



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

June 11, 2025

Bianca Wilson  
Umbrellex Behavioral Health Services, LLC  
13854 Lakeside Circle Ste  
Sterling Heights, MI 48313

RE: License #: AS380418753  
**Umbrellex 200**  
**340 E Euclid Ave**  
**Jackson, MI 49203**

Dear Bianca Wilson:

This letter is a follow-up to the Department's findings regarding the interim inspection conducted at your facility on 06/10/2025. The purpose of this inspection was to determine compliance with applicable licensing statutes and administrative rules for an Adult Foster Care small group home.

The violations that were found are:

**R 330.1803 Facility environment; fire safety.**

(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3- month period.

There was no record to demonstrate that fire drills had been conducted during the daytime and evening hours, in the first quarter of 2025.

Please Note: In licensed AFC homes, it is expected that residents participate in emergency evacuation procedures. If a resident is refusing to participate in the fire drill on a particular day, it's recommended that the drill be rescheduled for a different date within the quarter.

Technical assistance was provided regarding the duration of fire drills, and how to time the drills, as for one drill, staff documented that it took longer than 20 minutes to evacuate the residents.

**R 330.1803                    Facility environment; fire safety.**

- (6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 months from the date of the finding to do either of the following:
  - (a) Improve the score to at least the "slow" category.

The information documented on the E-Score assessments were inaccurate and incomplete.

According to the Community Mental Health for Central Michigan, PCP Addendum, Resident A was approved to be admitted into the facility on April 17, 2025.

A review of the E-Score assessments, which included Resident A's name, reflected that the assessments were completed on February 16, 2025, which was prior to Resident A being admitted into the facility.

Based on the documents submitted, it was also noted that the E-Score assessments were not completed within 30-days of admission for Resident A.

**R 400.14208                    Direct care staff and employee records.**

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:
  - (a) Name, address, telephone number, and social security number.
  - (b) The professional or vocational license, certification, or registration number, if applicable.
  - (c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.
  - (d) Verification of the age requirement.
  - (e) Verification of experience, education, and training.
  - (f) Verification of reference checks.
  - (g) Beginning and ending dates of employment.

- (h) Medical information, as required.
- (i) Required verification of the receipt of personnel policies and job descriptions.

The employee record, for Employee #1, was not available for review.

**R 400.14210 Resident register.**

A licensee shall maintain a chronological register of residents who are admitted to the home.

The register shall include all of the following information for each resident:

- (a) Date of admission.
- (b) Date of discharge.
- (c) Place and address to which the resident moved, if known.

The Resident Register was not available for review.

**R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**

(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions:

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

There were locks observed on the refrigerator, and staff reported that all residents, except for Resident B had keys to the locks. According to facility staff, this modification was contained within the written assessment plan for Resident B. However, there was no documentation provided to support the information reported.

**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.

The weight records for Resident B were not available for review.

**R 400.14312          Resident medications.**

(2) Medication shall be given, taken, or applied pursuant to label instructions.

Resident B's medications and MARS were reviewed. The medication count was off, by one day, for Resident B's Risperdal.

**R 400.14315          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.

The *Resident Funds Part I & Part II* forms were not contained within the file for Resident B.

**R 400.14402          Food service.**

(2) All food shall be protected from contamination while being stored, prepared, or served and during transportation to a facility.

There were boxes of chips stored on the floor in the basement of the facility.

**R 400.14403          Maintenance of premises.**

(13) A yard area shall be kept reasonably free from all hazards, nuisances, refuse, and litter.

The facility grass was long and not maintained. There was a plastic bag, paper plates, and other litter observed in the yard.

The stairs leading to the facility required repair or replacement as one step was cracked and missing cement in one spot, causing the step to be uneven.

**R 400.14403            Maintenance of premises.**

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

The material on the ceiling of exterior back porch was in poor condition and required repair or replacement.

**R 400.14505            Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions, and changes of category.**

(4) Detectors shall be tested, examined, and maintained as recommended by the manufacturer.

One smoke detector in the basement was beeping and required a new battery.

Due to the violations identified in the report, **a written corrective action plan** is required. 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 time frames 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 responsible party and a date.

A follow-up inspection may be made to verify compliance. Should the corrections not be made in the specified time, it may be necessary to reevaluate the status of your license.

The Department provides technical assistance to meet the licensing requirements and consultation to improve services.

Please 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 (517) 335-5985.

Sincerely,

A handwritten signature in black ink that reads "Mahtina Rubritius". The signature is written in a cursive style with a large initial 'M'.

Mahtina Rubritius, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa  
P.O. Box 30664  
Lansing, MI 48909  
(517) 262-8604

Enclosures