GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 16, 2025

Corrissa Weaver
Jacksons Home
470 Old Pine Way
Walled Lake, MI 48390

RE: License #: AS820415340
Investigation #: 2025A0778018
Jacksons Home

Dear Ms. Weaver:

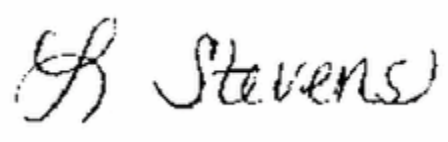
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (313) 456-0380.

Sincerely,



LaKeitha Stevens, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3055

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS820415340
Investigation #:	2025A0778018
Complaint Receipt Date:	03/07/2025
Investigation Initiation Date:	03/10/2025
Report Due Date:	05/06/2025
Licensee Name:	Jacksons Home
Licensee Address:	16160 Baylis Detroit, MI 48221
Licensee Telephone #:	(586) 557-3413
Administrator:	Corrissa Weaver
Licensee Designee:	Corrissa Weaver
Name of Facility:	Jacksons Home
Facility Address:	16160 Baylis Detroit, MI 48221
Facility Telephone #:	(586) 557-3413
Original Issuance Date:	06/07/2023
License Status:	REGULAR
Effective Date:	06/07/2024
Expiration Date:	06/06/2026
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Resident eloped from home multiple times.	Yes

III. METHODOLOGY

03/07/2025	Special Investigation Intake 2025A0778018
03/07/2025	APS Referral Referral made by ORR
03/10/2025	Special Investigation Initiated - Telephone Telephone call to Office of Recipient Rights, Marcellus Ball.
03/19/2025	Inspection Completed On-site Face to Face interview with Resident A and Staff, MacKenzie Jarrell. Telephone interview with Corrissa Weaver
04/08/2025	Contact - Telephone call made Telephone interview with Porsha Lyles of Family Coves Helpers (Guardian)
04/14/2025	Exit Conference Telephone exit conference with Corissa Weaver, licensee designee
04/14/2025	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Resident eloped from home multiple times.

INVESTIGATION: On 03/10/2025, I completed a telephone interview with Recipient Rights Officer, Marcellus Ball. Ms. Ball indicated Resident A stated she runs from the facility because she doesn't want to be there. Ms. Ball stated Resident A attempts to run away three-four times a day.

On 03/19/2025, I completed an unannounced onsite inspection. At the time of my arrival Resident A was attempting to elope. However, staff Aleda Dunbar was redirecting her. I attempted to interview Resident A. She refused to be interviewed and continued to state, "I want to go to the hospital." Staff, Aleda Dunbar indicated Resident A had been attempting to leave the facility all morning. She indicated she is the staff assigned to Resident A. Per Ms. Dunbar, Resident A receives 1:1 staffing due to being a high elopement risk. This information is documented in Resident A's assessment plan.

While onsite I interviewed staff Mackenzie Jarrell. Ms. Jarrell stated she attempted to redirect Resident A the last time she ran from the facility. She stated Resident A ran out of the door on 02/27/2025. I asked Ms. Jarrell if she was Resident A's 1:1 staff at the time of the incident and she stated no. However, she didn't want her harmed so she went after her to redirect her into coming back to the facility. Ms. Jarrell was successful in returning Resident A.

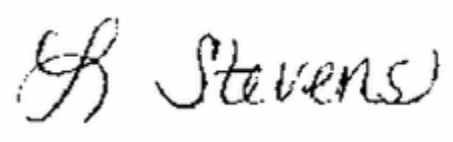
On 04/08/2025, I completed a telephone interview with Mrs. Porsha Lyles, Resident A's guardian via Family Cove Helpers. According to Mrs. Lyles Resident A is assigned a 1:1 staff due to her constantly running away from the facility. Mrs. Lyles stated she is notified regularly regarding Resident A's behavior. She stated Resident A would benefit from long-term inpatient housing. However, that is not available.

On 04/14/2025, I completed a telephone interview and exit conference with licensee designee, Corrissa Weaver. I asked Ms. Weaver who was the staff assigned to Resident A during her last elopement on 02/27/2025. Ms. Weaver indicated she was the staff assigned to Resident A. When asked where she was at the time of elopement, she stated she was "downstairs". Ms. Weaver indicated Resident A is assigned 1:1 staffing and staff should remain in eyesight of the resident. She further indicated she is aware of not complying with the staffing requirement at the time of the elopement. I informed Ms. Weaver this complaint will be substantiated because she failed to provide the supervision required for Resident A at the time of elopement. Ms. Weaver indicated she understood because this is what she tells her staff. I informed her a corrective action plan is required upon receipt of my report.

APPLICABLE RULE	
R 400.14303	**Resident care; licensee responsibilities.**
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	Licensee designee, Corrissa Weaver failed to provided supervision as specified in Resident A's assessment plan. Resident A is to receive 1:1 staffing with staff remaining in eyesight. Ms. Weaver indicated she was "downstairs" when Resident A eloped from the facility. Resident A's guardian indicated Resident A constantly elopes or attempts to elope. She stated she receives updates on a regular basis regarding Resident A's behavior. At the time of my inspection Resident A was attempting to elope. However, staff was present and actively redirecting her.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



04/15/2025

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LaKeitha Stevens Date
Licensing Consultant

Approved By:

04/16/2025

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Ardra Hunter Date
Area Manager