



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 16, 2024

Shelly Sibert
The Noble Home Inc
19620 Cherrylawn
Detroit, MI 48221

RE: License #: AL820068121
Noble Home II
327 E Grand Blvd
Detroit, MI 48207

Dear Ms. Sibert:

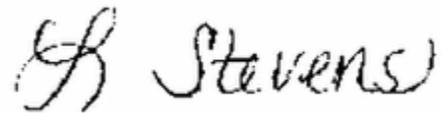
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 black ink that reads "LaKeitha Stevens". The first letter "L" is large and stylized, and the name "Stevens" is written in a cursive script.

LaKeitha Stevens, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3055

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

I. IDENTIFYING INFORMATION

License #: AL820068121

Licensee Name: The Noble Home Inc

Licensee Address: 19620 Cherrylawn
Detroit, MI 48221

Licensee Telephone #: (313) 477-0461

Licensee/Licensee Designee: Shelly Sibert

Administrator:

Name of Facility: Noble Home II

Facility Address: 327 E Grand Blvd
Detroit, MI 48207

Facility Telephone #: (313) 922-4164

Original Issuance Date: 03/01/1996

Capacity: 17

Program Type: MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/16/2024

Date of Bureau of Fire Services Inspection if applicable: 09/26/2024, 10/23/2024

Date of Environmental/Health Inspection if applicable:

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

No. of others interviewed N/A Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
A worksheet inspection was completed.
- 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.
A full worksheet inspection was completed.
- 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:
LSR Dated 12/17/2022, Rules; 803(6), 205(5), 205(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:

R 330.1803 Facility environment; fire safety.

- (6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 months from the date of the finding to do either of the following:**
- (a) Improve the score to at least the "slow" category.**

At the time of inspection Resident S.H. did not have a completed evacuation e-score within 30 days of admission.

{REPEAT VIOLATION SEE LSR DATED 12/17/2022}

R 400.15301 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.**

At the time of inspection Resident S.H. did not have a completed written assessment plan for the 2023 year.

R 400.15301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

- (9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and**

responsible agency, if applicable, at least annually or more often if necessary.

At the time of inspection Resident S.H. did not have a completed resident care agreement for the 2023 year

R 400.15310 Resident health care.

(2) A licensee shall maintain a copy of the annual health care appraisal on file for not less than 2 years.

At the time of inspection Resident S.H. did not have a updated health care appraisal. The last appraisal was dated July 15, 2023.

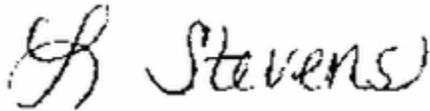
R 400.15315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

At the time of inspection Resident S.H. did not have Funds Part I in her resident file.

IV. RECOMMENDATION

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



12/16/2024

Date

Licensing Consultant