

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

February 18, 2025

Jean Nyambio Detroit Family Home, INC. Suite 202 17356 W. 12 Mile Road Southfield, MI 48076

RE: License #: AS820383893

Detroit Family Home 17180 Indiana St. Detroit, MI 48221

Dear Mr. Nyambio:

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 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 (313) 456-0380.

Sincerely,

(313) 919-3003

Shatonla Daniel, Licensing Consultant Bureau of Community and Health Systems Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202

Shatorla Daniel

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

I. IDENTIFYING INFORMATION

License #: AS820383893

Licensee Name: Detroit Family Home, INC.

Licensee Address: Suite 202

17356 W. 12 Mile Road Southfield, MI 48076

Licensee Telephone #: (301) 332-3609

Licensee/Licensee Designee: Jean Nyambio

Administrator: Jean Nyambio

Name of Facility: Detroit Family Home

Facility Address: 17180 Indiana St.

Detroit, MI 48221

Facility Telephone #: (313) 270-7751

Original Issuance Date: 09/19/2016

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL ALZHEIMERS

AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	02/14/2025
Date of Bureau of Fire Services Inspection if applicable:	
Date of Health Authority Inspection if applicable:	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role:	2 2
 Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain. Full paperwork inspection 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. 	
Fire drills reviewed? Yes ⊠ No ☐ If no, e	explain.
Fire safety equipment and practices observe	ed? Yes ⊠ No □ If no, explain.
 E-scores reviewed? (Special Certification O If no, explain. Water temperatures checked? Yes ⊠ No □ 	• /
Incident report follow-up? Yes ⊠ No ☐ If	no, explain.
 Corrective action plan compliance verified? 203 (1), 204 (3), 205 (3), 311 (1), 312 (4b), 3 Number of excluded employees followed-up 	313 (6), 318 (5), 401 (2) 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 400.14204 Direct care staff; qualifications and training.

- (3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:
 - (d) Personal care, supervision, and protection.

At the time of inspection, Staff- Heaven Willingham employee record reviewed did not contain training in personal care, supervision, and protection.

R 400.14312 Resident medications.

- (4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:
- (b) Complete an individual medication log that contains all of the following information:
 - (i) The medication.
 - (ii) The dosage.
 - (iii) Label instructions for use.
 - (iv) Time to be administered.
- (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.
- (vi) A resident's refusal to accept prescribed medication or procedures.

At the time of inspection, Resident A's medication administration record reviewed did not contain staff initials for Vitamin D at the 8:00am dosage for 01/19/2025 and 01/28/2025.

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.

At the time of inspection, licensee failed to practice and maintain a record of evening fire drills during second quarter of 2024.

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.

At the time of inspection, I observed the upstairs bathroom water temperature to be 150 degrees Fahrenheit at the faucet.

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.

At the time of inspection, I observed the following:

- Peeling and buckling paint in the upstairs living room corner
- A taped hole in resident bedroom # 1
- A non- working light fixture and no window blinds in resident bedroom # 4

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.

At the time of inspection, I observed the upstairs bathroom not equipped with positive latching hardware.

IV. RECOMMENDATION

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

Shotorla Daniel	02/18/2025
Shatonla Daniel	 Date
Licensing Consultant	