



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

October 5, 2023

Gladys Sledge  
Packard Group Inc  
PO Box 2066  
Southfield, MI 48037

RE: License #: AS630367512  
**Woodward Group Home**  
**2563 Lahser Road**  
**Bloomfield Hills, MI 48304**

Dear Gladys Sledge:

Attached is the Renewal Licensing Study Report for the facility referenced above. The study has determined substantial violations of applicable licensing statutes and administrative rules. Therefore, refusal to renew the license is recommended. You will be notified 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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Frodet Dawisha".

Frodet Dawisha, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place, Ste 9-100  
3026 W. Grand Blvd.  
Detroit, MI 48202  
(248) 303-6348

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630367512
<b>Licensee Name:</b>	Packard Group Inc
<b>Licensee Address:</b>	Suite 303 731 Pallister Street Detroit, MI 48202
<b>Licensee Telephone #:</b>	(248) 626-3837
<b>Administrator/Licensee Designee:</b>	Gladys Sledge
<b>Name of Facility:</b>	Woodward Group Home
<b>Facility Address:</b>	2563 Lahser Road Bloomfield Hills, MI 48304
<b>Facility Telephone #:</b>	(248) 335-0946
<b>Original Issuance Date:</b>	07/16/2015
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/26/2023

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

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 1

No. of others interviewed 1 Role: Regional Manager

- 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.  
Did not occur during inspection
- 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:  
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:

<b>R 400.14312</b>	<b>Resident medications.</b>
	(2) Medication shall be given, taken, or applied pursuant to label instructions.

During the on-site inspection on 09/26/2023, I reviewed Resident A's and Resident E's medications and medication logs and found the following errors:

- Resident A's **Levothyroxine 25MCG Tab**: take one tablet by mouth in the morning on empty stomach was not given on 09/18/2023, 09/21/2023, 09/22/2023, 09/24/2023, 09/25/2023, and 09/26/2023.
- Resident E's **Methylphenidate 10MG Tab**: take ½ tablet by mouth after breakfast and ½ tablet in the afternoon was not given on 09/23/2023.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (b) Complete an individual medication log that contains all of the following information: (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

During the on-site inspection on 09/26/2023, I reviewed Resident A's and Resident E's medications and medication logs and found the following errors:

- Resident A's **Levothyroxine 25MCG Tab**: take one tablet by mouth in the morning on empty stomach was not given on 09/18/2023, 09/21/2023, 09/22/2023, 09/24/2023, 09/25/2023, and 09/26/2023, but staff initialed the medication log stating that this medication was administered.
- Resident E's **Risperidone 0.25MG Tab**: take one tablet by mouth twice daily at 12 noon and at 4PM was sent with Resident E's mother at 12 noon, but staff did not initial the medication log.
- Resident E's **Methylphenidate 10MG Tab**: take ½ tablet by mouth after breakfast and ½ tablet in the afternoon was not given on 09/23/2023 but staff initialed the medication log.

**REPEAT VIOLATION ESTABLISHED: SIR# 2023A0605003; CAP 12/22/2022 and SIR #2023A0605035; CAP 09/21/2023.**

<b>R 400.14402</b>	<b>Food service.</b>
	(6) Household and cooking appliances shall be properly installed according to the manufacturer's recommended safety practices. Where metal hoods or canopies are provided, they shall be equipped with filters. The filters shall be maintained in an efficient condition and kept clean at all times. All food preparation surfaces and areas shall be kept clean and in good repair.

During the on-site inspection on 09/26/2023, the oven hood and the oven filter were not in good condition. There was rust on the outside and inside of the oven hood.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the on-site inspection on 09/26/2023, there were a significant amount of fruit flies in the kitchen. The Regional Manager Dana Pikula stated that the fruit flies were due to the dishwasher drain not working properly.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

During the on-site inspection on 09/26/2023, the floor in the basement was crumbling and not in good repair. The regional manager Dana Pikula stated it was due to a bathroom leak upstairs that was repaired last year, but that Community Housing Network did not complete the basement floor repair.

<b>R 400.14505</b>	<b>Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions and changes of category.</b>
	(4) Detectors shall be tested, examined, and maintained as recommended by the manufacturer.

During the on-site inspection on 09/26/2023, the fire alarm was not working properly as it was not sounding off. Instead, there was a soft beeping noise.

**IV. RECOMMENDATION**

Refusal to renew the license is recommended.

*Frodet Dawisha* 09/27/2023

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Frodet Dawisha Date  
Licensing Consultant

Approved by:

*Denise Y. Nunn* 10/05/2023

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Denise Y. Nunn Date  
Area Manager