

GRETCHEN WHITMER
GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

March 31, 2025

Joshua Stirbu Amy's Place Assisted Living LLC 18361 Norwich Livonia, MI 48152

RE: License #: AS820408857

Amy's Place Assisted Living LLC

17251 Mayfield St Livonia, MI 48152

#### Dear Joshua Stirbu:

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,

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

(313) 300-9922

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820408857

Licensee Name: Amy's Place Assisted Living LLC

**Licensee Address:** 17251 Mayfield St

Livonia, MI 48152

**Licensee Telephone #:** (847) 477-5801

Licensee/Licensee Designee: Joshua Stirbu

Administrator: Joshua Stirbu

Name of Facility: Amy's Place Assisted Living LLC

Facility Address: 17251 Mayfield St

Livonia, MI 48152

**Facility Telephone #:** (847) 477-5801

Original Issuance Date: 03/29/2022

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

**ALZHEIMERS** 

**AGED** 

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

Date of On-site Inspection(s):	03/28/2025
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  1 Role: License	1 3 ee Designee
<ul> <li>Medication pass / simulated pass observed A full worksheet inspection was complerted</li> <li>Medication(s) and medication record(s) rev</li> </ul>	i.
<ul> <li>Resident funds and associated documents Yes ∑ No ☐ If no, explain.</li> <li>Meal preparation / service observed? Yes Meal preparation/service was not observed</li> <li>Fire drills reviewed? Yes ∑ No ☐ If no,</li> </ul>	☐ No ☑ If no, explain. at the time of inspection.
Fire safety equipment and practices observ	red? Yes ⊠ No □ If no, explain.
<ul> <li>E-scores reviewed? (Special Certification Continuo) If no, explain.</li> <li>Water temperatures checked? Yes ⊠ No</li> </ul>	·,
Incident report follow-up? Yes ⊠ No □ I	f no, explain.
<ul> <li>Corrective action plan compliance verified?         N/A ☒</li> <li>Number of excluded employees followed-up</li> </ul>	
Variances? Yes (please explain) No [	_

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

#### R 400.14203 Licensee and administrator training requirements.

- (1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:
- (a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.
- (b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

At the time of inspection Joshua Stirbu, licensee failed to successfully complete, 16 hours of training or 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

## 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, emergency and evacuation procedures were not conducted during daytime, evening, and sleeping hours at least once per quarter, during the following:

#### 2023

- 1st quarter, during sleeping hours.
- 2<sup>nd</sup> quarter, during sleeping hours.
- 3<sup>rd</sup> quarter during sleeping hours.
- 4th quarter, during evening hours.

#### 2024

- 1st quarter, during sleeping hours.
- 2<sup>nd</sup> quarter, during evening hours.
- 3<sup>rd</sup> quarter during evening hours.
- 4th quarter, during sleeping hours.

The length of time for evacuations that were completed, range between five to nine minutes.

#### R 400.14401 Environmental health.

(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.

At the time of inspection, caustics and other cleaning supplies were stored in the resident's bathroom and were not safeguarded.

#### Corrected onsite, no CAP needed.

#### R 400.14401 Environmental health.

(8) Hand-washing facilities that are provided in both the kitchen and bathroom areas shall include hot and cold water, soap, and individual towels, preferably paper towels.

At the time of inspection, the resident's bathrooms were not equipped with individual towels, or paper towels.

#### R 400.14402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot

foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

At the time of inspection, the refrigerators and freezer were not equipped with approved thermometers.

#### R 400.14505

Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions, and changes of category.

- (1) At least 1 single-station, battery-operated smoke detector shall be installed at the following locations:
- (b) On each occupied floor, in the basement, and in areas of the home that contain flame- or heat-producing equipment.

At the time of inspection, a smoke detector was not installed in the heating plant area that contains flame- and heat-producing equipment.

#### R 400.14506

Fire extinguishers; location, examination, and maintenance.

(1) A minimum of 1 underwriters laboratories approved 2A 10BC extinguisher or equivalent shall be provided for use in a small group home on each occupied floor and in the basement.

At the time of inspection, the home was not equipped with an approved 2A 10BC extinguisher or equivalent.

#### IV. RECOMMENDATION

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

3/31/2025

Denasha Walker Licensing Consultant Date