



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 12, 2024

Jasmine Boss
JARC
Suite 100
6735 Telegraph Rd
Bloomfield Hills, MI 48301

RE: License #: AS630246169
Grosberg
32146 Staman Circle
Farmington Hills, MI 48336

Dear Ms. Boss:

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 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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(586) 676-2877

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

I. IDENTIFYING INFORMATION

License #: AS630246169

Licensee Name: JARC

Licensee Address: Suite 100
6735 Telegraph Rd
Bloomfield Hills, MI 48301

Licensee Telephone #: (248) 940-9617

Licensee/Licensee Designee: Jasmine Boss

Administrator: Charkyra Hopkins

Name of Facility: Grosberg

Facility Address: 32146 Staman Circle
Farmington Hills, MI 48336

Facility Telephone #: (248) 478-2566

Original Issuance Date: 03/14/2002

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/11/2024

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

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: Home Manager

- Medication pass / simulated pass observed? Yes No If no, explain.
I observed medications.
- 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.
I observed adequate food supply.
- 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:
CAP 12/15/2022 R 400.14301(10); R 400.14301(3); R 400.14403(1);R
400.14403 (2);R 400.14403 (5); R 400.14408(4); R 400.14410(5) 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 330.1803 Facility environment; fire safety.

(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3-month period.

There was no sleeping hours fire drill conducted the second quarter of 2024.

R 330.1803 Facility environment; fire safety.

(6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 months from the date of the finding to do either of the following:

(a) Improve the score to at least the "slow" category.

I observed that the e-scores in 2023 evacuation score was listed as prompt but was to be slow.

R 400.14401 Environmental health.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

I observed that the kitchen faucet water registered at 123.8 degrees Fahrenheit. I observed that bathroom number three faucet water registered at 126 degrees Fahrenheit.

REPEAT VIOLATION ESTABLISHED. LSR 12/13/2022, CAP 12/15/2022.

R 400.14403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

I observed that in bedroom number three, the door frame leading to the bathroom was cracked and lifting.

REPEAT VIOLATION ESTABLISHED. LSR 12/13/2022, CAP 12/15/2022.

R 400.14511 Flame-producing equipment; enclosures.

(4) Combustible materials shall not be stored in rooms that contain heating equipment, a water heater, an incinerator, or other flame-producing equipment.

I observed that there were flammable containers near the furnace. This was corrected onsite.

IV. RECOMMENDATION

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

L. Reed

12/12/2024

LaShonda Reed
Licensing Consultant

Date