



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

May 8, 2026

Jasmine Boss  
JARC  
Suite 100  
6735 Telegraph Rd  
Bloomfield Hills, MI 48301

RE: License #: AS630300830  
**Nusbaum Home**  
**29420 Minglewood**  
**Farmington Hills, MI 48334**

Dear Ms. Boss:

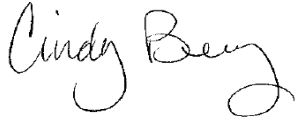
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Cindy Berry".

Cindy Berry, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3044 West Grand Blvd  
2<sup>nd</sup> Floor Annex, Suite 2-730  
Detroit, MI 48202  
(248) 860-4475

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

**I. IDENTIFYING INFORMATION**

**License #:** AS630300830

**Licensee Name:** JARC

**Licensee Address:** Suite 100  
6735 Telegraph Rd  
Bloomfield Hills, MI 48301

**Licensee Telephone #:** (248) 940-9617

**Licensee Designee:** Jasmine Boss

**Administrator:** Jasmine Boss

**Name of Facility:** Nusbaum Home

**Facility Address:** 29420 Minglewood  
Farmington Hills, MI 48334

**Facility Telephone #:** (248) 539-4616

**Original Issuance Date:** 08/10/2009

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/06/2026

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 2

No. of others interviewed 0 Role: N/A

- 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.
- 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 5/23/2024, R 403(5), 403(1); CAP dated 10/23/2024 305(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 400.631                      Health screenings.**

(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.

Staff member Monique Mobley's physical health statement was completed more than 30 days prior to her employment start date.

**R 400.631                      Health screenings.**

(5) A licensee shall maintain documentation of a baseline screening for communicable diseases and records of illness on hiring. Staff who have direct physical contact with residents or resident food may perform those duties only when they are noninfectious or when proper precautions are taken to prevent the spread of a communicable disease. A licensee shall follow a staff's health care professional or local health department guidance on controlling the spread of a communicable disease when identified.

Staff member Gloria Welsing had a positive TB skin test reading in 2025. I did not observe any other medical documentation in her employee file stating further testing/clearance had been completed.

**R 400.637                      Handling of resident funds and valuables.**

(4) A licensee shall record in the resident record a resident funds and itemized transactions including payment for services provided for each resident.

The itemized transactions on Resident A's funds part 2 form were not consistent with the receipts reviewed.

**R 400.647                    Safety and maintenance of premises.**

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

- The caulking behind the kitchen sink contained a black substance.
- Resident C's bathroom floor near the shower contained a white powdery substance that appeared to be from a recent drywall repair.

**R 400.663                    Nutrition; adoption by reference.**

(5) A resident who has a prescribed diet by an appropriately licensed health care professional shall be provided that diet.

Resident C's health care appraisal documented that she is on a diabetic diet but there is nothing documenting this on the resident menus.

**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:

- (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

Resident A's PRN medication Tylenol 325 mg appeared as being administered (exact date unknown) as there were pills missing from the blister pack but there was no reason documented for the administration.

**R 400.675                    Resident medications.**

(7) Prescription medication that is no longer required by a resident or expired must be properly disposed of.

Resident A's medication Polyethylene glycol 3350 was documented as discontinued on the medication administration record but the medication remained with her current medication.

**R 400.691**

**Resident records.**

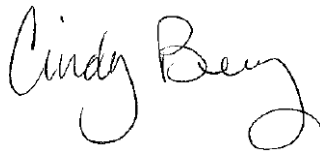
(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:

(g) Admission and monthly weight record.

Resident A's weight was not documented for the month of November 2024.

**IV. RECOMMENDATION**

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



5/08/2026

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Cindy Berry  
Licensing Consultant

Date