

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 18, 2022

Josephine Uwazurike Kevdaco Human Services LLC PO Box 4199 Southfield, MI 48037

> RE: License #: AS820305891 Prestige Home 5892 Second Romulus, MI 48174

Dear Ms. Uwazurike:

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 (313) 456-0380.

Sincerely,

Regina Buchanon

Regina Buchanan, Licensing Consultant Bureau of Community and Health Systems Cadillac PI. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 949-3029

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

I. IDENTIFYING INFORMATION

License #:	AS820305891	
Licensee Name:	Kevdaco Human Services LLC	
Licensee Address:	Suite 200 23999 Northwestern Hwy Southfield, MI 48075	
Licensee Telephone #:	(248) 569-1040	
Licensee/Licensee Designee:	Josephine Uwazurike	
Administrator:	Josephine Uwazurike	
Name of Facility:	Prestige Home	
Facility Address:	5892 Second Romulus, MI 48174	
Facility Telephone #:	(734) 331-3777	
Original Issuance Date:	06/01/2011	
Capacity:	6	
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL ALZHEIMERS AGED TRAUMATICALLY BRAIN INJURED	

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/17/2022

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

Date of Health Authority Inspection if applicable: N/A

Insp	pection Type:	Interview and Observation Combination	│ ⊠ Worksheet □ Full Fire Safety
No.	of staff interviewed and of residents interviewed of others interviewed		2 0
•	Medication pass / simu	ılated pass observed? Yes $igtimes$	No 🗌 If no, explain.
•	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain.		
•	 Resident funds and associated documents reviewed for at least one resident? Yes No I If no, explain. Meal preparation / service observed? Yes No K If no, explain. Residents had already eaten Fire drills reviewed? Yes No I 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-u	ıp? Yes 🛛 No 🗌 If no, expla	ain.
•	Corrective action plan N/A ⊠	compliance verified? Yes 🗌 🤅	CAP date/s and rule/s:
•		mployees followed-up?	N/A 🖂
•	Variances? Yes 🗌 (pl	lease explain) No 🗌 N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 330.1803 Facility environment; fire safety.

(6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 month from the date of the finding to either of the following:

(a) Improve the score to at least the "slow" category.

(b) Bring the home into compliance with the physical plant standards for "Impractical" homes contained in chapter 21 of the 1985 life safety code of the national fire protection association, which are adopted by reference in these rules and which may be obtained from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost, or from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of the chapter 21 standards. A price quote for copying of these pages may be obtained from the national fire protection association.

Annual evacuation assessments were not completed on each resident on 02/25/2021. There were a total of 5 residents and evacuation assessments were only completed on 2 residents.

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. Two of the bedrooms had holes in the wall located behind the bedroom doors.

IV. RECOMMENDATION

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

Regina Buchanon

_05/18/2022 Date

Regina Buchanan Licensing Consultant