



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

February 6, 2024

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

RE: License #: AS250402729  
**Welch Home I**  
**913 Welch Blvd**  
**Flint, MI 48503**

Dear Kehinde Ogundipe:

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, pending the closure of special investigation #2024A0779021. 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 (517) 643-7960

Sincerely,

A handwritten signature in cursive script that reads "Christopher A. Holvey".

Christopher Holvey, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 899-5659

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

**I. IDENTIFYING INFORMATION**

**License #:** AS250402729

**Licensee Name:** Eden Prairie Residential Care, LLC

**Licensee Address:** G 15 B  
405 W Greenlawn  
Lansing, MI 48910

**Licensee Telephone #:** (214) 250-6576

**Licensee/Licensee Designee:** Kehinde Ogundipe, Designee

**Administrator:** Kehinde Ogundipe

**Name of Facility:** Welch Home I

**Facility Address:** 913 Welch Blvd  
Flint, MI 48503

**Facility Telephone #:** (214) 250-6576

**Original Issuance Date:** 08/24/2021

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
AGED

**Special Certification:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 02/01/2024

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

Date of Health Authority Inspection if applicable: 02/01/2024

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 3

No. of others interviewed 0 Role: [REDACTED]

- 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.  
Home was viewed to have an adequate supply of food.
- 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:  
12/16/22--305 (3)
- 4/17/23--308 (2)(b), 303 (2)
- 6/28/23--303 (2)
- 11/1/23--303 (2)
- 1/2/24--201 (2), 403 (4)
- 1/29/24--303 (2), 206 (2)
- 1/29/24--301 (4), 411 (1) 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 400.14304            Resident rights; licensee responsibilities.**

**(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:**

**(o) The right to be treated with consideration and respect, with due recognition of personal dignity, individuality, and the need for privacy.**

Three separate resident bedrooms did not have any window coverings on the window to provide privacy.

**R 400.14403            Maintenance of premises.**

**(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.**

The resident bedroom located in back left corner of 1<sup>st</sup> floor had multiple visible cobwebs on walls. Two separate resident bedrooms located on the 2<sup>nd</sup> floor had visibly dirty windowsills. The dirt was very dark in color and not easily wiped off.

**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.**

The home had standing water located on the basement floor.

**R 400.14407            Bathrooms.**

**(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes,**

bolts, bars, and other similar devices shall not be used on bathroom doors.

The small bathroom on the 1<sup>st</sup> floor and the upstairs bathroom both had doorknobs that did not meet the requirement of being positive-latching, non-locking-against-egress hardware.

**R 400.14408 Bedrooms generally.**

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

The home had several resident bedroom doors that had doorknobs that did not meet the requirement of being positive-latching, non-locking-against-egress hardware.

**R 400.14507 Means of egress generally**

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and be equipped with positive-latching, non-locking-against-egress hardware.

The homes front door had a doorknob that did not meet the requirement of being positive-latching, non-locking-against-egress hardware.

**R 400.14510 Heating equipment generally.**

(2) A furnace, water heater, heating appliances, pipes, wood-burning stoves and furnaces, and other flame- or heat-producing equipment shall be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and shall be maintained in a safe condition.

The homes dryer had a duct that was detached from the back of the dryer and was in visibly poor and unsafe condition.

**R 400.14511 Flame-producing equipment; enclosures.**

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire-resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware.

The fire door located on the heat plant in the basement of the home did not have an attached and working automatic self-closing device.

#### IV. RECOMMENDATION

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



2/6/2024

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Christopher Holvey  
Licensing Consultant

Date