



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

February 24, 2026

Ayodele Ayanwale  
2231 Douglas Joel Drive  
Flint, MI 48505

RE: License #: AF250411113  
**Joyous Home AFC**  
**2231 Douglas Joel Drive**  
**Flint, MI 48505**

Dear Ayodele Ayanwale:

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 (517) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Christopher A. Holvey".

Christopher Holvey, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 899-5659

611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909  
[www.michigan.gov/lara](http://www.michigan.gov/lara) • 517-335-1980

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

**I. IDENTIFYING INFORMATION**

**License #:** AF250411113

**Licensee Name:** Ayodele Ayanwale

**Licensee Address:** 2231 Douglas Joel Drive  
Flint, MI 48505

**Licensee Telephone #:** (810) 341-2050

**Licensee/Licensee Designee:** N/A

**Administrator:** N/A

**Name of Facility:** Joyous Home AFC

**Facility Address:** 2231 Douglas Joel Drive  
Flint, MI 48505

**Facility Telephone #:** (810) 341-2050

**Original Issuance Date:** 09/12/2023

**Capacity:** 3

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

**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 Health Authority Inspection if applicable: 02/18/2026

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 1

No. of others interviewed 0 Role: [REDACTED]

- 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.  
Home was viewed to have an adequate supply of food.
- Fire drills reviewed? Yes  No  If no, explain.  
Licensee had no fire drill documentation to review.
- 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:  
12/13/24, 426 (1) 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 400.619                    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.**

Licensee claims that he has been practicing fire drills, but did not have documentation to confirm that fact. Licensee had no record of fire drills be completed.

**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 home's water was measured to be above the 120 degree maximum allowed.

**R 400.647                    Safety and maintenance of premises.**

**(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.**

The home was observed to have visible cobwebs and dirt/stains on walls of both the kitchen and bathroom.

**R 400.647                    Safety and maintenance of premises.**

**(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.**

The ceilings in the kitchen and hallway were observed to be cracking and/or peeling and are in need of repair.

**R 400.675                    Resident medications.**

**(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:**

**(b) Complete an individual medication log that contains all of the following:**

**(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.
- (vi) Resident's refusal to accept prescribed medication or procedures at time of refusal.

Licensee had multiple resident medications that he was administering to a resident that were not listed on the resident's Medication Administration Record (MAR).

**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.

Licensee did not have a health care appraisal available for review for a resident that has been in this home for over 1 year.

**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 home was observed to have doorknobs and locking devices on both doors, which are part of means of egress, that were not equipped with positive-latching, 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.**

(1) At least 1 single battery-operated smoke alarm must be installed in the following locations:

(b) On each occupied floor, in the basement, and in areas of the facility that contain flame- or heat-producing equipment.

Home did not have a smoke alarm installed in the basement where flame- or heat-producing equipment are located.

**R 400.731                      Flame-producing equipment; enclosures.**

(1) If the heating plant is in the basement, standard building material may be used for the floor separation. Floor separation must also include at least 1-3/4-inch solid core wood door or equivalent equipped with an automatic self-closing device to create a floor separation between the basement and the first floor.

The home was observed to not have an adequate fire door that was at least 1-3/4-inch solid core wood door or equivalent equipped with an automatic self-closing device. Floor separation from the basement was not present, as there open spaces located around the fire door.

**IV. RECOMMENDATION**

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



2/24/2026

---

Christopher Holvey  
Licensing Consultant

Date