



STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ORLENE HAWKS  
DIRECTOR

June 23, 2023

Kehinde Ogundipe  
Eden Prairie Residential Care, LLC  
G 15 B  
405 W Greenlawn  
Lansing, MI 48910

RE: License #:	AS250392427
Investigation #:	2023A0872044
	Welch Home

Dear Mr. Ogundipe:

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 (517) 643-7960.

Sincerely,

A handwritten signature in black ink that reads "Susan Hutchinson". The signature is written in a cursive style with a large initial 'S'.

Susan Hutchinson, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(989) 293-5222

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS250392427
<b>Investigation #:</b>	2023A0872044
<b>Complaint Receipt Date:</b>	05/18/2023
<b>Investigation Initiation Date:</b>	05/18/2023
<b>Report Due Date:</b>	07/17/2023
<b>Licensee Name:</b>	Eden Prairie Residential Care, LLC
<b>Licensee Address:</b>	G 15 B 405 W Greenlawn Lansing, MI 48910
<b>Licensee Telephone #:</b>	(214) 250-6576
<b>Administrator:</b>	Kehinde Ogundipe
<b>Licensee Designee:</b>	Kehinde Ogundipe
<b>Name of Facility:</b>	Welch Home
<b>Facility Address:</b>	302 Welch Blvd. Flint, MI 48503
<b>Facility Telephone #:</b>	(810) 780-4222
<b>Original Issuance Date:</b>	03/21/2019
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	03/21/2022
<b>Expiration Date:</b>	03/20/2024
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

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**II. ALLEGATION(S)**

	<b>Violation Established?</b>
On 5/12/23 the following was noted: Trash on the outside of home, missing cabinets, missing HVAC grates, overhead lighting was not attached to ceiling, microwave was 8 ft in air and unstable to the touch, bathroom grab bars falling off wall. Stairs to 2nd floor not able to withstand weight. Dirty linens, tub is dirty, no shower curtain.	Yes
Additional Findings	Yes

**III. METHODOLOGY**

05/18/2023	Special Investigation Intake 2023A0872044
05/18/2023	Special Investigation Initiated - Telephone
05/23/2023	APS Referral I made an APS complaint via email
05/23/2023	Contact - Telephone call made I spoke to the licensee designee, Kehinde Ogundipe
05/23/2023	Contact - Document Received I received 30-day discharge notices regarding Residents A and B
05/24/2023	Inspection Completed On-site Unannounced
06/20/2023	Contact - Document Received I exchanged emails with the licensee designee, Kehinde Ogundipe
06/20/2023	Exit Conference I conducted an exit conference with the licensee designee, Kehinde Ogundipe
06/20/2023	Inspection Completed-BCAL Sub. Compliance

**ALLEGATION: On 5/12/23 the following was noted: Trash on the outside of home, missing cabinets, missing HVAC grates, overhead lighting was not attached to ceiling, microwave was 8 ft in air and unstable to the touch, bathroom grab bars**

**falling off wall. Stairs to 2nd floor not able to withstand weight. Dirty linens, tub is dirty, no shower curtain.**

**INVESTIGATION:** On 05/18/23, I spoke to the licensee designee, Kehinde Ogundipe, via telephone. Mr. Ogundipe acknowledged that there are physical plant issues with the home. He said that he has hired people to remodel and make repairs to the facility. He said that he is in the process of having the kitchen and bathrooms remodeled and will have other areas of the home repaired/improved as well. Mr. Ogundipe said currently, there are two residents living at the facility and he and the staff are making sure that the residents' needs are being met during this remodel.

On 05/23/23, I received a telephone call from the licensee designee, Kehinde Ogundipe. Mr. Ogundipe confirmed that there are still two residents living in this facility. He said that although he was initially going to repair and remodel the home, he has decided he is going to issue 30-day notices to the remaining two residents. Once the residents move out and this investigation is complete, he will request that I close the license to this facility.

On 05/23/23, I received copies of written 30-day discharge notices via email for Resident A and Resident B. The discharge notices were dated 05/22/23 and were addressed to each resident and their respective guardians and/or case managers.

On 05/25/23, I conducted an unannounced onsite inspection of Welch Home Adult Foster Care facility. While approaching the facility, I noticed debris and trash along the front and sides of the home. I interviewed staff Freddie Johnson and Raven Nash and interacted with Resident A. Mr. Johnson and Mr. Nash confirmed that the licensee designee, has hired people to remodel and make repairs to the facility. I noted that the kitchen cabinets were being repaired as was areas of the living room and first floor bathroom. The first-floor bathroom was dirty as was the shower, tub, toilet, and sink. I met with Resident A in his room, and I noticed damage to his walls as well as a missing floor grate on the floor.

While I was at the facility, I saw a workman walking up and down the stairs of the home. I asked him if the stairs are unstable, and he said no. Mr. Nash and Mr. Johnson told me that staff and residents do not currently use the upstairs of the facility and both Resident A and Resident B's bedrooms are on the first floor of the facility.

On 06/20/23, I exchanged emails with the licensee designee, Kehinde Ogundipe. Mr. Ogundipe said that as of this date, there are no more residents living at this facility and he would like his AFC license to be closed. I told him that once I have concluded my investigation, I will be able to close the license.

On 06/20/23, I conducted an exit conference with the licensee designee, Kehinde Ogundipe. I told him that I have concluded my investigation and told him which rule violations I am substantiating and asked him to complete and submit a corrective action plan upon the receipt of my investigation report.

<b>APPLICABLE RULE</b>	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	<b>(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</b>
<b>ANALYSIS:</b>	<p>On 05/18/23, the licensee designee, Kehinde Ogundipe told me that he has hired people to remodel/repair areas of the facility.</p> <p>On 05/23,23, I spoke to Mr. Ogundipe. He said that although he had planned on repairing and/or remodeling this home, he has decided to close it and he will be moving the remaining two residents out of the home.</p> <p>On 05/25,23, during my onsite inspection, I noted debris and trash along the front and sides of the home. I also noted that the kitchen cabinets, the living room, and the downstairs bathroom are in the process of being repaired. I met with Resident A in his room, and I noticed damage to his walls as well as a missing floor grate on the floor. The first-floor bathroom was dirty as was the shower, tub, toilet, and sink.</p> <p>Staff Freddie Johnson and Raven Nash confirmed that the licensee designee, has hired people to remodel and make repairs to the facility.</p> <p>I conclude that there is sufficient evidence to substantiate this rule violation.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:** During my onsite inspection on 05/25/23, I noted that there were no linens on Resident A's bed. He was laying on a mattress with no sheets or blanket.

<b>APPLICABLE RULE</b>	
<b>R 400.14411</b>	<b>Linens.</b>
	<b>Rule 411. (1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillow case, a minimum of 1 blanket, and a bedspread for each bed. Bed linens shall be changed and laundered at least once a week or more often if soiled.</b>

<b>ANALYSIS:</b>	During my onsite inspection on 05/25/23, I noted that there were no linens on Resident A's bed. He was laying on a mattress with no sheets or blanket.  I conclude that there is sufficient evidence to substantiate this rule violation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Upon the receipt of an acceptable corrective action plan, I recommend no change in the license status.

*Susan Hutchinson*

June 23, 2023

Susan Hutchinson Licensing Consultant	Date
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Approved By:

*Mary Holton*

June 23, 2023

Mary E. Holton Area Manager	Date
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