GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 15, 2026

Irene Spatny
43090 Pointe Drive
Clinton Township, MI 48038

RE: License #: AF500313046
Family Home and Senior Living
43090 Pointe Drive
Clinton Township, MI 48038

Dear Ms. Spatny:

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 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,

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
3044 W Grand Boulevard
2nd Floor Annex, Suite 2-730
Detroit, MI 48202
(586) 676-2877

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

I. IDENTIFYING INFORMATION

License #:	AF500313046
Licensee Name:	Irene Spatny
Licensee Address:	43090 Pointe Drive Clinton Township, MI 48038
Licensee Telephone #:	(586) 203-8164
Licensee/Licensee Designee:	N/A
Administrator:	N/A
Name of Facility:	Family Home and Senior Living
Facility Address:	43090 Pointe Drive Clinton Township, MI 48038
Facility Telephone #:	(586) 203-8164
Original Issuance Date:	12/22/2011
Capacity:	5
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/10/2026

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 1
No. of residents interviewed and/or observed 1
No. of others interviewed 2 Role: Responsible Person & Household

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
  I observed medications.
- 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.
  I observed adequate food supply.
- 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.
  There were no reportable incidents.
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s:
  06/14/2024; af416(3) 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.

There was no fire drills conducted in the first quarter of 2026.

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

(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.

Resident A's last *Assessment Plan* was completed on 12/29/2018.

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

(9) A licensee shall review the written resident care agreement with the resident, resident's designated representative, or responsible agency at least annually or more often if necessary. Any changes to the resident care agreement must be re-signed by all applicable parties. If the annual review results in no changes to the resident care agreement the resident care agreement does not need to be re-signed but the licensee shall document that all applicable parties were contacted and agreed that no changes were necessary.

Resident A's last *Resident Care Agreement* was completed on 03/20/2022.

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's last *Health Care Appraisal* was completed on 06/01/2020.

R 400.739 Heating.

(5) Storage of combustible materials is prohibited in rooms containing the heating plant, water heater, or incinerator.

I observed several combustibles materials near the heating plant in the basement.

R 400.623 Applicant, licensee and administrator qualifications; licensee, administrator and staff requirements; parole or probation or convicted of felony.

(2) An applicant, licensee, and administrator shall be competent in all of the following areas:
(a) Nutrition.
(b) First aid.
(c) Cardiopulmonary resuscitation.
(d) Foster care, as defined in the act.
(e) Safety and fire prevention.
(f) Financial and administrative management.
(g) Knowledge of the needs of the population to be served.
(h) Resident rights.
(i) Prevention and containment of communicable diseases.
(j) Medication administration.

There were no training records for the licensee Irene Spatny.

IV. RECOMMENDATION

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

06/15/2026

LaShonda Reed
Licensing Consultant

Date