



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 18, 2025

Michelle Harrison
32191 Staman Circle
Farmington Hills, MI 48336

RE: License #: AF630415174
Venetria Home
32191 Staman Circle
Farmington Hills, MI 48336

Dear Ms. Harrison:

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 or licensee designee and a date.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan in 15 days.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 black ink that reads "Sheena Worthy". The signature is written in a cursive style with a large, looping initial "S".

Sheena Worthy, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd, Suite 9-100
Detroit, MI 48202

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

I. IDENTIFYING INFORMATION

License #:	AF630415174
Licensee Name:	Michelle Harrison
Licensee Address:	32191 Staman Circle Farmington Hills, MI 48336
Licensee Telephone #:	(248) 470-2887
Licensee/Licensee Designee:	Michelle Harrison
Administrator:	N/A
Name of Facility:	Venetria Home
Facility Address:	32191 Staman Circle Farmington Hills, MI 48336
Facility Telephone #:	(248) 470-2887
Original Issuance Date:	03/24/2023
Capacity:	4
Program Type:	PHYSICALLY HANDICAPPED AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/04/2025

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 0

No. of residents interviewed and/or observed 0

No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
There are no residents in the home.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
There are no residents in the home.
- 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.
There are no residents in the home.
- 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.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
LSR dated 9/28/23; CAP approved 09/27/23; af422(1) af407(5) af407(2)
asec734b(2) af405(2) af440(5) 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.

During the onsite, there were no residents residing in the AFC group home. According to the resident register, there hasn't been a resident residing in the home since 10/16/24. There has only been a total of two residents admitted into the AFC group home since a temporary license was issued on 03/24/23. It should be noted that the resident register was incomplete as it only contained Resident B's information and not Resident A.

R 400.1405 Health of a licensee, responsible person, and member of the household.

(2) A licensee shall have on file with the department a statement signed by a licensed physician or his or her designee with regard to his or her knowledge of the physical health of the licensee and each responsible person. The statement shall be signed within 6 months

before the issuance of a license and at any other time requested by the department.

The licensee designee Michelle Harrison did not complete a physical for 2024. The licensee designee only provided a health care appraisal dated 01/18/23.

Mrs. Harrison husband, Douglas Harrison did not complete a physical for 2024. Mr. Harrison provided a health care appraisal dated 03/13/23.

Mrs. Harrison provided one physical for the responsible person Shanae Ford, however; the physical was not signed or dated by a physician.

REPEAT VIOLATION ESTABLISHED

Reference LSR dated 09/28/23; CAP dated 09/27/23

R 400.1407 Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(2) A licensee shall not accept or retain a resident for care unless and until a resident assessment plan is made and it is determined that the resident is suitable pursuant to the following provisions:

(a) The amount of personal care, supervision, and protection required by the resident is available in the home.

(b) The kinds of services and skills required of the home to meet the resident's needs are available in the home.

(c) The resident appears to be compatible with other residents and members of the household.

Resident B was admitted on 11/3/23, however; his assessment plan was not completed until 11/05/23.

R 400.1407 Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(3) In situations where a resident is referred for admission, the resident assessment plan shall be conducted in conjunction with the resident or the resident's designated representative, the responsible agency, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

Resident B is his own guardian and he did not sign his initial assessment plan.

**REPEAT VIOLATION ESTABLISHED:
Reference LSR dated 09/28/23; CAP dated 09/27/23**

R 400.1407 Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physician's instructions; health care appraisal.

(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.

During the onsite, Resident B's resident care agreement was missing the signature page.

**REPEAT VIOLATION ESTABLISHED:
Reference LSR dated 09/28/23; CAP dated 09/27/23**

R 400.1416 Resident healthcare.

(3) A licensee shall record the weight of a resident on admission and then monthly after that. Weight records must be maintained for 2 years.

According to Resident B's weight record, he was only weighed one time on 11/03/23.

R 400.1421 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department.

Resident B's funds part I was incomplete as section B was blank. The licensee designee Michelle Harrison did not sign or date the funds part I form.

R 400.1422 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:

(d) Health care information

Resident B's identification record did not include his health insurance information.

**REPEAT VIOLATION ESTABLISHED:
Reference LSR dated 09/28/23; CAP dated 09/27/23**

R 400.1431 Bedrooms generally.

(3) Interior doorways of bedrooms occupied by residents shall be equipped with a side-hinged, permanently mounted door equipped with positive-latching, non-locking-against-egress hardware.

During the onsite, the door located in Bedroom #1 was difficult to close completely, which prevented a proper positive latching.

R 400.1438 Emergency preparedness; evacuation plan; emergency transportation.

(4) Fire drills shall be conducted 4 times a year. Two of the 4 required fire drills shall be conducted during sleeping hours. A record of the fire drills shall be incorporated with the evacuation plan.

There was only one fire drill completed during sleeping hours in 2024.

R 400.1416 Resident health care.

(4) A licensee shall make a reasonable attempt to contact the resident's next of kin, designated representative, and responsible agency by telephone, followed by a written report to the resident's designated representative and responsible agency within 48 hours of any of the following;

(a) The death of a resident.

Resident A passed away on 12/01/23. An incident report was not completed.

IV. RECOMMENDATION

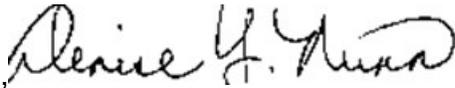
Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



Sheena Worthy
Licensing Consultant

09/09/25
Date

Approved by:



Denise Y. Nunn
Area Manager

09/18/2025
Date