



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 19, 2024

Andrew Akunne  
Joak American Homes, Inc.  
Unit A  
3879 Packard Road  
Ann Arbor, MI 48108

RE: License #: AS820064382  
**Mary Street Home**  
**35630 Mary**  
**Romulus, MI 48174**

Dear Mr. Akunne:

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, appearing to read "Edith Richardson".

Edith Richardson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 919-1934

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

**I. IDENTIFYING INFORMATION**

**License #:** AS820064382

**Licensee Name:** Joak American Homes, Inc.

**Licensee Address:** Unit A  
3879 Packard Road  
Ann Arbor, MI 48108

**Licensee Telephone #:** (734) 973-7764

**Licensee/Licensee Designee:** Andrew Akunne, Designee

**Administrator:**

**Name of Facility:** Mary Street Home

**Facility Address:** 35630 Mary  
Romulus, MI 48174

**Facility Telephone #:** (734) 729-1270

**Original Issuance Date:** 03/06/1995

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s):03/15/2024

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 1  
No. of residents interviewed and/or observed 3  
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.
- 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.  
N/A
- 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:

**R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

Subsequent testing is not being verified every 3 years.

Direct care staff (DCS) Emeka Franklin last TB test was done in 2018, his current TB test was done 03/16/2024.

DCS Angela Asi's TB test was also not verified every 3 years.

**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's assessment plan was not signed by the guardian.

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement.

Resident A's resident care agreement was not signed by the guardian.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the

resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Resident A's health care appraisal was not completed annually. Resident A did not have a physical in 2022 and 2023. Resident A's 2024 health care appraisal was not on the required form.

**R 400.14401 Environmental health.**

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

The mechanical fan in the bathroom was not working.

**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.

Bedroom #1 reeked of a foul odor.

Water damage in bedroom #3. A wall was warped, and the carpet was stained.

Worn flooring in the television room.

**R 400.14406 Room temperature.**

All resident-occupied rooms of a home shall be heated at a temperature range between 68- and 72-degrees Fahrenheit during non-sleeping hours. Precautions shall be taken to prevent prolonged resident exposure to stale, noncirculating air that is at a temperature of 90 degrees Fahrenheit or above. Variations from the requirements of this rule shall be based upon a resident's health care appraisal and shall be addressed in the resident's written assessment plan. The resident care

agreement shall address the resident's preferences for variations from the temperatures and requirements specified in this rule.

Bedroom # 3 was very cold.

**R 400.14410 Bedroom furnishings.**

(1) The bedroom furnishings in each bedroom shall include all of the following:

(2) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.

The mirror in bedroom # 2 was not available for resident use.

**R 400.14503 Interior finishes and materials generally.**

(1) Interior finish materials shall be at least class C materials throughout the adult foster care small group home.

Paneling was observed outside the furnace enclosure. There is wallpaper in the furnace enclosure.

**R 400.14511 Flame-producing equipment; enclosures.**

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire-resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware.

There is a hole in the wall behind the washing machine.

**R 400.14511 Flame-producing equipment; enclosures.**

(3) A permanent outside vent that cannot be closed shall be incorporated in the design of heating plant rooms so that adequate air for proper combustion is assured.

The furnace enclosure does not have a permanent outside vent. **REPEATED VIOLATION**

TECHNICAL ASSISTANCE: The combustion air must be directly from the outside through noncombustible ductwork with a permanently opened

vent and ducted to approximately 12" off the floor. If the heat plant room contains an outside wall, adequate combustion air may be provided through a louvered permanent opening or a permanently opened window. Combustion air openings must be at least equal to the combined diameter of all exhaust vent openings for the flame-producing equipment in the enclosure, or at least one (1) square inch of opening for each 4,000 BTU's produced, or as specified by the manufacturer.

#### **IV. RECOMMENDATION**

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



Edith Richardson  
Licensing Consultant

03/20/2024

Date