



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 19, 2020

Hope Lovell  
LoveJoy Special Needs Center Corporation  
17141 New Jersey Street  
Southfield, MI 48075

RE: License #: AS330297845  
**Michigan Ave. Residential Care**  
**1204 W. Michigan Ave.**  
**Lansing, MI 48915**

Dear Ms Lovell:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report.

***To verify your implementation and compliance with this corrective action plan, please send a video to my phone of the basement door with self-closing device by 2/28/2020.***

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license and special certification is renewed. It is valid only at your present address and is nontransferable.

Please contact me with any questions. If I am not available, and you need to speak to someone immediately, you may contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Derrick L. Britton".

Derrick Britton, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street P.O. Box 30664  
Lansing, MI 48909  
(517) 284-9721

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

**I. IDENTIFYING INFORMATION**

**License #:** AS330297845

**Licensee Name:** LoveJoy Special Needs Center Corporation

**Licensee Address:** 17141 New Jersey Street  
Southfield, MI 48075

**Licensee Telephone #:** (517) 574-4693

**Licensee/Licensee Designee:** Hope Lovell

**Administrator:** Tammie Trimmer

**Name of Facility:** Michigan Ave. Residential Care

**Facility Address:** 1204 W. Michigan Ave.  
Lansing, MI 48915

**Facility Telephone #:** (517) 367-8172

**Original Issuance Date:** 12/11/2009

**Capacity:** 5

**Program Type:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL

**Certified Programs:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL

## II. METHODS OF INSPECTION

Date of On-site Inspection: 02/06/2020

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

Date of Health Authority Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 3  
No. of residents interviewed and/or observed 3  
No. of others interviewed [redacted] Role: [redacted]

- 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.  
Residents went out for meal.
- 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:  
12/03/18 - 305(3), 301(4), 403(1) , 5/1/19 - 312(2) 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 400.14511**      **Flame-producing equipment; enclosures.**

**(1) If the heating plant is located in the basement of a small group home, standard building material may be used for the floor separation. Floor separation shall also include at least 1 3/4-inch solid core wood door or equivalent to create a floor separation between the basement and the first floor.**

The basement door does not have a 1 3/4 inch solid core door that is self-closing.

### IV. RECOMMENDATION

I recommend issuance of a 2-year regular adult foster care license.



02/19/2020

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Derrick Britton  
Licensing Consultant

Date