>	2026A0577026
<b>Complaint Receipt Date:</b>	03/02/2026
<b>Investigation Initiation Date:</b>	03/02/2026
<b>Report Due Date:</b>	05/01/2026
<b>Licensee Name:</b>	Divine Nest of Perry 1 Inc
<b>Licensee Address:</b>	2045 Birch Bluff Dr Okemos, MI 48864
<b>Licensee Telephone #:</b>	(517) 625-5650
<b>Administrator:</b>	Cheri Lynn Weaver
<b>Licensee Designee:</b>	Achal Patel
<b>Name of Facility:</b>	Divine Nest of Perry 1
<b>Facility Address:</b>	521 E. First St, Bldg 1 Perry, MI 48872
<b>Facility Telephone #:</b>	(517) 625-5650
<b>Original Issuance Date:</b>	01/27/2025
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	07/27/2025
<b>Expiration Date:</b>	07/26/2027
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS



**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Licensee is not using the Michigan Workforce Background Check account assigned to this facility to complete direct care staff fingerprints.	Yes

**III. METHODOLOGY**

03/02/2026	Special Investigation Intake, 2026A0577026
03/02/2026	APS Referral- No abuse or neglect in allegations.
03/02/2026	Special Investigation Initiated – Telephone call made to Dawn Timm, Area Manager.
03/03/2026	Contact - Document Received- Via email from Kerri Wheeler, DHR with Divine Living regarding delays.
03/03/2026	Contact - Document Received- Via email from MWBC unit updating status of accounts of facilities.
03/03/2026	Contact - Document Received- Via email, Kerri Wheeler, DHR, updating status of accounts.
03/04/2026	Contact - Document Received- Via email, Kerri Wheeler, DHR, log in issues have been resolved in MWBC.
03/10/2026	Inspection Completed On-site
03/11/2026	Contact-Document Received- Via email, Kerri Wheeler, DHR, MWBC audit schedule.
03/17/2026	Exit Conference with licensee designee Achel Patel and administrator Cheri Weaver.
03/17/2026	Inspection Completed-BCAL Sub. Compliance

**ALLEGATION: Licensee is not using the Michigan Workforce Background Check account assigned to this facility to complete direct care staff fingerprints.**

**INVESTIGATION:**

On March 02, 2026, a complaint was filed due to the licensee not using the Michigan Workforce Background Check System-Long Term Care (MWBC) account assigned to the facility to complete direct care staff fingerprints.

On March 02, 2026, an audit of the MWBC was completed and I found there were zero active applicants fingerprinted since the MWBC account was activated on February 03, 2025.

Prior to this complaint, on January 26, 2026, Bridget Vermeesch, Adult Foster Care (AFC) Licensing Consultant emailed licensee designee Achel Patel that there were no active applications for this license despite the license being issued on January 27, 2025, meaning there was no documentation that any direct care staff member had been fingerprinted prior to employment at the facility or that the direct care staff member's fingerprint result had been associated with the facility as required. Mr. Patel was directed to rectify this issue by January 31, 2026. Before this direction, Mr. Patel was also given email guidance on January 23, 2026, by AFC Licensing Consultant Julie Elkins. Ms. Elkins notified Mr. Patel that even though the facility direct care staff members are in the MWBC under Divine Life Management LLC, described by Mr. Patel as a staffing agency, it is required to associate all direct care staff members' fingerprint results with the facility/facilities in which they work. Ms. Elkins explained that each facility has an independent MWBC login that must be activated and the fingerprint results for each direct care staff member is required to be associated with the specific licenses in which they work. Ms. Elkins advised Mr. Patel to update the MWBC accounts within the next week.

On February 27, 2026, Dawn Timm, AFC Area Manager, sent an email to licensee designee Achel Patel as a follow up to a previous discussion about the requirement to update all AFC licenses within the MWBC system by February 28, 2026. In the previous discussion, Mr. Achel requested and was provided with approval to have until the end of February 28, 2026, to remedy each WFBC account for each of the licensee's licensed AFCs. This extension was granted with the understanding that all direct care staff working at the licensed AFCs owned by Mr. Achel's corporations would be fingerprinted by this date or the current fingerprint results associated with the necessary facility/facilities. Currently, there has been little progress made and most of Mr. Achel's AFC licenses continue to have zero direct care staff fingerprint results in each account. Consequently, per guidance from the AFC Division Director, special investigations were initiated to address this issue.

On March 03, 2026, Kerri Wheeler, Director of Human Resources (DHR) for Divine Nest of Perry 1, provided clarification via email regarding the delays to associate direct care

staff fingerprints with the facility, explaining a faxed request for login information for the licenses was sent on January 30, 2026, to the WFBC Unit but only received login information for a few licenses. Ms. Wheeler reported for the licenses in which the login information was received, the direct care staff members' fingerprint results have been associated with the facility. Ms. Wheeler reported "additionally, when attempting to use the "forgot password" option, the system indicates that the email associated with the primary user account is unknown." Ms. Wheeler reported trying to update the accounts by adding Cheri Weaver and Achal Patel's email addresses; however Ms. Wheeler stated the system reported an error and would not allow the email addresses to be added. Ms. Wheeler reported, per the WFBC PowerPoint guidance, that when the primary user account information is unknown, access must be requested in writing by the administrator on company letterhead and faxed to Michigan Workforce Background Check (MWBC) unit. Ms. Wheeler stated this has been completed twice, along with also sending an additional follow-up fax requesting the login credentials. Upon review of the request sent to the MWBC unit, I determined that incorrect license names were listed on the forms along licensee designee Achel Patel's name not being used on the form as required.

