



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

August 14, 2024

Carlos Eubanks  
Dual Insight Npc  
93 Adelaide  
Detroit, MI 48202

RE: License #: AL820007537  
**Eubanks Community Living**  
**93 Adelaide**  
**Detroit, MI 48202**

Dear Mr. Eubanks:

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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

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 cursive script that reads "Shatonla Daniel".

Shatonla Daniel, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 919-3003

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL820007537
<b>Licensee Name:</b>	Dual Insight Npc
<b>Licensee Address:</b>	93 Adelaide Detroit, MI 48202
<b>Licensee Telephone #:</b>	(313) 833-9141
<b>Licensee/Licensee Designee:</b>	Carlos Eubanks
<b>Administrator:</b>	Carlos Eubanks
<b>Name of Facility:</b>	Eubanks Community Living
<b>Facility Address:</b>	93 Adelaide Detroit, MI 48202
<b>Facility Telephone #:</b>	(313) 833-9141
<b>Original Issuance Date:</b>	02/20/1981
<b>Capacity:</b>	17
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s):

07/12/2024, 08/12/2024

Date of Bureau of Fire Services Inspection if applicable: 10/27/2023, 11/13/2023

Date of Environmental/Health Inspection if applicable:

No. of staff interviewed and/or observed

No. of residents interviewed and/or observed

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:  
315 (6) 301 (10) 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:

**MCL 400.734b      Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.**

(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

At the time of inspection, Staff- Curtis Simmons employee file reviewed did not contain a criminal background clearance.

**R 400.15203      Licensee and administrator training requirements**

(1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

At the time of inspection, licensee designee/administrator did not participate in, and successfully complete, 16 hours of training and/or completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

**3<sup>RD</sup> REPEAT VIOLATION DATED LSR 06/18/2019 AND CAP 07/11/2019; LSR 12/07/2021 AND CAP 01/11/2022**

**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.

At the time of inspection, Staff- Curtis Simmons employee file reviewed did not contain 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 which was obtained within 30 days of employment.

**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.**

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

At the time of inspection, Staff- Curtis Simmons employee file reviewed did not contain a current communicable tuberculosis testing.

**R 400.15208            Direct care staff and employee records.**

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:  
(e) Verification of experience, education, and training.

At the time of inspection, Staff- Curtis Simmons employee file reviewed did not contain a verification of education.

**3<sup>RD</sup> REPEAT VIOLATION DATED LSR 06/18/2019 AND CAP 07/11/2019; LSR 12/07/2021 AND CAP 01/11/2022**

**R 400.15208            Direct care staff and employee records.**

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:  
(i) Required verification of the receipt of personnel policies and job descriptions.

At the time of inspection, Staff- Curtis Simmons employee file reviewed did not contain a verification of the receipt of personnel policies and job descriptions.

**R 400.15210      Resident register.**

A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:

- (a) Date of admission.
- (b) Date of discharge.
- (c) Place and address to which the resident moved, if known.

At the time of inspection, licensee designee did not maintain a chronological register of residents admitted and discharged from the facility.

**R 400.15310      Resident health care.**

- (3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

At the time of inspection, Residents A- B record reviewed did not contain monthly weight records.

**3<sup>RD</sup> REPEAT VIOLATION DATED LSR 06/18/2019 AND CAP 07/11/2019; LSR 12/07/2021 AND CAP 01/11/2022**

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

- (10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.



At the time of inspection, Residents A- B Funds Part II forms reviewed showed licensee has been over charging them for the amount of cost of care. Specifically, Resident A has been charged \$1180 since May 2023. Resident A's resident care agreement dated 07/15/2023 indicates the cost of care is \$1200, despite Resident A only receiving supplemental security income. Resident B has been charged \$1180 since June 2024. Resident B's resident care agreement dated for 06/10/2024 indicates cost of care is \$1200, despite Resident A only receiving supplemental security income. The current allowance for provider monthly payments is \$1056. In addition, Residents A- B have not been given their monthly allowance of \$44 since the increase of cost of care by the licensee. Therefore, Resident A is owed \$1776 and Resident B is \$296.

**R 400.15318      Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

At the time of inspection, licensee did not practice and maintain a record of fire drills during evening hours for the first and second quarters in 2024; sleeping hours for third quarter and evening hours for fourth quarter in 2023.

**4th REPEAT VIOLATION DATED LSR 07/17/2017 AND CAP 08/17/2017; LSR 06/18/2019 AND CAP 07/11/2019; LSR 12/07/2021 AND CAP 01/11/2022**

**R 400.15403      Maintenance of premises.**

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

At the time of inspection, I observed the following:

- Exposed subfloor throughout the second floor
- Three resident rooms without resident beds
- Four resident rooms without dressers
- Four resident rooms without chairs and mirrors

**R 400.15403      Maintenance of premises.**

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

At the time of inspection, I observed dust, dirt, and grime on floors in pantry and around three refrigerators.

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



08/13/2024

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Shatonla Daniel  
Licensing Consultant

Date

Approved by:



08/14/2024

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Ardra Hunter  
Area Manager

Date