



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 24, 2026

Danielle Landers  
21294 Osmus Street  
Farmington Hills, MI 48336

RE: License #: AF630419461  
Health Land Assisted Living  
21294 Osmus Street  
Farmington Hills, MI 48336

Dear Danielle Landers:

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 "Kristen Donnay". The signature is written in a dark ink and is positioned below the word "Sincerely,".

Kristen Donnay, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3026 W. Grand Blvd. Ste 9-100  
Detroit, MI 48202  
(248) 296-2783

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AF630419461
<b>Licensee Name:</b>	Danielle Landers
<b>Licensee Address:</b>	21294 Osmus Street Farmington Hills, MI 48336
<b>Licensee Telephone #:</b>	(248) 971-9005
<b>Name of Facility:</b>	Health Land Assisted Living
<b>Facility Address:</b>	21294 Osmus Street Farmington Hills, MI 48336
<b>Facility Telephone #:</b>	(248) 971-9005
<b>Original Issuance Date:</b>	09/24/2025
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/21/2026

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 1

No. of residents interviewed and/or observed 1

No. of others interviewed 1 Role: Licensee

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- 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.  
Inspection did not occur during meal time
- 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:

<b>R 400.639</b>	<b>Staff records.</b>
	<p>(1) A licensee shall maintain a record for each staff that contains all of the following:</p> <ul style="list-style-type: none"> <li>(a) Name, address, telephone number, and Social Security number.</li> <li>(b) Copy or number of a professional or vocational license, certification, or registration if staff provides professional or vocational services.</li> <li>(c) Copy of a driver's license if staff provide transportation services.</li> <li>(d) Verification of age.</li> <li>(e) Verification of experience, highest level of education completed, and training.</li> <li>(f) Verification of not less than 2 reference checks. If reference checks cannot be obtained, documentation verifying reference checks were attempted must be maintained.</li> <li>(g) Beginning and ending dates of employment on separation.</li> <li>(h) Health information as required by these rules.</li> <li>(i) Verification of the receipt by the staff of personnel policies and job descriptions.</li> </ul>

During the onsite inspection, the licensee did not have an employee file for Amonn Landers that included the required information, including reference checks, verification of education and training, health information, or verification of receipt of personnel policies and job descriptions.

<b>R 400.645</b>	<b>Environmental health.</b>
	<p>(3) A licensee shall provide hot and cold running water under pressure. 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 fixture.</p>

During the onsite inspection, the water temperature was measured at 136°F.

<b>R 400.647</b>	<b>Safety and maintenance of premises.</b>
	<p>(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</p>

During the onsite inspection, there was a lock on the resident's bedroom closet door that was not non-locking against egress. The living room ceiling had signs of water damage and was not maintained in good repair.

<b>R 400.663</b>	<b>Nutrition; adoption by reference.</b>
	(4) Meals must meet the nutritional allowances recommended by the United States Department of Agriculture and the United States Department of Health and Human Services in the Dietary Guidelines for Americans (DGA), 2020-2025. The Dietary Guidelines for Americans 2020-2025 are adopted by reference and available to be viewed or downloaded from the U.S. Department of Agriculture and the U.S. Department of Health and Human Services at <a href="https://www.dietaryguidelines.gov">https://www.dietaryguidelines.gov</a> at no cost at the time of adoption of these rules. A copy of these guidelines is available for inspection and distribution from the Bureau of Community and Health Services, Department of Licensing and Regulatory Affairs, at 611 West Ottawa Street, P.O. Box 30664, Lansing, Michigan 48909 at a cost of 15 cents per page as of the time of the adoption of these rules.

During the onsite inspection, it could not be determined if the nutritional guidelines were being followed, as menus were not being updated to reflect the meals served in the home. The posted menu was not detailed and did not include fruits, vegetables, or other side dishes being served.

<b>R 400.663</b>	<b>Nutrition; adoption by reference.</b>
	(6) Menus, excluding special diets, must be written at least 1 week in advance and posted. Any change or substitution must be documented.

During the onsite inspection, the menus were not being written one week in advance or updated to reflect changes made.

<b>R 400.675</b>	<b>Resident medications.</b>
	(1) Medication must be given, taken, or applied as prescribed, ordered, or directed by an appropriately licensed health care professional.

During the onsite inspection, it could not be determined if medications were being given as prescribed. Resident A's evening bubble pack of Lurasidone HCL 80mg tab had a start date of 04/02/26, but there were 22 pills popped out at the time of the onsite inspection on 04/21/26. Resident A's morning bubble packs did not note a start date and had 15 pills popped out at the time of the onsite inspection on

04/21/26. Resident A moved into the home on 03/25/26, but medications were not delivered from the pharmacy until 04/02/26. Resident A was taking the medications she brought with her to the home from 03/25/26-04/02/26.

<b>R 400.675</b>	<b>Resident medications.</b>
	(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

During the onsite inspection, there was no reason recorded for each administration of Resident A's PRN medication, Trazadone.

<b>R 400.675</b>	<b>Resident medications.</b>
	(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident: (d) Initiate a review process to evaluate a resident's condition if a resident requires the repeated and prolonged use of a medication that is prescribed on an as-needed basis. The review process must include the resident's prescribing licensed health care professional and resident, resident's designated representative, and responsible agency if applicable.

Resident A's April 2026 medication administration record (MAR) shows that she was receiving Trazadone on a prolonged basis, as she received it daily from 04/02/26-04/21/26. There was no documentation showing a review process was initiated to evaluate the prolonged use of the PRN.

<b>R 400.729</b>	<b>Heating equipment.</b>
	(2) A furnace, water heater, heating appliances, pipes, wood-burning stoves and furnaces, and other flame- or heat-producing equipment must be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and maintained in a safe condition. Clothes dryers must be properly vented to the outside using permanent metal duct work.

During the onsite inspection, the dryer was not vented with smooth or semi-rigid metal duct work.

<b>R 400.731</b>	<b>Flame-producing equipment; enclosures.</b>
	(2) Heating plants and other flame-producing equipment located on the same level as the residents must be enclosed in a room that is constructed of material that has a 1-hour-fire-resistance rating and has a door made of 1-3/4-inch solid core wood. The door must be hung in a fully stopped wood or steel frame and must be equipped with an automatic self-closing device and positive-latching hardware.

During the onsite inspection, the door to the heat plant room was very difficult to open and did not fully stop and latch when closed.

<b>R 400.737</b>	<b>Means of egress.</b>
	(3) Doors that form a part of a required means of egress must be equipped with positive-latching, non-locking-against-egress hardware and have a width to allow for residents requiring wheelchairs or other devices to easily navigate through doorways.

During the onsite inspection, the egress doors were not equipped with non-locking against egress hardware.

<b>R 400.741</b>	<b>Fire extinguishers.</b>
	A minimum of one 5-pound multi-purpose fire extinguisher or equivalent must be provided for use in a facility on each occupied floor and in the basement.

During the onsite inspection, the fire extinguishers in the home were not 5-pound extinguishers.

#### IV. RECOMMENDATION

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

*Kristen Donnay*

04/24/2026

Kristen Donnay  
Licensing Consultant

Date