



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

January 27, 2026

Verillian Daugherty  
Belleville Quality Living, LLC  
43480 Revere Dr.  
Belleville, MI 48111

RE: License #: AS820418419  
**Belleville Quality Care Residence**  
**43480 Revere Dr.**  
**Belleville, MI 48111**

Dear Verillian Daugherty:

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. (CAP compliance will be determined at the next scheduled renewal inspection.

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 "Vanita Bouldin".

Vanita C. Bouldin, Licensing Consultant  
Bureau of Community and Health Systems  
22 Center Street  
Ypsilanti, MI 48198  
(734) 395-4037

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

**I. IDENTIFYING INFORMATION**

**License #:** AS820418419

**Licensee Name:** Belleville Quality Living, LLC

**Licensee Address:** 43480 Revere Dr.  
Belleville, MI 48111

**Licensee Telephone #:** (313) 585-0524

**Licensee/Licensee Designee:** Verillian Daugherty

**Administrator:** Verillian Daugherty

**Name of Facility:** Belleville Quality Care Residence

**Facility Address:** 43480 Revere Dr.  
Belleville, MI 48111

**Facility Telephone #:** (734) 345-8060

**Original Issuance Date:** 01/27/2025

**Capacity:** 5

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

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/22/2026

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 1  
No. of others interviewed [redacted] Role: [redacted]

- Medication pass / simulated pass observed? Yes  No  If no, explain. Paperwork renewal only.
- 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. Paperwork renewal only.
- 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: 08/05/2025, 400.713(3)(b) 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 400.675 Resident medications.**

**(1) Medication must be given, taken, or applied as prescribed, ordered, or directed by an appropriately licensed health care professional.**

Medication administration sheets document that medications not administered from 01/01/26 – 01/05/2026, per licensee designee Verillian Daugherty, Resident A ran out of medications/hospitalized – however no documentation found in the file to support explanation.

**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 completed at the time of his admission, 12/11/2025.

### IV. RECOMMENDATION

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



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Vanita C. Bouldin  
Licensing Consultant

Date: 01/27/2026