

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

January 3, 2025

Dilip Samadder & Alfred Samadder 26232 M-60 Cassopolis, MI 49031

RE: License #: AS110404032

**Emanuel** 

703 Hickory Street Niles, MI 49120

Dear Dilip Samadder & Alfred Samadder:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

You submitted documentation of compliance by email.

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) 284-9730.

Sincerely,

Nile Khabeiry, Licensing Consultant

We Khaberry, LMSW

Bureau of Community and Health Systems

Unit 13, 7th Floor 350 Ottawa, N.W.

Grand Rapids, MI 49503

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

#### I. IDENTIFYING INFORMATION

**License #:** AS110404032

Licensee Name: Dilip Samadder & Alfred Samadder

Licensee Address: 26232 M-60

Cassopolis, MI 49031

**Licensee Telephone #:** (269) 445-5353

Licensee/Licensee Designee: Dilip Samadder

Administrator: Alfred Samadder

Name of Facility: Emanuel

Facility Address: 703 Hickory Street

Niles, MI 49120

**Facility Telephone #:** (917) 256-9745

Original Issuance Date: 07/31/2020

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

**MENTALLY ILL** 

**AGED** 

### **II. METHODS OF INSPECTION**

Date	of On-site Inspection(s):	12/23/2	024
Date	of Bureau of Fire Services Inspection if appli	icable: l	N/A
Date	of Health Authority Inspection if applicable:		N/A
No. c	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role: N/A		2 6
• [	Medication pass / simulated pass observed?	Yes ⊠	No 🗌 If no, explain.
• [	Medication(s) and medication record(s) revie	wed? Y	es 🛭 No 🗌 If no, explain.
`	Resident funds and associated documents re Yes $\square$ No $oxtimes$ If no, explain. Resident funds Meal preparation / service observed? Yes $oxtimes$	not hel	d by facility.
• [	Fire drills reviewed? Yes ⊠ No □ If no, ex	plain.	
• [	Fire safety equipment and practices observed	d? Yes	⊠ No  If no, explain.
I	E-scores reviewed? (Special Certification On lf no, explain. Water temperatures checked? Yes ⊠ No □	• /	
•	Incident report follow-up? Yes $oxtimes$ No $oxtimes$ If r	no, expla	ain.
	Corrective action plan compliance verified? ` N/A ⊠ Number of excluded employees followed-up?		CAP date/s and rule/s: 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 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

**FINDINGS:** Fire drills were not conducted during sleeping hours.

R 400.14503 Interior finishes and materials generally.

(2) Interior finish materials shall be securely attached to, or furred out not more than 1 inch from, walls or ceilings that are dry wall, plaster, masonry, or natural solid wood that is not less than 3/4 of an inch thick.

**FINDINGS:** Door trim was broken in resident bedroom.

A corrective action plan was requested and approved on 12/23/2024. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

## IV. RECOMMENDATION

An acceptable	corrective	action	plan h	nas been	received.	Renewal c	of the	license	is
recommended	l.								

Nile Khabeiry Date Licensing Consultant