



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 11, 2025

Leah Luca
39 Stark Rd
Rochester Hills, MI 48307

RE: License #: AF630417070
Sunshine Manor Rochester Hills
39 Stark Rd
Rochester Hills, MI 48307

Dear Leah Luca:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- An on-site inspection will be conducted.

A six-month provisional license is recommended. You have submitted documentation in writing indicating that you do not contest the issuance of a provisional license.

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) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Kristen Donnay".

Kristen Donnay, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd. Ste 9-100
Detroit, MI 48202
(248) 296-2783

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

I. IDENTIFYING INFORMATION

License #:	AF630417070
Licensee Name:	Leah Luca
Licensee Address:	39 Stark Rd Rochester Hills, MI 48307
Licensee Telephone #:	(248) 703-9495
Name of Facility:	Sunshine Manor Rochester Hills
Facility Address:	39 Stark Rd Rochester Hills, MI 48307
Facility Telephone #:	(248) 703-9495
Original Issuance Date:	12/20/2024
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/11/2025

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 0
No. of others interviewed 1 Role: Licensee

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
No residents in care
- Medication(s) and medication record(s) reviewed? Yes ☐ No ☒ If no, explain.
No residents in care
- Resident funds and associated documents reviewed for at least one resident?
Yes ☐ No ☒ If no, explain. No residents in care
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain.
No residents in care
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
No residents in care
- 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:
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:

MCL 400.713	License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.
	(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and (11), the department shall issue or renew a license if satisfied as to all of the following: (b) The applicant's compliance with this act and rules promulgated under this act.

Since the issuance of a temporary license on 12/20/24, no residents have been admitted to this licensed adult foster care facility. As there were no residents in care during the period under review, the department is not able to determine compliance with Act 218 or the adult foster care licensing rules related to resident care and services.

A corrective action plan was requested and approved on 06/11/2025. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan was received, issuance of a provisional license is recommended.



06/11/2025

Kristen Donnay
Licensing Consultant

Date