



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

September 7, 2023

Michelle Rupert  
Everest Inc.  
PO Box 2352  
Riverview, MI 48193

RE: License #: AS580084058  
**Roberts**  
**2707 Roberts**  
**Monroe, MI 48162**

Dear Ms. Rupert:

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.

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,

A handwritten signature in blue ink that reads "Pandrea Robinson". The signature is written in a cursive, flowing style.

Pandrea Robinson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 319-9682

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS580084058
<b>Licensee Name:</b>	Everest Inc.
<b>Licensee Address:</b>	PO Box 2352 Riverview, MI 48193
<b>Licensee Telephone #:</b>	(734) 675-3037
<b>Licensee/Licensee Designee:</b>	Michelle Rupert
<b>Administrator:</b>	Michelle Rupert
<b>Name of Facility:</b>	Roberts
<b>Facility Address:</b>	2707 Roberts Monroe, MI 48162
<b>Facility Telephone #:</b>	(734) 675-3037
<b>Original Issuance Date:</b>	11/20/1998
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/06/2023

Date of Bureau of Fire Services Inspection if applicable:

Date of Environmental/Health Inspection if applicable: 09/06/2023

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 6

No. of others interviewed [redacted] Role: [redacted]

- 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.  
Residents had eaten prior to 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 determined to be in substantial compliance with rules and requirements.

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

**R 400.14403            Maintenance of premises.**

**(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.**

At the time of inspection, I observed the following;

- The ceilings and walls throughout the home had areas of cracking. There were walls in the bathrooms and bedrooms that had been patched, but not sanded and re-painted. There were walls and ceilings that had peeling paint that need repairing.
- The carpet in the activity and sensory room is badly soiled, stained and not in good repair.
- The carpeting in the living room is worn and has areas that have come away from the transition strips, rolled up and is causing a possible trip hazard.
- The linoleum flooring in the kitchen is worn, has areas that have holes and is not in good repair.
- The 1<sup>st</sup> east bathroom has plastic stripping that is coming away from the wall area and is not in good repair.

### IV. RECOMMENDATION

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



Pandrea Robinson  
Licensing Consultant

09/07/23  
Date