



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 18, 2020

Lula Eubanks-Newton
Dual Insight Npc
93 Adelaide
Detroit, MI 48202

RE: License #: AM820009881
Investigation #: 2020A0778010
Commonwealth Home

Dear Mrs. Eubanks-Newton:

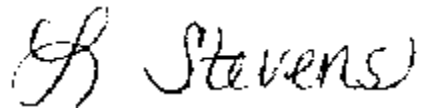
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "LaKeitha Stevens". The signature is written in a cursive, flowing style.

LaKeitha Stevens, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3055

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AM820009881
Investigation #:	2020A0778010
Complaint Receipt Date:	02/07/2020
Investigation Initiation Date:	02/07/2020
Report Due Date:	04/07/2020
Licensee Name:	Dual Insight Npc
Licensee Address:	93 Adelaide Detroit, MI 48202
Licensee Telephone #:	(313) 833-9141
Administrator:	Lula Eubanks-Newton
Licensee Designee:	Lula Eubanks-Newton
Name of Facility:	Commonwealth Home
Facility Address:	4505 Commonwealth Detroit, MI 48208
Facility Telephone #:	(313) 832-3061
Original Issuance Date:	11/02/1995
License Status:	REGULAR
Effective Date:	02/22/2018
Expiration Date:	02/21/2020
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Fire Disapproval.	Yes

III. METHODOLOGY

02/07/2020	Special Investigation Intake 2020A0778010
02/07/2020	Special Investigation Initiated - Telephone Telephone call made to Mrs. Eubanks, licensee designee
02/07/2020	Contact - Telephone call received Telephone call received from staff Carlos Eubanks
02/07/2020	Inspection Completed-BCAL Sub. Compliance
02/07/2020	Exit Conference

ALLEGATION: Fire Disapproval.

INVESTIGATION: On 02/07/2020, I received a copy of a fire disapproval from Fire Marshal Brian Batten regarding the above-named facility.

I made a telephone call to licensee designee Mrs. Eubanks regarding violations cited in the report and the needed generation of a special investigation. Per the fire report the facility was cited for the following:

- The first-floor kitchen door did not have a positive latch
- The second-floor south stairway door did not have a positive latch
- The third-floor attic door did not close to a positive latch
- The first-floor west bedroom door did not latch closed
- The annual fire alarm inspection and maintenance was overdue
- Corrections to discrepancies found during the annual inspection were not corrected.

Per Ms. Eubanks she will ensure the violations were corrected.

I received a telephone call from Carlos Eubanks, home manager. He indicated he was working to correct all cited violations.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	The facility received a fire inspection disapproval.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon submission of an acceptable corrective action plan I recommend the status of the license remain unchanged.



02/18/2020

LaKeitha Stevens
Licensing Consultant

Date

Approved By:



02/18/2020

Ardra Hunter
Area Manager

Date