



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 20, 2025

Immaculata Nwachukwu
Friman Homes Inc
42000 Koppernick Road, Suite A-7
Canton, MI 48187

RE: License #: AS820069046
Park Street Home
35638 Park
Wayne, MI 48184

Dear Immaculata Nwachukwu:

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:

- An on-site inspection will be conducted.

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 (313) 456-0439.

Sincerely,

A handwritten signature in cursive script that reads "Regina Buchanan".

Regina Buchanan, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3029

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

I. IDENTIFYING INFORMATION

License #: AS820069046

Licensee Name: Friman Homes Inc

Licensee Address: 8281 Barrington Drive
Ypsilanti, MI 48198

Licensee Telephone #: (734) 254-0092

Licensee/Licensee Designee: Immaculata Nwachukwu

Administrator: Immaculata Nwachukwu

Name of Facility: Park Street Home

Facility Address: 35638 Park
Wayne, MI 48184

Facility Telephone #: (734) 254-0092

Original Issuance Date: 12/28/1995

Capacity: 6

Program Type: MENTALLY ILL
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/17/2025

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 6

No. of others interviewed 0 Role: N/A

- 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.
Residents had eaten
- 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.
None
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
10/27/2025/Rules: 803(6),205(6), 301(4), 301(6), 310(3), 312(1), 312(4) 403(1)
N/A
- Number of excluded employees followed-up? 1 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 400.619 Emergency preparedness plan.

(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.

Fire drills for January 2024-March 2024 were not completed.

R 400.631 Health screenings.

(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.

Staff, Ofonde Gerald, physical health statement was not completed within 30 days of employment. Her start date was 09/29/2024 and her physical was completed 03/04/2025.

REPEAT VIOLATION {RENEWAL INSPECTION 10/27/2023 AND 11/18/2021}

R 400.645 Environmental health.

(3) A licensee shall provide hot and cold running water under pressure. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the fixture.

The hot water temperature was 125 degrees Fahrenheit.

REPEAT VIOLATION {RENEWAL INSPECTION 11/18/2021}

R 400.647 Safety and maintenance of premises.

(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

One of the upstairs bedrooms had a wooden board nailed to it.

R 400.685 Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.

Resident A did not have a health care appraisal on file for the year 2024.

R 400.685 Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(8) A resident care agreement must be signed by all applicable parties. A copy of the signed resident care agreement along with copies of the policies listed in subrule (6) of this rule must be provided to the resident or the resident's designated representative and maintained in the resident's record.

Resident A's resident care agreement for the years 2024 and 2025 were not signed by the guardian.

REPEAT VIOLATION {RENEWAL INSPECTION 10/27/2023 AND 11/18/2021}

R 400.691 Resident records.

**(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(g) Admission and monthly weight record.**

Resident A's 2024 weight records were not available for review and could not be located.

REPEAT VIOLATION {RENEWAL INSPECTION 10/27/2023}

R 400.725 Means of egress.

(3) Doors that form a part of a required means of egress must be equipped with positive-latching, non-locking-against-egress hardware and have a width to allow for residents requiring wheelchairs or other devices to easily navigate through doorways.

The front and rear egress doors were equipped with locking against egress hardware.

REPEAT VIOLATION {RENEWAL INSPECTION 10/27/2023}

IV. RECOMMENDATION

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



Regina Buchanan
Licensing Consultant

11/20/2025
Date