



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 20, 2025

Keyarra Powell
Genuine Home Care LLC
6164 Coolidge
Dearborn Heights, MI 48127

RE: License #: AS820418748
Ross Home
25937 Ross St
Inkster, MI 48141

Dear Keyarra Powell:

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 or home for the aged authorized representative 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 (313) 456-0439.

Sincerely,

A handwritten signature in cursive script that reads "Shatonla Daniel".

Shatonla Daniel, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-3003

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

I. IDENTIFYING INFORMATION

License #: AS820418748

Licensee Name: Genuine Home Care LLC

Licensee Address: 6164 Coolidge
Dearborn Heights, MI 48127

Licensee Telephone #: (313) 588-1350

Licensee/Licensee Designee: Keyarra Powell

Administrator: Keyarra Powell

Name of Facility: Ross Home

Facility Address: 25937 Ross St
Inkster, MI 48141

Facility Telephone #: (313) 395-2140

Original Issuance Date: 04/16/2025

Capacity: 3

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/15/2025

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 1
No. of others interviewed 1 Role: Licensee Designee

- Medication pass / simulated pass observed? Yes No If no, explain.
Full inspection completed
- 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.
Resident was sleeping
- 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:
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 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.

At the time of inspection, licensee designee failed to completed and properly calculate evacuation assessment within 30 days after an admission and at least annually for Residents A- B.

R 330.1806 Staffing levels and qualifications.

- (2) All staff who work independently and staff who function as lead workers with clients shall have successfully completed a course of training which imparts basic concepts required in providing specialized dependent care and which measures staff comprehension and competencies to deliver each client's individual plan of service as written. Basic training shall address all the following areas:
- (a) An introduction to community residential services and the role of direct care staff.
 - (b) An introduction to the special needs of clients who have developmental disabilities or have been diagnosed as having a mental illness. Training shall be specific to the needs of clients to be served by the home.
 - (c) Basic interventions for maintaining and caring for a client's health, for example, personal hygiene, infection control, food

preparation, nutrition and special diets, and recognizing signs of illness.

(d) Basic first aid and cardiopulmonary resuscitation.

(e) Proper precautions and procedures for administering prescriptive and nonprescriptive medications.

(f) Preventing, preparing for, and responding to, environmental emergencies, for example, power failures, fires, and tornados.

(g) Protecting and respecting the rights of clients, including providing client orientation with respect to the written policies and procedures of the licensed facility.

(h) Non aversive techniques for the prevention and treatment of challenging behavior of clients.

At the time of inspection, Staff- Valencia Thompson and Staff- April Turner employee records reviewed did not contain special certification training in all areas.

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

At the time of inspection, Staff -Valencia Thompson employee records reviewed did not contain a statement that is signed by a licensed physician or their designee attesting to the physician's knowledge of the physical health within 30 days of employment.

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in

the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

At the time of inspection, Staff -Valencia Thompson employee records reviewed did not contain tested for communicable tuberculosis at the time of hire.

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:

(f) Verification of reference checks.

At the time of inspection, Staff -Valencia Thompson employee records reviewed did not contain verification of two reference checks.

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

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

At the time of inspection, Resident A's record reviewed did not contain written assessment signed by their guardian in 2025.

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

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

(a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.

(b) A description of services to be provided and the fee for the service.

(c) A description of additional costs in addition to the basic fee that is charged.

(d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.

(e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.

(f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.

(g) An agreement by the resident to follow the house rules that are provided to him or her.

(h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.

(i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.

(j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.14315.

(k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.

(l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.

At the time of inspection, Resident A's record reviewed did not contain a statement that Resident A will use \$100 in food stamps for communal purposes despite the facility not being a non-profit organization.

R 400.14303

Resident care; licensee responsibilities.

(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.

At the time of inspection, Resident A requires 2:1 staffing for 24 hours a day. During the inspection, there was two staff present but not providing 2:1 staffing by visible monitoring Resident A. I reviewed the staffing requirements with staff and one staff continued to sit in the living room without monitoring Resident A.

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.

At the time of inspection, Resident B's record reviewed did not contain weight records for the month of June 2025.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

At the time of inspection, licensee failed to practice and maintain a record of fire drills for sleeping hours during second and third quarters in 2025.

R 400.14401 Environmental health.

(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.

At the time of inspection, I observed cleaning products and other dangerous materials being stored under the kitchen sink.

R 400.14403 Maintenance of premises.

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

At the time of inspection, I observed the following:

- Dirty, spillage, and grime in the bottom on the refrigerator.
- Loose wires hanging behind resident bedroom door.

IV. RECOMMENDATION

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

Shatonla Daniel

10/20/2025

Shatonla Daniel
Licensing Consultant

Date