



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 1, 2025

Lavinia Bercea  
Joyful Living Home Care  
23045 Canfield Ave.  
Farmington Hills, MI 48336

RE: License #: AS630412417  
**Joyful Living Home Care**  
**23045 Canfield Ave.**  
**Farmington Hills, MI 48336**

Dear Lavinia Bercea:

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 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  
3026 W. Grand Blvd.  
Cadillac Place, 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**

<b>License #:</b>	AS630412417
<b>Licensee Name:</b>	Joyful Living Home Care
<b>Licensee Address:</b>	23045 Canfield Ave. Farmington Hills, MI 48336
<b>Licensee Telephone #:</b>	(313) 409-9233
<b>Administrator/Licensee Designee:</b>	Lavinia Bercea
<b>Name of Facility:</b>	Joyful Living Home Care
<b>Facility Address:</b>	23045 Canfield Ave. Farmington Hills, MI 48336
<b>Facility Telephone #:</b>	(313) 409-9233
<b>Original Issuance Date:</b>	01/11/2023
<b>Capacity:</b>	4
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/01/2025

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 2

No. of residents interviewed and/or observed 3

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 ☒

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

<b>R 400.14305</b>	<b>Resident protection.</b>
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.

During the on-site inspection on 07/01/2025, I reviewed the emergency and evacuation procedures in 11/2023, 12/2023, 01/2024, 02/2024, 08/2024 and 11/2024. The evacuation times during these months were more than eight minutes; therefore, the safety and protection of the residents during an emergency would not be attended to safely.

<b>R 400.14310</b>	<b>Resident health care.</b>
	(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.

During the on-site inspection on 07/01/2025, Resident A's weight records were missing for 11/2024, 01/2025, 02/2025, and 04/2025.

<b>R 400.14312</b>	<b>Resident medications.</b>
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

During the on-site inspection on 07/01/2025, I reviewed Resident A's medications and found the following errors:

- **Ibuprofen 800MG Tab:** take one tablet by mouth three times per day as needed was administered seven times in April 2025, but the reason for this as needed medication was not recorded.

<b>R 400.14313</b>	<b>Resident nutrition.</b>
	(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.

During the on-site inspection on 07/01/2025, the menu was not posted nor written at least one week in advance. The last date on the menu was 06/28/2025.

<b>R 400.14318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	(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 07/01/2025, the emergency and evacuation practices were not completed during evening hours in the second quarter of 2024 and during sleep hours in the first quarter of 2025.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

During the on-site inspection on 07/01/2025, the wall in the piano room is damaged and in need of repair.

<b>R 400.14507</b>	<b>Means of egress generally.</b>
	(1) A means of egress shall be considered the entire way and method of passage to free and safe ground outside a small group home.

During the on-site inspection on 07/01/2025, the second egress through the backyard gate does not open to free and safe ground outside the home.

<b>R 400.14507</b>	<b>Means of egress generally.</b>
	(2) A means of egress shall be arranged and maintained to provide free and unobstructed egress from all parts of a small group home.

During the on-site inspection on 07/01/2025, the second egress through the backyard does not have pavers to ensure free and unobstructed egress from the home.

A corrective action plan was requested and approved on 07/01/2025. 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 reevaluate the status of your license.

#### IV. RECOMMENDATION

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



07/01/2025

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Frodet Dawisha  
Licensing Consultant

Date