GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 19, 2026

Pusha Iambor
6084 28 Mile Rd
Washington, MI 48094

RE: License #: AF500411402
House On The Hill
6084 28 Mile Rd
Washington, MI 48094

Dear Ms. Iambor:

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,



Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3044 West Grand Boulevard
2nd Floor Annex, Suite 2-730
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 #:	AF500411402
Licensee Name:	Pusha Iambor
Licensee Address:	6084 28 Mile Rd Washington, MI 48094
Licensee Telephone #:	(586) 610-9508
Licensee/Licensee Designee:	Pusha Iambor
Administrator:	N/A
Name of Facility:	House On The Hill
Facility Address:	6084 28 Mile Rd Washington, MI 48094
Facility Telephone #:	(586) 557-3495
Original Issuance Date:	01/29/2024
Capacity:	6
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/16/2026

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 0
No. of residents interviewed and/or observed 0
No. of others interviewed 2 Role: Licensee and Household Member

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
  No residents in care.
- Medication(s) and medication record(s) reviewed? Yes ☐ No ☒ If no, explain.
  No residents in care.
- Resident funds and associated documents reviewed for at least one resident?
  Yes ☒ No ☐ If no, explain. Reviewed closed files.
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain.
  No residents in care.
- 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 08/07/2024- AF407(2), AF407(8), AF440(6) 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 400.615	**Resident register.**
	A licensee shall maintain a chronological register of all residents admitted that includes the following information for each resident: **(a) Resident full name.** **(b) Resident date of birth.** **(c) Date of admission.** **(d) Date of discharge and location, if known, where the resident moved.**
Licensee did not have a completed resident register at the time of inspection.	
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 resident care agreement was dated 09/18/2024. Resident A did not have an updated resident care agreement completed in 2025 or 2026.	
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.

During the onsite inspection, I observed that egress doors did not have non-locking against-egress hardware.

IV. RECOMMENDATION

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

Kristine Cilluffo 10/19/2026

Kristine Cilluffo Date
Licensing Consultant