



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 20, 2025

Damaris Derecichei
37841 Hazel Street
Harrison Charter Twp, MI 48045

RE: License #: AF500405462
Hazel Home
37841 Hazel Street
Harrison Charter Tow, MI 48045

Dear Ms. Derecichei:

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 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 (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(586) 676-2877

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

I. IDENTIFYING INFORMATION

License #:	AF500405462
Licensee Name:	Damaris Derecichei
Licensee Address:	37841 Hazel Street Harrison Charter Twp, MI 48045
Licensee Telephone #:	(586) 260-5121
Licensee/Licensee Designee:	N/A
Administrator:	N/A
Name of Facility:	Hazel Home
Facility Address:	37841 Hazel Street Harrison Charter Tow, MI 48045
Facility Telephone #:	(586) 690-8868
Original Issuance Date:	01/21/2021
Capacity:	6
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/18/2025

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

Date of Health Authority Inspection if applicable: 04/01/2025

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 4

No. of others interviewed 0 Role: N/A

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
I observed medications.
- Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident?
Yes ☒ No ☐ If no, explain.
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain.
I observed adequate food supply.
- Fire drills reviewed? Yes ☒ No ☐ If no, explain.
- 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.
There were no reportable incidents.
- 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:

R 400.1418

Resident medications.

(7) Prescription medication which is no longer required by a resident shall be destroyed after consultation with a physician or a pharmacist.

I observed that Resident A's Lorazepam 0.5mg PRN medication expired July 2023. The medication is no longer required.

R 400.1426

Maintenance of premises.

(1) The premises shall be maintained in a clean and safe condition.

I observed that the hot water temperatures below were not within range between 105 F and 120 F at resident accessible fixtures:

- Bathroom number one faucet registered at 128.7 degrees Fahrenheit.
- Bathroom number two faucet registered at 130 degrees Fahrenheit.

IV. RECOMMENDATION

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

L. Reed

06/20/2025

LaShonda Reed
Licensing Consultant

Date