



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 4, 2025

Callen Fillio
Progressive Lifestyles Inc
Suite 150
1370 North Oakland Blvd
Waterford, MI 48327

RE: License #: AS630012392
Potter Road House
2669 Potter Road
Wixom, MI 48393

Dear Callen Fillio:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan 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 and special certification 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) 972-9136.

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
Cadillac Place
3026 W. Grand Blvd., 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 #:	AS630012392
Licensee Name:	Progressive Lifestyles Inc
Licensee Address:	Suite 150 1370 North Oakland Blvd Waterford, MI 48327
Licensee Telephone #:	(248) 742-1378
Licensee/Licensee Designee:	Callen Fillio
Administrator:	Jennifer Bohne
Name of Facility:	Potter Road House
Facility Address:	2669 Potter Road Wixom, MI 48393
Facility Telephone #:	(248) 666-4136
Original Issuance Date:	05/21/1984
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL
Certified Programs:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/04/2025

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 0

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.
did not occur during inspection
 - 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 ☐
- 315 (3) Funds Part II Form- electronic

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

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.

During the on-site inspection on 08/04/2025, I reviewed the emergency and evacuation practice and procedures. The evening drill was missing in the fourth quarter of 2024 and the sleep drill was missing in the third quarter of 2024.

A corrective action plan was requested and approved on 08/04/2025. 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 at the specified time, it may be necessary to re-evaluate the status of your license and special certification.

IV. RECOMMENDATION

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



08/04/2025

Frodet Dawisha
Licensing Consultant

Date