



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

August 15, 2023

Seth Gyamfi  
Marys Residential Care for Seniors Inc  
Suite 215  
31500 W. 13 Mile Rd.  
Farmington Hills, MI 48334

RE: License #: AL500007236  
**Marys Senior Center**  
**35225 Silvano**  
**Clinton Twp, MI 48035**

Dear Seth Gyamfi:

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 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.

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 "L. Reed".

LaShonda Reed, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place, Ste 9-100  
Detroit, MI 48202  
(586) 676-2877

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

**I. IDENTIFYING INFORMATION**

**License #:** AL500007236

**Licensee Name:** Marys Residential Care for Seniors Inc

**Licensee Address:** 35225 Silvano  
Clinton Twp, MI 48035

**Licensee Telephone #:** (248) 844-1407

**Licensee/Licensee Designee:** Seth Gyamfi

**Administrator:** Bureau of Community and Health Systems  
Cadillac Place, Ste 9-100  
Detroit, MI 48202  
(586) 676-2877

**Name of Facility:** Marys Senior Center

**Facility Address:** 35225 Silvano  
Clinton Twp, MI 48035

**Facility Telephone #:** (586) 790-0640

**Original Issuance Date:** 03/09/1979

**Capacity:** 20

**Program Type:** PHYSICALLY HANDICAPPED  
DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
ALZHEIMERS  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/14/2023

Date of Bureau of Fire Services Inspection if applicable: 10/05/2022

Date of Health Authority Inspection if applicable: 08/14/2023

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 7

No. of others interviewed 1 Role: Manager

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
I observed medications.
- 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.
- 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:  
CAP date 10/07/2021; R 400.15205(3); R 400.15312(2); R 400.15313(5); R  
400.15401(4); R 400.15402(3); R 400.15403(5) 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 400.15204            Direct care staff; qualifications and training.**

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:  
(b) First aid.

Direct care staff Andrea Rumbley's first aid certificate expired on 08/09/2023.

**R 400.15204            Direct care staff; qualifications and training.**

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:  
(c) Cardiopulmonary resuscitation.

Direct care staff Andrea Rumbley's cardiopulmonary resuscitation certificate expired on 08/09/2023.

**R 400.15205            Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

Direct care staff Lisa Hill, Amanda Rumbley and Shalanda Bolden did not have a physician statement within 30-days of hire in their employee record.

REPEAT VIOLATION ESTABLISHED. LSR 09/23/2021, CAP 10/07/2021.

**R 400.15205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

Direct care staff Lisa Hill, Amanda Rumbley and Shalanda Bolden did not have an annual review of their health status in their employee record.

**R 400.15312 Resident medications.**

(4)(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.

I observed the following medications did not have initials at the time of administration.

Resident F's Lorazepam 0.5mg dose at 4PM were not initialed on 08/04/2023 and 08/07/2023. The 7PM dosage was not initialed on 08/01/2023, 08/05/2023 and 08/08/2023.

Resident J's Colace 100 mg medication was not initialed at 8AM on 08/13/2023. Resident J's Pregabalin 50mg medication was not initiated at 7AM on 08/09/2023-08/13/2023. The 3PM dose was not initialed on 08/07/2023, 08/12/2023 and 08/13/2023. The 11PM dosage was not initialed on 08/07/2023.

**R 400.15315 Handling of resident funds and valuables.**

(12) Charges against the resident's account shall not exceed the agreed price for the services rendered and goods furnished or made available by the home to the resident.

Resident E's most recent *Resident Care Agreement* basic fee was \$175 less than was I observed Resident E's *Resident Funds II* transactions for the basic fee.

**R 400.15403          Maintenance of premises.**

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

I observed that the inside of the oven was not clean.

REPEAT VIOLATION ESTABLISHED. LSR 09/23/2021, CAP 10/07/2021.

**IV. RECOMMENDATION**

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



08/15/2023

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LaShonda Reed  
Licensing Consultant

Date