

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 23, 2022

Adesuwa Iyoha Victory Homes Management Inc P.O. Box 3011 Ann Arbor, MI 48106

RE: License #: AS820317288

Victory Homes Management Inc. #1

30509 Halecreek Romulus, MI 48174

Dear Ms. Iyoha:

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,

Denasha Walker, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202

(313) 300-9922

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

I. IDENTIFYING INFORMATION

License #: AS820317288

Licensee Name: Victory Homes Management Inc

Licensee Address: 4648 Pond Run

Canton, MI 48188

Licensee Telephone #: (734) 846-7884

Licensee/Licensee Designee: Adesuwa Iyoha

Administrator: Adesuwa Iyoha

Name of Facility: Victory Homes Management Inc. #1

Facility Address: 30509 Halecreek

Romulus, MI 48174

Facility Telephone #: (734) 992-4894

Original Issuance Date: 04/06/2012

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODS OF INSPECTION

Date	of On-site Inspection(s):	09/22/2022
Date	of Bureau of Fire Services Inspection if appli	icable:
Date	of Health Authority Inspection if applicable:	
No. o	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 1 Role: Licensee	2 4 • Designee
A	Medication pass / simulated pass observed? A full worksheet inspection was completed. Medication(s) and medication record(s) revie	
`	Resident funds and associated documents reges \boxtimes No \square If no, explain. Meal preparation / service observed? Yes \boxtimes	
• F	Fire drills reviewed? Yes 🗵 No 🗌 If no, ex	cplain.
• F	Fire safety equipment and practices observed	d? Yes ⊠ No □ If no, explain.
l	E-scores reviewed? (Special Certification On f no, explain. Water temperatures checked? Yes ⊠ No ☐	•, – – –
•	ncident report follow-up? Yes ⊠ No ☐ If r	no, explain.
	Corrective action plan compliance verified? ` N/A ⊠ Number of excluded employees followed-up?	
• \	√ariances? 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 400.14403 Maintenance of premises.

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

At the time of inspection, the screen door located at the front entrance was not in good repair, the hinge was no longer attached to the doorframe which prevents the screen door from closing.

R 400.14503 Interior finishes and materials generally.

(4) Class A, B, and C materials are interior finish materials that have the following minimum characteristics:

Class	Flame Sp	read Smoke Dev	/eloped
Α	0-25	0-450	•
В	26-75	0-450	
C	76-200	0-450	

At the time of inspection, I observed wallpaper boarding the wall in the Southwest resident bedroom. Licensee was unable to provide verification that the material is class C or better.

IV. RECOMMENDATION

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

