



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 19, 2026

Janette Thiel
Macomb Family Services Inc
124 West Gates
Romeo, MI 48065

RE: License #: AS500012027
Jewell Road
58093 Jewell Road
Washington, MI 48094

Dear Ms. Thiel:

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 (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 West Grand Blvd Ste 9-100
Detroit, MI 48202
(248) 285-1703

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

I. IDENTIFYING INFORMATION

License #:	AS500012027
Licensee Name:	Macomb Family Services Inc
Licensee Address:	124 West Gates Romeo, MI 48065
Licensee Telephone #:	(586) 246-1378
Licensee/Licensee Designee:	Janette Thiel
Administrator:	Janette Thiel
Name of Facility:	Jewell Road
Facility Address:	58093 Jewell Road Washington, MI 48094
Facility Telephone #:	(586) 246-1378
Original Issuance Date:	06/28/1993
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/18/2026

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 4

No. of others interviewed 1 Role: Licensee Designee

- Medication pass / simulated pass observed? Yes No If no, explain.
Reviewed medications with licensee.
- 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.
Inspection did not occur during a meal preparation.
- 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:
CAP date 03/13/2024- SC803(6), AS208(1), AS312(7), AS313(3), AS313(4),
AS313(6), AS401(2), AS403(1), AS403(5) 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 400.629	Direct care staff; qualifications and training.
	<p>(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:</p> <p>(b) First aid.</p> <p>(c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training.</p>
<p>Staff, Janet Williams, did not have verification of current First Aid/CPR training available at time of inspection.</p>	
R 400.631	Health screenings.
	<p>(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.</p>
<p>Staff, Janet Williams and Ricky Nowak, did not have medical statements available at time of inspection.</p>	
R 400.631	Health screenings.
	<p>(4) A licensee shall annually review and maintain in the facility the health status of the staff and members of the household. Verification of annual reviews must be maintained for 2 years.</p>

Staff, Janet Williams and Ricky Nowak, did not have verification of annual health reviews at time of inspection.	
R 400.637	Handling of resident funds and valuables.
	(4) A licensee shall record in the resident record a resident funds and itemized transactions including payment for services provided for each resident.
Resident A's funds record did not match the amount of cash he had available. Resident A's funds record indicated he had \$211.71 in cash available. Resident A had \$249.00 in cash on hand in the home.	
R 400.639	Staff records.
	(1) A licensee shall maintain a record for each staff that contains all of the following: (f) Verification of not less than 2 reference checks. If reference checks cannot be obtained, documentation verifying reference checks were attempted must be maintained.
Staff, Janet Wililams, did not have verification of reference checks in employee file.	
R 400.647	Safety and maintenance of premises.
	(14) Handrails and nonskid surfacing must be installed in showers and bath areas.
Bathroom #2 did not have nonskid strips or surfacing in shower.	
R 400.647	Safety and maintenance of premises.
	(15) Sidewalks, fire escape routes, and entrances must be kept reasonably free of hazards, such as ice, snow, and debris.
During the onsite inspection, I observed a large crack in concrete at back of home	
R 400.647	Safety and maintenance of premises.
	(4) Roofs, exterior walls, doors, skylights, and windows must be weathertight and watertight and maintained in good repair.

During the onsite inspection, I observed that the side door in hallway would not close completely once opened.	
R 400.665	Food service.
	(5) Refrigerators and freezers must be equipped with thermometers.
During the onsite inspection, I observed that the freezer in garage was not equipped with a thermometer.	
R 400.675	Resident medications.
	<p>(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:</p> <p>(b) Complete an individual medication log that contains all of the following:</p> <ul style="list-style-type: none"> (i) Medication name. (ii) Dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) Initials of the individual who administered the medication at the time given.
Resident B's Ammonium Lactate 2% PRN was not listed on February 2026 medication log.	
R 400.727	Smoke detection equipment for family home and small group home with 6 or less residents after March 27, 1980.
	(4) Detectors must be tested and examined as recommended by the manufacturer.
The home's fire system was inspected on 08/21/2025, however, alarms would not sound when tested during onsite inspection.	

IV. RECOMMENDATION

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



02/19/2026

Kristine Cilluffo
Licensing Consultant

Date