

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

July 16, 2025

Nelima Hazra 712 Hickory Street Niles, MI 49120

> RE: License #: AF110363351 Investigation #: 2025A1030040

> > Elijah AFC Home

Dear Ms. Hazra:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On 7/15/25, you submitted an acceptable written corrective action plan.

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 (616) 356-0100.

Sincerely,

Nile Khabeiry, Licensing Consultant

We Khaberry, LMSW

Bureau of Community and Health Systems

Unit 13, 7th Floor 350 Ottawa. N.W.

Grand Rapids, MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF110363351
Investigation #:	2025A1030040
Complaint Receipt Date:	07/09/2025
Investigation Initiation Date:	07/09/2025
Report Due Date:	09/07/2025
Liannaa Nama.	National Lawre
Licensee Name:	Nelima Hazra
Licensee Address:	712 Hickory Street
Licensee Address.	Niles, MI 49120
	141100, 1411 70120
Licensee Telephone #:	(269) 340-5113
	(233) 3.13 3.13
Administrator:	Nelima Hazra
Name of Facility:	Elijah AFC Home
Facility Address:	712 Hickory Street
	Niles, MI 49120
Facility Tallanda and H	(000) 040 4000
Facility Telephone #:	(269) 340-4999
Original Issuance Date:	11/16/2015
Original Issuance Date:	11/10/2013
License Status:	REGULAR
Effective Date:	05/16/2024
Expiration Date:	05/15/2026
Capacity:	5
Program Type:	MENTALLY ILL
	AGED

II. ALLEGATION(S)

Violation Established?

The facility did not provide toilet paper for the residents.	No
Additional Findings	No

II. METHODOLOGY

07/09/2025	Special Investigation Intake 2025A1030040
07/09/2025	Special Investigation Initiated - Telephone Interview with referral source
07/09/2025	Inspection Completed On-site Interview with Resident A
07/09/2025	APS Referral APS referral made
07/09/2025	Contact - Face to Face Interview with Resident B
07/15/2025	Exit Conference Exit conference on site

ALLEGATION:

The facility did not provide toilet paper for the residents.

INVESTIGATION:

On 7/1/25, I interviewed the RS by phone. The RS expressed some concerns about the facility as they do not provide toilet paper for the residents and mandate that each resident purchase their own.

On 7/8/25, I interviewed Resident A at the facility. Resident A reported she has lived at the facility for nine months. Resident A reported the facility does not provide toilet paper

and that she has always purchased her own. Resident A reported the other residents also purchase their own toilet paper.

On 7/8/25, I interviewed Resident B at the facility. Ms. Williams reported she has lived at the facility for two years and has always had to provide her own toilet tissue.

On 7/8/25, I interviewed the homeowner, Nelima Hazra at the facility. Ms. Hazra confirmed that she does not provide toilet tissue for the residents and indicated this has been going on for several years. Ms. Hazra reported the residents purchase cigarettes with their own money and believes they should be responsible for all their own toiletries. Ms. Hazra reported the residents are less wasteful if they have to provide their own. Ms. Hazra reported that she will give the residents toilet tissue if they run out or if it's an emergency. Ms. Hazra denied she ever documented this house rule in the residents' admissions paperwork but was willing to add that to the Resident Care Agreement if necessary.

APPLICABLE RULE		
R 400.1408	Resident care; licensee responsibilities.	
	(1) A licensee shall provide basic self-care and habilitation training in accordance with the resident's written assessment plan.	
ANALYSIS:	It was alleged that the facility did not provide toilet paper for the residents. Based on interviews this violation will be established. The residents indicated they have to purchase their own toilet tissue, which was confirmed by the homeowner, Ms. Harza. As toilet tissue is a basic need the facility was cited. Ms. Hazra agreed to corrective action plan to amend the resident's assessment plans and care agreements to reflect that the residents are responsible for supplying their own toilet tissue.	
CONCLUSION:	VIOLATION ESTABLISHED	

On 7/15/25, I shared the findings of the investigation with Ms. Harza. Ms. Harza acknowledged the findings and agreed to complete new assessment plans and care agreements to reflect this policy.

III. RECOMMENDATION

An acceptable corrective action plan has been received, therefore, no changes to the current license status is recommended.

We Khaberry, LMSW	
7	7/16/25
Nile Khabeiry	Date
Licensing Consultant	
Approved By:	
Russell Misias	7/17/25
Russell B. Misiak	Date
Area Manager	