



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 1, 2024

Huma Shahid
Golden Grace LLC
6449 Rutledge Park Dr.
West Bloomfield, MI 48322

RE: License #: AS630417897
Golden Grace, LLC
6449 Rutledge Park Dr.
West Bloomfield, MI 48322

Dear Huma Shahid:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan (CAP) 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 dark ink, reading "Frodet Dawisha". The signature is written in a cursive, flowing style.

Frodet Dawisha, Licensing Consultant
Bureau of Community and Health Systems
3026 W. Grand Blvd.
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

License #:	AS630417897
Licensee Name:	Golden Grace LLC
Licensee Address:	3840 Manchester Ct. Bloomfield Hills, MI 48302
Licensee Telephone #:	(248) 431-8588
Administrator/Licensee Designee:	Huma Shahid
Name of Facility:	Golden Grace, LLC
Facility Address:	6449 Rutledge Park Dr. West Bloomfield, MI 48322
Facility Telephone #:	(248) 431-8588
Original Issuance Date:	02/06/2024
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/31/2024

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 1

No. of residents interviewed and/or observed 3

No. of others interviewed 1 Role: Licensee

- 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:

R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.

During the on-site inspection on 07/31/2024, I reviewed the 2024 fire drills. The fire drill completed on 07/01/2024 had an evacuation time of 10 minutes which is impractical. Therefore, Residents A, B, and C protection and safety would not be attended to at all times during an emergency.

R 400.14408	Bedrooms generally.
	(7) Bedrooms shall have at least 1 easily openable window.

During the on-site inspection on 07/31/2024, the sliding door in bedroom #4 that served as an openable window was sealed shut with a piece of wood.

Note: On 07/31/2024, after the inspection was completed, I received a video showing that the piece of wood was removed, and the sliding door was easily openable. CAP compliance was achieved.

R 400.14507	Means of egress generally.
	(1) A means of egress shall be considered the entire way and method of passage to free and safe ground outside a small group home.

During the on-site inspection on 07/31/2024, the gate in the backyard used as a second means of egress was not opening properly to create a method of passage to free and safe ground outside.

Note: On 07/31/2024, after the inspection was completed, I received a video showing that the gate was repaired, making the method of passage to free and safe ground outside. CAP compliance was achieved.

A corrective action plan was requested and approved on 07/31/2024. 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.

IV. RECOMMENDATION

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



08/01/2024

Frodet Dawisha
Licensing Consultant

Date