

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

July 8, 2025

Roland Higgs Family Living Center Inc. Suite 220 2350 Franklin Rd. Bloomfield Hills, MI 48302

RE: License #: AS630012322

Dawn Lane House 4112 Dawn Lane West Bloomfield, MI 48323

Dear Mr. Higgs:

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 (248) 972-9136.

Sincerely,

Sara Shaughnessy, Licensing Consultant Bureau of Community and Health Systems Cadillac Place 3026 W. Grand Blvd. Ste 9-100

3026 W. Grand Blvd. Ste 9 Detroit, MI 48202 (248) 320-3721

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

I. IDENTIFYING INFORMATION

License#: AS630012322

Licensee Name: Family Living Center Inc.

Licensee Address: Suite 220

2350 Franklin Rd.

Bloomfield Hills, MI 48302

Licensee Telephone #: (248) 334-5330

Licensee/Licensee Designee: Roland Higgs

Administrator: Roland Higgs

Name of Facility: Dawn Lane House

Facility Address: 4112 Dawn Lane

West Bloomfield, MI 48323

Facility Telephone #: (248) 626-0276

Original Issuance Date: 01/22/1981

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Dat	e of On-site Inspection(s):	07/01/20	025	
Dat	e of Bureau of Fire Services Inspection if app	licable:	NA	
Dat	e of Environmental/Health Inspection if applic	able:	NA	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role:		2 4	
•	Medication pass / simulated pass observed?	Yes ⊠	No ☐ If no, explain.	
•	Medication(s) and medication record(s) review	ewed? Yo	es 🛭 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. The onsite inspection did not take place during a mealtime, an adequate food supply was observed. Fire drills reviewed? Yes No If no, explain.			
•	Fire safety equipment and practices observe	d? Yes[⊠ No If no, explain.	
•	E-scores reviewed? (Special Certification Or If no, explain. Water temperatures checked? Yes ⊠ No [
•	Incident report follow-up? Yes \boxtimes No \square If	no, expla	in.	
•	Corrective action plan compliance verified? 07/06/2023; MCL 400.734b, R 330.1803, R 4 Number of excluded employees followed-up?	400.1 4 20		
•	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 400.14203	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.
There was no ve	erification that licensee designee, Roland Higgs, completed at least ing in 2024.
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.
	(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.
	erification of direct care staff member, Ramia Temple, having a d by a licensed physician or his designee attesting their knowledge ealth.
R 400.14208	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:
	(f) Verification of reference checks.

R 400.14507	Means of egress generally.
	(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.
	ans of egress on the first floor is a door wall, that is not equipped ching, non-locking-against-egress hardware.

IV. RECOMMENDATION

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

Sara Shaughnessy Date Licensing Consultant