



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 3, 2026

Andrew Akunne
Joak American Homes, Inc.
Unit A
3879 Packard Road
Ann Arbor, MI 48108

RE: License #: AS820237919
Our Lady's Home
3054 Inkster Road
Inkster, MI 48141

Dear Andrew Akunne:

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) 456-0380.

Sincerely,

A handwritten signature in black ink, appearing to read 'Denasha Walker'.

Denasha Walker, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 300-9922

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

I. IDENTIFYING INFORMATION

License#: AS820237919

Licensee Name: Joak American Homes, Inc.

Licensee Address: Unit A
3879 Packard Road
Ann Arbor, MI 48108

Licensee Telephone #: (734) 973-7764

Licensee/Licensee Designee: Andrew Akunne

Administrator: Andrew Akunne

Name of Facility: Our Lady's Home

Facility Address: 3054 Inkster Road
Inkster, MI 48141

Facility Telephone #: (313) 565-6967

Original Issuance Date: 02/27/2003

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/03/2026

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 5

No. of others interviewed 1 Role: area manager

- Medication pass / simulated pass observed? Yes No If no, explain.
A full worksheet inspection was 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.
- 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:
CAP Dated 5/28/2024 R330.1803 (1), R400.14205 (3), R400.14205 (5),
R400.14315 (3) 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 400.647 Safety and maintenance of premises.

(16) Yard areas must be kept reasonably free from hazards, nuisances, refuse, and litter.

At the time of inspection, I observed hazardous debris piled up in the backyard including an old tub, two old commodes, vacuums, dry rotted chair and old building material.

R 400.675 Resident medications.

(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:

(b) Complete an individual medication log that contains all of the following:

(i) Medication name.

(ii) Dosage.

(iii) Label instructions for use.

(iv) Time to be administered.

(v) Initials of the individual who administered the medication at the time given.

(vi) Resident's refusal to accept prescribed medication or procedures at time of refusal.

At the time of inspection, Resident A's medication administration records (MARs) did not contain the initials of the individual who administered the medication at the time given.

The medications were as follows:

- Risperidone Tab 3mg, take one tablet by mouth once daily; was not initialed on 03/31/2026 at 8:00 a.m.

- Sertraline HCL 50mg tablet, take one tablet by mouth daily was not initialed on 03/31/2026 at 8:00 a.m.

R 400.685 Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.

At the time of inspection, Resident A's health care appraisal was not completed within the 90-day period before admission. Resident A was admitted on 11/20/2025; her health care appraisal was dated 12/16/2025. Resident A was not an emergency admission.

R 400.691 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(g) Admission and monthly weight record.

At the time of inspection, Resident A 's resident file did not contain a weight recorded for 03/2026.

R 400.715 Facility environment; fire safety, adoption by reference.

(1) A facility that has a capacity of 4 to 6 residents shall be equipped with an interconnected multi-station smoke detection system that is powered by the facility's electrical service. When activated, the system must initiate an alarm that is audible in all

areas of the facility. The smoke detection system must be installed on all levels, including basements, common activity areas, and outside each sleeping area, excluding crawl spaces and unfinished attics, to provide full coverage of the facility. The system must include a battery backup to ensure that the system is operable if there is an electrical power failure and accommodate the sensory impairments of residents living in the facility, if needed. A fire safety system must be installed in accordance with the manufacturer's instructions by a licensed electrical contractor and inspected annually. A record of the inspections must be maintained at the facility for 2 years.

At the time of inspection, the smoke detection system was not interconnected and powered by the household electrical service.

***DUPLICATE VIOLATION* LSR DATED 05/06/2024 CAP DATED 05/28/2024.**

R 400.727 Smoke detection equipment for family home and small group home with 6 or less residents after March 27, 1980.

(3) If batteries are used as a source of energy, the batteries must be replaced in accordance with the recommendations of the alarm equipment manufacturer.

At the time of inspection, the smoke detector batteries were not replaced in accordance with the recommendations of the alarm equipment manufacturer, the smoke detector in the living room was chirping.

IV. RECOMMENDATION

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



04/03/2026

Denasha Walker
Licensing Consultant

Date