



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

December 16, 2025

Caroline Anyanetu  
Eliza Home Care  
10821 Continental Dr.  
Taylor, MI 48180

RE: License #: AS820367743  
**Frazier Home**  
**456 Frazier Street**  
**River Rouge, MI 48218**

Dear Mrs. Anyanetu:

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 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 (313) 456-0439.

Sincerely,

A handwritten signature in cursive script, appearing to read "D 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 #:** AS820367743

**Licensee Name:** Eliza Home Care

**Licensee Address:** 10821 Continental Dr.  
Taylor, MI 48180

**Licensee Telephone #:** (313) 204-3930

**Licensee/Licensee Designee:** Caroline Anyanetu

**Administrator:** Caroline Anyanetu

**Name of Facility:** Frazier Home

**Facility Address:** 456 Frazier Street  
River Rouge, MI 48218

**Facility Telephone #:** (313) 438-6302

**Original Issuance Date:** 06/30/2015

**Capacity:** 5

**Program Type:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/11/2025

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 4

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.
- 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 400.655 Bathrooms.**

**(3) Bathrooms must have doors with positive-latching, non-locking-against-egress hardware. Hooks, bolts, bars, and other similar devices are prohibited on bathroom doors.**

At the time of inspection, the resident bathroom door was not equipped with non-locking against egress hardware.

**R 400.727 Smoke detection equipment for family home and small group home with 6 or less residents after March 27, 1980.**

**(6) For new construction, conversions to an adult foster care facility, and changes of adult foster care licensing type, approved smoke alarms must be installed in accordance with the requirements contained in the national fire protection association entitled NFPA 101, Life Safety Code, 2021 edition, powered from the building's electrical system, and, when activated, initiate an alarm that is audible in all sleeping rooms with the doors closed. Smoke alarms must be installed on all levels, including basements, but excluding crawl spaces and unfinished attics. Additional smoke alarms must be installed in living rooms, dens, dayrooms, and similar spaces. NFPA 101, Life Safety Code, 2021 edition, is adopted by reference in R 400.715(4)(b).**

At the time of inspection, the smoke detection system was not powered from the building's electrical system, and, when activated, the alarm was not audible in all sleeping rooms with the doors closed.

A corrective action plan was requested and approved on 12/12/2025. 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 in 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.



12/16/2025

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Denasha Walker  
Licensing Consultant

Date