



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

May 15, 2026

Josephine Uwazurike  
Kevdaco Human Services LLC  
PO Box 4199  
Southfield, MI 48037

RE: License #: AS820305891  
**Prestige Home**  
**5892 Second**  
**Romulus, MI 48174**

Dear Josephine Uwazurike:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit a Statement of Correction.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 Place, 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 #:** AS820305891

**Licensee Name:** Kevdaco Human Services LLC

**Licensee Address:** Suite 200  
23999 Northwestern Hwy  
Southfield, MI 48075

**Licensee Telephone #:** (248) 722-5004

**Licensee/Licensee Designee:** Josephine Uwazurike

**Administrator:** Josephine Uwazurike

**Name of Facility:** Prestige Home

**Facility Address:** 5892 Second  
Romulus, MI 48174

**Facility Telephone #:** (734) 331-3777

**Original Issuance Date:** 06/01/2011

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
AGED  
TRAUMATICALLY BRAIN INJURED  
ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/14/2026

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 0

No. of others interviewed 2 Role: Area Managers

- 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.  
All residents were at program.
- 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 05/29/2024 R330.1803 (3), R330.1803 (6)(a), R400.14301 (10),  
R 40014301 (9), R 400.14312 (4)(b), R 400.14403 (1). 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 400.629                      Direct care staff; qualifications and training.**

(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:  
(b) First aid.

At the time of inspection, direct care staff, Oluchi Ndukuba employee file did not contain verification of first aid.

**R 400.629                      Direct care staff; qualifications and training.**

(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:  
(c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training.

At the time of inspection, direct care staff Oluchi Ndukuba employee file did not contain verification of cardiopulmonary resuscitation training.

**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.

At the time of inspection, direct care staff, Oluchi Ndukuba employee file did not contain a statement signed by a licensed physician or physician's designee attesting to her physical health within 30 days of employment.

**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.

At the time of inspection, direct care staff, Oluchi Ndukuba employee file did not contain a baseline screening for communicable diseases.

**R 400.639                    Staff records.**

(1) A licensee shall maintain a record for each staff that contains all of the following:  
(e) Verification of experience, highest level of education completed, and training.

At the time of inspection, direct care staff, Oluchi Ndukuba employee file did not contain verification of education.

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

(14) Handrails and nonskid surfacing must be installed in showers and bath areas.

At the time of inspection, the resident bathroom on the second level was not equipped with nonskid surfacing throughout the shower and bath area.

**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, the yard was not free from debris; old dressers/bureaus were observed in the backyard.

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

(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.

At the time of inspection, the resident bureau/dressers were not orderly in appearance. The drawers remain ajar, will not properly close and are missing handles/knobs.

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

(6) Plumbing fixtures and water and waste pipes must be properly installed and maintained in good working condition.

At the time of inspection, the plumbing was not in good working condition in the resident bathroom. The shower in the main resident bathroom was leaking. The handheld showerhead was observed in a bucket, partially filled with water.

**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, Residents A and B resident files did not contain a monthly weight record for 01/2025, 02/2025 or 03/2025.

**R 400.731                    Flame-producing equipment; enclosures.**

(1) If the heating plant is in the basement, standard building material may be used for the floor separation. Floor separation must also include at least 1-3/4-inch solid core wood door or equivalent equipped with an automatic self-closing device to create a floor separation between the basement and the first floor.

At the time of inspection, the heating plant was not equipped with at least 1-3/4-inch solid core wood door or equivalent equipped with an automatic self-closing device to create a floor separation.

The door at the heating plant was a National Fenestration Rating Council (NFRC) 100/200. NFRC 100 measures the U-factor (insulating value), while NFRC 200 measures the Solar Heat Gain Coefficient (SHGC) and Visible Transmittance (VT).

**IV. RECOMMENDATION**

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



05/15/2026

---

Denasha Walker  
Licensing Consultant

Date