



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 27, 2023

Jzsa-Jaza Gibson  
Pharaoh's Rest Haven, LLC  
1102 S. West Avenue  
Jackson, MI 49203

RE: License #: AS380412065  
**Pharaoh's Rest Haven I**  
**114 W. Biddle Street**  
**Jackson, MI 49203**

Dear Ms. Gibson:

This letter is a follow-up to the Department's findings regarding the interim inspection conducted at your facility on 02/21/2023. The purpose of this inspection was to determine compliance with applicable licensing statutes and administrative rules for an Adult Foster Care small group home.

The violations that were found are:

**R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

- Resident A previously resided at a different home (AS380406021), which is also operated by the licensee. Resident A relocated from that home (AS380406021) to Pharaoh's Rest Haven I (AS380412065).

While the assessment plan had been completed for the previous home/placement, it was not updated at the time of admission once he relocated to the second home.

**R 400.14315 Handling of resident funds and valuables.**

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

- The Resident Funds Part II forms for Resident A were inaccurate and incomplete.

**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.

- The dryer was equipped with a foil duct instead of a flexible metal duct.

**R 400.14408 Bedrooms generally.**

(3) Bedrooms for residents shall be separated from halls, corridors, and other rooms by floor-to-ceiling walls that do not have openings, except for doorways.

- There was a large gap between the door and frame for Bedroom F.

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.

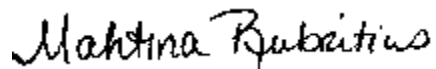
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

A follow-up inspection may be made to verify compliance. Should the corrections not be made in the specified time, it may be necessary to reevaluate the status of your license.

The Department provides technical assistance to meet the licensing requirements and consultation to improve services.

Please 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 (313) 456-0380.

Sincerely,



Mahtina Rubritius, Licensing Consultant  
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Enclosures