



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 6, 2023

Shannon White-Schellenberger  
Angels' Place  
Suite 2  
29299 Franklin Road  
Southfield, MI 48034

RE: License #: AS630092664  
**Joliat Home**  
**3655 S. Commerce**  
**Commerce, MI 48390**

Dear Mrs White-Schellenberger:

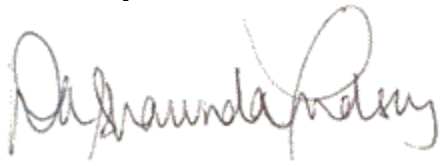
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 and special certification 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, appearing to read "DaShawnda Lindsey".

DaShawnda Lindsey, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(248) 505-8036

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

**I. IDENTIFYING INFORMATION**

**License #:** AS630092664

**Licensee Name:** Angels' Place

**Licensee Address:** Suite 2  
29299 Franklin Road  
Southfield, MI 48034

**Licensee Telephone #:** (248) 350-2203

**Licensee/Licensee Designee:** Shannon White-Schellenberger

**Administrator:** Shannon White-Schellenberger

**Name of Facility:** Joliat Home

**Facility Address:** 3655 S. Commerce  
Commerce, MI 48390

**Facility Telephone #:** (248) 350-2203

**Original Issuance Date:** 07/17/2000

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/01/2023

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

Date of Environmental/Health Inspection if applicable: 12/20/2022

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 3

No. of others interviewed 3 Role: Management

- 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.  
The inspection did not occur during a meal time.
- 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:  
Renewal 2021- as312(4)(b) and as402(6) N/A
- Number of excluded employees followed-up? 0 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:

**MCL 400.734b**      **Employing or contracting with certain employees providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; failure to conduct criminal history check; automated fingerprint identification system database; report to legislature; costs; definitions.**

**(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.**

Staff Geraldine Anthony was fingerprinted under the Lopez Family Home license. There was no verification she was fingerprinted under the Joliat Home license.

**R 400.14312 Resident medications.**

**(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.**

Resident A's last health care appraisal took place on 02/09/2022.

**R 400.14312 Resident medications.**

**(2) Medication shall be given, taken, or applied pursuant to label instructions.**

Resident A was prescribed Risperidone 0.5mg at 8am and 4pm. However, staff administered it to him at 7am and 8pm.

Note: an updated prescription was emailed to me after the inspection. Effective 03/01/2023, staff are to administer the medication to Resident A at 7am and 8pm.

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

**(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.**

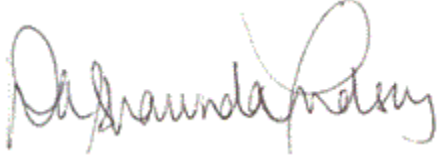
Resident A's Resident Funds Part II form was not accurate. The transactions were not calculated correctly. When the transactions were recalculated, Resident A had \$6 more in the facility.

Resident B's Resident Funds Part II form was not accurate. Per the form, Resident B had \$59.25. However, I counted Resident B's funds, and he had \$64.21 in the facility.

Resident C's Resident Funds Part II form was not accurate. Per the form, Resident C had \$133.78. However, I counted Resident C's funds, and he had \$133.53 in the facility.

**IV. RECOMMENDATION**

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



03/06/2023

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Licensing Consultant Date