



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 30, 2021

Karen Harris  
Integrated Living, Inc.  
43133 Schoenherr Road  
Sterling Heights, MI 48313

RE: License #: AS500380734  
**Biland**  
**42820 Biland**  
**Clinton Township, MI 48038**

Dear Mrs. Harris:

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) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Gonzalez".

Stephanie Gonzalez, LCSW  
Adult Foster Care Licensing Consultant  
Bureau of Community and Health Systems  
Department of Licensing and Regulatory Affairs  
51111 Woodward Ave, Ste. 4B  
Pontiac, MI 48342  
Cell: 248-514-9391  
Fax: (248) 975-5093  
[gonzalezs3@michigan.gov](mailto:gonzalezs3@michigan.gov)

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

**I. IDENTIFYING INFORMATION**

**License #:** AS500380734

**Licensee Name:** Integrated Living, Inc.

**Licensee Address:** 43133 Schoenherr Road  
Sterling Heights, MI 48313

**Licensee Telephone #:** (586) 731-9800

**Licensee Designee:** Karen Harris

**Administrator:** Monique Murray

**Name of Facility:** Biland

**Facility Address:** 42820 Biland  
Clinton Township, MI 48038

**Facility Telephone #:** (586) 731-9800

**Original Issuance Date:** 12/09/2016

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/15/2021

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 2  
No. of residents interviewed and/or observed 3  
No. of others interviewed 1 Role: Licensee Designee

- 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.
- 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: asec734b(6); as204(3)(b); as204(3)(c); as205(5); as205(3); as316(1)(a); as301(10); as403(5) 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 400.14301      Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions:

(a) The amount of personal care, supervision, and protection that is required by the resident is available in the home.

During the months of March 2020 and April 2020, the facility did not have sufficient staff available to provide the amount of personal care, supervision and protection that Resident A and Resident B required. The facility subsequently moved Resident A and Resident B to an unlicensed facility for approximately 8 weeks (March 1, 2020 to May 1, 2020) but did not discharge the residents from the facility.

**R 400.14302      Resident admission and discharge policy; house rules; Emergency discharge; change of residency; restricting resident's ability to make living arrangements prohibited; provision of resident records at time of discharge.**

(6) A licensee shall not change the residency of a resident from one home to another without the written approval of the resident or the resident's designated representative and responsible agency.

During the months of March 2020 and April 2020, the facility did not have sufficient staff available to provide the amount of personal care, supervision and protection that Resident A and Resident B required. The facility subsequently moved Resident A and Resident B to an unlicensed facility for approximately 8 weeks (March 1, 2020 to May 1, 2020) but did not obtain written approval from the resident and/or their designated representative.

**R 400.14315      Handling of resident funds and valuables.**

(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.

At the time of the onsite inspection, the facility had \$240.30 in cash for Resident C.

**R 400.14318      Emergency preparedness; evacuation plan; emergency transportation.**

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

The facility did not complete two daytime fire drills, two evening fire drills and one sleeping hours fire drill for the year 2020.

**R 400.14401      Environmental health.**

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

At the time of the onsite inspection, three of the resident bedroom windows did not have a mesh screen.

**R 400.14406      Room temperature.**

All resident-occupied rooms of a home shall be heated at a temperature range between 68 and 72 degrees Fahrenheit during non-sleeping hours. Precautions shall be taken to prevent prolonged resident exposure to stale, noncirculating air that is at a temperature of 90 degrees Fahrenheit or above. Variations from the requirements of this rule shall be based upon a resident's health care appraisal and shall be addressed in the resident's written assessment plan. The resident care agreement shall address the resident's preferences for variations from the temperatures and requirements specified in this rule.

At the time of the onsite inspection, the facility temperature was 75 degrees. The licensee designee, Karen Harris, acknowledged that the air conditioner is currently broken and in the process of being fixed.

#### IV. RECOMMENDATION

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



6/30/2021

---

Stephanie Gonzalez  
Licensing Consultant

Date