



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 22, 2023

Lavinia Bercea  
Joyful Living Home Care  
23045 Canfield Ave.  
Farmington Hills, MI 48336

RE: License #: AS630412417  
**Joyful Living Home Care**  
**23045 Canfield Ave.**  
**Farmington Hills, MI 48336**

Dear Mrs. Bercea:

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.
- You are to submit a Statement of Correction.

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 (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  
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>	AS630412417
<b>Licensee Name:</b>	Joyful Living Home Care
<b>Licensee Address:</b>	23045 Canfield Ave. Farmington Hills, MI 48336
<b>Licensee Telephone #:</b>	(313) 409-9233
<b>Administrator/Licensee Designee:</b>	Lavinia Bercea
<b>Name of Facility:</b>	Joyful Living Home Care
<b>Facility Address:</b>	23045 Canfield Ave. Farmington Hills, MI 48336
<b>Facility Telephone #:</b>	(313) 409-9233
<b>Original Issuance Date:</b>	01/11/2023
<b>Capacity:</b>	4
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/21/2023

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 3

No. of others interviewed 1 Role: Licensee Designee

- 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.
- 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>
	(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: (e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.

During the on-site inspection on 06/20/2021, I reviewed Resident A's medications and medication logs and found the following error:

- **Lantus Solos Inj 100/M:** Inject 20 units daily was modified to as needed from 06/08/2023-06/21/2023 without instructions from a physician or a pharmacist who has knowledge of the medical needs of Resident A.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(12) Sidewalks, fire escape routes, and entrances shall be kept reasonably free of hazards, such as ice, snow, and debris.

During the on-site inspection on 06/21/2023, the driveway was not paved and free from hazards and debris as there were large pieces of gravel throughout the driveway.

A corrective action plan was requested and approved on 06/21/2023. 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.	
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#### IV. RECOMMENDATION

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



06/22/2023

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Frodet Dawisha  
Licensing Consultant

Date