



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 3, 2025

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

RE: License #: AS820418926
Investigation #: 2025A0119025
Jackson Homes- Grayfield

Dear Ms. Weaver:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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) 456-0439.

Sincerely,

A handwritten signature in cursive script that reads "Shatonla Daniel".

Shatonla Daniel, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-3003

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS820418926
Investigation #:	2025A0119025
Complaint Receipt Date:	04/03/2025
Investigation Initiation Date:	04/04/2025
Report Due Date:	06/02/2025
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:	Jackson Homes- Grayfield
Facility Address:	12800 Grayfield Detroit, MI 48223
Facility Telephone #:	(586) 557-3413
Original Issuance Date:	02/04/2025
License Status:	TEMPORARY
Effective Date:	02/04/2025
Expiration Date:	08/03/2025
Capacity:	5
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
On 03/22/2025, Resident A left the home and was not supervised by her 1:1 Staff Precious Bass.	No

III. METHODOLOGY

04/03/2025	Special Investigation Intake 2025A0119025
04/03/2025	APS Referral
04/03/2025	Referral - Recipient Rights
04/04/2025	Special Investigation Initiated - Telephone APS investigator- Jodi Nicoletti
04/09/2025	Inspection Completed On-site Resident A, Administrator- Corrissa Weaver, Staff- Leah Jackson
05/16/2025	Contact - Telephone call made Resident A's DHHS case manager- Heather Hubert
05/19/2025	Contact - Telephone call made Staff- Precious Bass, left message
05/21/2025	Contact- Document Received Resident A's written assessment plan
05/22/2025	Exit Conference Licensee Designee- Corrissa Weaver

ALLEGATION:

On 03/22/2025, Resident A left the home and was not supervised by her 1:1 Staff Precious Bass.

INVESTIGATION:

On 04/04/2025, I telephoned and interviewed Adult Protective Service investigator Jodi Nicoletti regarding the above allegation. Ms. Nicoletti stated Resident A requires 1:1 staffing and was not provided with staffing once she left the home. She stated this allegation will be substantiated.

On 04/09/2025, I completed an unannounced onsite investigation and interviewed Administrator Corrisa Weaver, Staff Leah Jackson, and Resident A regarding the above allegation. Ms. Weaver stated Resident A does require 1:1 staffing since being admitted into the facility on 02/28/2025. She stated there was a verbal agreement with Detroit Wayne Integrated Health Network and she does not have written documentation. Ms. Weaver stated she has been providing 1:1 staffing for Resident A while in the facility. She stated staff did not go after Resident A once she left the facility. Ms. Weaver stated Resident A was observed getting into a car with an unknown person. Ms. Weaver stated Resident A spoke with her case manager early that day and told her case manager that she would be leaving and would return that evening. However, Ms. Weaver stated Resident A did not return until the next morning. Ms. Weaver stated a police report was made by the facility the next day. Ms. Weaver stated Resident A is a permanent court ward with the Michigan Department of Health and Human Services (MDHHS) with a case manager and not a guardian.

Ms. Jackson stated she is Resident A's 1:1 staff person today. She stated she is aware that she is supposed to stay with Resident A, prompting her to return home and encourage positive behavior. Ms. Jackson stated Resident A can usually receive verbal prompts well and that changes her behavior.

Resident A stated her 1:1 staff did not leave the home with her and she returned home the same night. Resident A stated she was only out of the home for 30 or so minutes. Resident A stated she previously left the home without staff going with her.

I received Resident A's individual plan of services (IPOS) from MiSide Community Impact Network dated 03/06/2025. Resident A's IPOS indicated Resident A needs assistance from staff for ADLs but does not indicate she needs and/or requires 1:1 staffing.

On 05/16/2025, I telephoned and interviewed Resident A's MDHHS case manager-Heather Hubert regarding the above allegation. Ms. Hubert stated she is no longer Resident A's case manager as of 04/30/2025. However, Ms. Hubert stated Resident A has been adjusting to living in an adult foster care setting while living in this home. Ms. Hubert stated Resident A has been doing better in an adult foster care setting thus far and she does not have any concerns about the care Resident A was receiving in the facility. Ms. Hubert stated she is unaware of Resident A being required to have 1:1 staffing while in this facility.

On 05/19/2025, I telephoned and attempted to interview Staff Precious Bass regarding the above allegations. To date, Ms. Bass has not contacted the department.

On 05/21/2025, I received Resident A written assessment plan dated 03/05/2025 which does not indicate that Resident A does not require 1:1 staffing at the facility.

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	<p>Administrator Corriッサ Weaver stated there was a verbal agreement with Detroit Wayne Integrated Health Network that Resident A receive 1:1 staffing but she does not have written documentation. Ms. Weaver stated she has been providing 1:1 staffing for Resident A in the facility.</p> <p>Resident A's individual plan of services (IPOS) from MiSide Community Impact Network dated 03/06/2025 indicated Resident A needs assistance from staff for ADLs but does not indicate she needs and/or requires 1:1 staffing. Resident A's written assessment plan dated 03/05/2025 does not indicate that Resident A does not require 1:1 staffing at the facility.</p> <p>MDHHS case manager Heather Hubert stated she was not aware that Resident A required 1:1 staffing at the facility.</p> <p>Therefore, Resident A's personal needs, including protection and safety have been attended to at all times by the facility.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

I recommend that the status of the license remains the same.



05/28/2025

Shatonla Daniel
Licensing Consultant

Date

Approved By:



06/03/2025

Dawn Timm
Area Manager

Date