

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 9, 2022

Venson Williams Williams Community Living Inc 2662 W Grand Blvd Detroit, MI 48208

> RE: License #: AL820007539 Williams Community Living 2662 W Grand Boulevard Detroit, MI 48208

Dear Ms. Williams:

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:

• You are to submit documentation of compliance.

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

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 (313) 456-0380.

Sincerely, Aorla Daniel

Shatonla Daniel, Licensing Consultant Bureau of Community and Health Systems Cadillac PI. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 919-3003

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

I. IDENTIFYING INFORMATION

License #:	AL820007539
Licensee Name:	Williams Community Living Inc
Licensee Address:	2662 W Grand Blvd Detroit, MI 48208
Licensee Telephone #:	(313) 871-7542
Licensee/Licensee Designee:	Venson Williams
Administrator:	Venson Williams
Name of Facility:	Williams Community Living
Facility Address:	2662 W Grand Boulevard Detroit, MI 48208
Facility Telephone #:	(313) 871-7542
Original Issuance Date:	08/06/1991
Capacity:	16
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

	Date of On-site Inspection(s): 05/06/2022	
	Date of Bureau of Fire Services Inspection if applicable: 12/28/2021	
	Date of Health Authority Inspection if applicable:	
	Inspection Type:	
No. of staff interviewed and/or observed1No. of residents interviewed and/or observed0No. of others interviewed1Role:Licensee Designee		
	 Medication pass / simulated pass observed? Yes No If no, explain. Full worksheet inspection 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 I If no, explain. Meal preparation / service observed? Yes No No I If no, explain. No residents in the facility at the time of inspection Fire drills reviewed? Yes No I 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: 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 400.15203 Licensee and administrator training requirements.

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

At the time of inspection, Licensee Designee/ Administrator failed to participate in, and successfully complete, 16 hours of training and/or completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department on an annual basis.

A corrective action plan was requested and approved on 05/06/2022. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Shatonla Daniel

05/09/2022

Shatonla Daniel Licensing Consultant Date