

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 26, 2022

Jawad Shah Insight Healing Center (dba Jawad A Shah MD PC) Ste 1875 4800 S. Saginaw St. Flint, MI 48507

RE: License #: AS250407929

Insight Healing Center II

700 S Adelaide Fenton, MI 48430

Dear Mr. Shah, MD:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. in writing of the Department's intention and your options for resolution of this matter.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (906) 226-4171.

Sincerely,

Sabrina McGowan, Licensing Consultant Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(810) 835-1019

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

I. IDENTIFYING INFORMATION

License #: AS250407929

Licensee Name: Insight Healing Center (dba Jawad A Shah

MD PC)

Licensee Address: Ste 1875

4800 S. Saginaw St. Flint, MI 48507

Licensee Telephone #: (810) 893-6049

Licensee/Licensee Designee: Jawad Shah

Administrator: Ali Madha

Name of Facility: Insight Healing Center II

Facility Address: 700 S Adelaide

Fenton, MI 48430

Facility Telephone #: (810) 732-8336

Original Issuance Date: 07/29/2021

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

AGED

TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date	ate of On-site Inspection(s):		01/18/2022	
Date of Bureau of Fire Services Inspection if applicable: N/A				
Date of Health Authority Inspection if applicable: N/A				
Insp	ection Type:	☐ Interview and Ob☐ Combination	servatior	n ⊠ Worksheet □ Full Fire Safety
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 1 Role: Administrator				
•	Medication pass / simu	ulated pass observed?	P Yes ⊠	No ☐ If no, explain.
•	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain			
•	Resident funds and associated documents reviewed for at least one resident? Yes \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \square No \boxtimes If no, explain. No meal being prepared during time of inspection Fire drills reviewed? Yes \boxtimes No \square If no, explain.			
•	Fire safety equipment and practices observed? Yes \boxtimes No \square 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. No IR's to review			
•	Corrective action plan N/A ⊠	compliance verified?	Yes 🗌	CAP date/s and rule/s:
•	Number of excluded e	mployees followed-up	?	N/A ⊠
•	Variances? Yes ☐ (p	lease explain) No 🗌	N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

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.

Resident rooms observed during the inspection were disheveled and cluttered. Rooms were not maintained to provide adequately for the health, safety, and well-being of occupants.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Sabruia McGonan January 26, 2022

Sabrina McGowan Licensing Consultant Date