



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 10, 2025

Josephine Uwazurike
Allied Continuing Care Inc
Suite 200
23999 Northwestern Hwy
Southfield, MI 48075

RE: License #: AS820257946
Hubbell Manor
6061 Hubbell
Dearborn Heights, MI 48127

Dear Ms. Uwazurike:

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) 456-0439.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Denasha Walker'.

Denasha Walker, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 300-9922

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

I. IDENTIFYING INFORMATION

License #:	AS820257946
Licensee Name:	Allied Continuing Care Inc
Licensee Address:	Suite 200 23999 Northwestern Hwy Southfield, MI 48075
Licensee Telephone #:	(248) 569-1040
Licensee/Licensee Designee:	Josephine Uwazurike
Administrator:	Josephine Uwazurike
Name of Facility:	Hubbell Manor
Facility Address:	6061 Hubbell Dearborn Heights, MI 48127
Facility Telephone #:	(248) 569-1040
Original Issuance Date:	04/20/2004
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/05/2025

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 0
No. of others interviewed Role: Area manager

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
A full 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.
Residents were in the community during the inspection. Meal preparation and services were not observed.
- 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 400.14315 Handling of resident funds and valuables.

(9) A resident's account shall be individual to the resident. A licensee shall be prohibited from having any ownership interest in a resident's account and shall verify such in a written statement to the resident or the resident's designated representative.

At the time of inspection, direct care staff Doyle Hood indicated that Residents A and B personal allowance is deposited to his debiting account, and he takes the residents shopping. The resident's accounts are not individual to the resident.

R 400.14318 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, the emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. The evacuation forms were not thoroughly completed and did not contain the time the drill was conducted or the evacuation time.

In 2023, the following fire drills were completed but the form did not include the time the drills were conducted:

- Day drill during the 3rd quarter.
- Sleep drill during the 3rd quarter.
- Evening drill during the 4th quarter.
- Sleep drill during the 4th quarter.

In 2024, the following fire drills were completed but the form did not include the time the drills were conducted:

- Evening drill during the 1st quarter.
- Day drill during the 2nd quarter.
- Day drill during the 4th quarter.
- Evening drill during the 4th quarter.

In 2025, the following fire drills were completed but the form did not include the time the drills were conducted:

- Evening drill during the 1st quarter.

R 400.14402 Food service.

(6) Household and cooking appliances shall be properly installed according to the manufacturer's recommended safety practices. Where metal hoods or canopies are provided, they shall be equipped with filters. The filters shall be maintained in an efficient condition and kept clean at all times. All food preparation surfaces and areas shall be kept clean and in good repair.

At the time of inspection, the filter over the stove was covered in grease residue and not kept clean.

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.

At the time of inspection, water was observed on the basement floor that was leaking from the wall.

R 400.14408 Bedrooms generally.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

At the time of inspection, the South resident bedroom door was not positive latching.

R 400.14410 Bedroom furnishings.

(1) The bedroom furnishings in each bedroom shall include all of the following:
(c) A bureau or dresser or equivalent.

At the time of inspection, the West Resident bedroom dresser did not contain all the drawers.

R 400.14411 Linens.

(2) A licensee shall provide at least 1 standard bed pillow that is comfortable, clean, and in good condition for each resident bed.

At the time of inspection, the West resident bedroom was not equipped with at least 1 standard bed pillow that is comfortable, clean, and in good condition.

IV. RECOMMENDATION

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



6/10/2025

Denasha Walker
Licensing Consultant

Date