

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

August 12, 2025

David Call Freedom Adult Foster Care Corp. PO Box 1588 Clarkston, MI 48347

RE: License #: AS630012344

Traci AIS Group Home 777 W. Predmore Oakland Township, MI 48363

Dear Mr. Call:

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 designee 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,

Johnna Cade, Licensing Consultant

Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100

3026 W. Grand Blvd Detroit, MI 48202

Johnse Cade

(248) 302-2409

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

#### I. IDENTIFYING INFORMATION

License #:	AS630012344
Licensee Name:	Freedom Adult Foster Care Corp.
Licensee Address:	3990 Bird Road
	Clarkston, MI 48348
Licensee Telephone #:	(248) 625-7923
Licensee Designee:	David Call
Administrator:	David Call
	David Gail
Name of Facility:	Traci AIS Group Home
Facility Address:	777 W. Predmore
	Oakland Township, MI 48363
Facility Telephone #:	(248) 693-7777
Original Issuance Date:	11/17/1982
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED

## **II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 08/12/2025	
Date of Bureau of Fire Services Inspection if applicable: N/A	
Date of Environmental/Health Inspection if applicable: 06/30/2025	
No. of staff interviewed and/or observed  No. of residents interviewed and/or observed  No. of others interviewed  1 Role: Licensee Designee	
Medication pass / simulated pass observed? Yes ⊠ No ☐ If no, exp	lain.
Medication(s) and medication record(s) reviewed? Yes ⊠ No ☐ If n	o, explain.
<ul> <li>Resident funds and associated documents reviewed for at least one re Yes ∑ No ☐ If no, explain.</li> <li>Meal preparation / service observed? Yes ∑ No ☐ If no, explain.</li> </ul>	sident?
● Fire drills reviewed? Yes ⊠ No □ If no, explain.	
• Fire safety equipment and practices observed? Yes ⊠ No ☐ If no, €	xplain.
<ul> <li>E-scores reviewed? (Special Certification Only) Yes ⋈ No ⋈ N/A ⋈ If no, explain.</li> <li>Water temperatures checked? Yes ⋈ No ⋈ If no, explain.</li> </ul>	]
Incident report follow-up? Yes ⊠ No ☐ If no, explain.	
<ul> <li>Corrective action plan compliance verified? Yes ☐ CAP date/s and ru N/A ☒</li> <li>Number of excluded employees followed-up? N/A ☒</li> </ul>	ıle/s:
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 400.14306	Use of assistive devices.
	(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.
	sessment plan indicates that she wears a gait belt. There was no le authorizing the use of a gait belt.
R 400.14310	Resident health care.
	(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
During the onsite on file for Reside	e inspection completed on 08/12/25, there were no weight records ent B in 2024.
R 400.14312	Resident medications.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
	gust 2025 Medication Administration Record indicates that she is illowing medications PRN. These medications were not onsite and ew:
<ul> <li>GNP Clear</li> </ul>	m 0.25 mg – take one tablet by mouth once a day as needed.  arlax Polyethylene paks – mix one packet in 8 oz of liquid and drink  as needed.
<ul> <li>Meloxican</li> </ul>	m 7.5 mg – take one tablet by mouth every day as needed.
R 400.14401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

During the onsite inspection completed on 08/12/25, I measured the hot water temperature using a digital thermometer. The following locations were out of the safe range:

Kitchen - 102 degrees Fahrenheit

Bathroom # 1 - 101.5 degrees Fahrenheit

Bathroom # 2 - 101.5 degrees Fahrenheit

R 400.14402	Food service.
	(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.
	approved informations.

The refrigerator and freezer in the basement were not equipped with approved thermometers.

R 400.14402	Food service.
	(6) Household and cooking appliances shall be properly installed according to the manufacturer's recommended safety practices. Where metal hoods or canopies are provided, they shall be equipped with filters. The filters shall be maintained in an efficient condition and kept clean at all times. All food preparation surfaces and areas shall be kept clean and in good repair.

During the onsite inspection completed on 08/12/25, the metal hood over the stove was not equipped with a filter.

R 400.14403	Maintenance of premises.
l l	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the onsite inspection completed on 08/12/25, I observed the following:

- The electrical outlet in the living room is bent.
- The back deck has warped boards, severely chipped paint, and structural gaps that attract nesting bees.

R 400.14408	Bedrooms generally.
	(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently

	mounted door that is equipped with positive-latching, non-locking-against-egress hardware.
During the onsite in	spection completed on 08/12/25, I observed that Resident A,
1	esident C's bedroom doors are not equipped with positive-
latching, non-lockin	g-against-egress hardware.
R 400.14410	Bedroom furnishings.
	(1) The bedroom furnishings in each bedroom shall include all of
	the following:
	(2) A resident bedroom shall be equipped with a mirror that is
Description of the second state in	appropriate for grooming.
_	espection completed on 08/12/25, I observed that Resident B, and
	oms are not equipped with a mirror that is appropriate for
grooming.	
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D 400 14507	Moans of ourses gonorally
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R 400.14507	(2) A means of egress shall be arranged and maintained to
During the onsite in	(2) A means of egress shall be arranged and maintained to provide free and unobstructed egress from all parts of a small group home.  spection completed on 08/12/25, I observed that the sliding glass
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During the onsite in door that leads outs	(2) A means of egress shall be arranged and maintained to provide free and unobstructed egress from all parts of a small group home.  spection completed on 08/12/25, I observed that the sliding glass
During the onsite in door that leads outs screen is loose and	(2) A means of egress shall be arranged and maintained to provide free and unobstructed egress from all parts of a small group home.  Is pection completed on 08/12/25, I observed that the sliding glass side to the deck is off track and difficult to open. Additionally, the
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#### IV. RECOMMENDATION

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

08/12/2025

Johnna Cade

Date

Licensing Consultant