On March 03, 2026, the MWBC unit reported that log in information was sent for all active licenses for which Mr. Achel did not have access. The MWBC unit reported the log in information was sent to Mr. Achel's email as he is the licensee designee.

On March 03, 2026, Kerri Wheeler confirmed that all login information has been received. Ms. Wheeler later reported issues with setting up the accounts and a phone number for the MWBC unit was provided to assist with this issue.

On March 04, 2026, Kerri Wheeler emailed that all issues have been resolved and all account have been successfully activated. Ms. Wheeler reported they are actively working to associate direct care staff with the appropriate facilities.

On March 10, 2026, Adult Foster Care Licensing Consultants, Julie Elkins, Jana Lipps, and I completed an unannounced onsite investigation at the corporate office of Divine Life Assisted Living Centers and interviewed Kerri Wheeler who reported MWBC website has been updated with the correct active employees being associated to each facility except for one. Ms. Wheeler reported that facility will be completed by the end of the day (March 10, 2026). Ms. Wheeler provided us with copies of the active employees for each of individual licensed facilities to complete an audit.

On March 11, 2026, Kerri Wheeler provided Julie Elkins, Jana Lipps, and me with a copy of an audit schedule she developed for the MWBC and all Divine Life Living Centers licensed AFC facilities. The document provided a schedule of quarterly audits of the MWBC that will be completed by Kerri Wheeler.

On March 17, 2026, I completed an audit of the MWBC comparing the list of active employees on the MWBC website with the list of employees provided by Ms. Wheeler

on March 10, 2026, to find the facility currently has 26 active employees and all fingerprint results were documented in the WFBC account.

<b>APPLICABLE RULE</b>	
<b>MCL 400.734b</b>	<b>Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.</b>
	<b>(3) An individual who applies for employment either as an employee or as an independent contractor with an adult foster care facility or staffing agency and who has not been the subject of a criminal history check conducted in compliance with this section shall give written consent at the time of application for the department of state police to conduct a criminal history check under this section, along with identification acceptable to the department of state police. If the individual has been the subject of a criminal history check conducted in compliance with this section, the individual shall give written consent at the time of application for the adult foster care facility or staffing agency to obtain the criminal history record information as prescribed in subsection (4) or (5) from the relevant licensing or regulatory department and for the department of state police to conduct a criminal history check under this section if the requirements of subsection (11) are not met and a request to the Federal Bureau of Investigation to make a determination of the existence of any national criminal history pertaining to the individual is necessary, along with identification acceptable to the department of state police. Upon receipt of the written consent to obtain the criminal history record information and identification required under this subsection, the adult foster care facility or staffing agency that has made a good-faith offer of employment or an independent contract to the individual shall request the criminal history record information from the relevant licensing or regulatory department and shall make a request regarding that individual to the relevant licensing or regulatory department to conduct a check of all relevant registries in the manner required in subsection (4). If the requirements of subsection (11) are not met and a request to the Federal Bureau of Investigation to make a</b>

	<p><b>subsequent determination of the existence of any national criminal history pertaining to the individual is necessary, the adult foster care facility or staffing agency shall proceed in the manner required in subsection (5). A staffing agency that employs an individual who regularly has direct access to or provides direct services to residents under an independent contract with an adult foster care facility shall submit information regarding the criminal history check conducted by the staffing agency to the adult foster care facility that has made a good-faith offer of independent contract to that applicant.</b></p>
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<p><b>ANALYSIS:</b></p>	<p>Based upon interviews conducted, documentation reviewed, and audits conducted of the Michigan Workforce Background Check system it can be concluded that the licensee designee was not in compliance with the MWBC requirements to have all direct care staff fingerprinted through the corresponding facility's MWBC account by 2/28/26. Ms. Timm, Ms. Elkins, and Ms. Vermeesch each had communication with Mr. Patel in the month of January 2026 highlighting the significance of correcting the presenting problem of having zero direct care staff cleared through the facility account after it has been identified that these direct care staff had been cleared through a MWBC account for private duty agencies. On 2/2/26 I provided Ms. Weaver the username of the facility MWBC account. Mr. Patel requested a deadline of 2/28/26 to come into compliance with the requirement to clear the direct care staff members to the corresponding facility accounts. On 2/27/26 an audit was conducted by Ms. Timm to check the status, and it was determined that the facility still had zero direct care staff cleared through the facility MWBC account. On 2/27/26 Ms. Timm reported to Mr. Patel that special investigations would be initiated on all facilities that currently had zero direct care staff cleared through the associated MWBC account. On 3/2/26 Ms. Wheeler provided documentation that on 1/30/26 Ms. Weaver had faxed communication to Michigan Workforce Background Check noting there were issues with accessing the assigned facility accounts. These communications did not list the associated license numbers, and provided names for the facilities that do not match the facility names currently assigned to each facility. At the time of the on-site investigation on 3/10/26, the list of direct care staff members provided matched the names of direct care staff members that had been cleared through the MWBC system for the facility. However, this took multiple efforts, audits, and communications to Mr. Patel, Ms. Weaver, and Ms. Wheeler, to finally achieve compliance with the requirement. Therefore, a violation has been established.</p>
<p><b>CONCLUSION:</b></p>	<p><b>VIOLATION ESTABLISHED</b></p>

**IV. RECOMMENDATION**

Upon the receipt of an approved corrective action plan, I recommend continuation of the current status of the license of this AFC adult large group home, capacity 20.

*Bridget Vermeesch*

03/18/2026

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Bridget Vermeesch  
Licensing Consultant

Date

Approved By:

*Dawn Timm*

03/23/2026

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Dawn N. Timm  
Area Manager

Date