



STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING



JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

October 11, 2010

Tracie Hernandez
Cornerstone II, Inc
P. O. Box 277
Bloomington, MI 49026

RE: Application #: AS800309333
Cornerstone House
22722 M-43
Kalamazoo, MI 49009

Dear Ms Hernandez:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (269) 337-5066.

Sincerely,

Donna Konopka, Licensing Consultant
Bureau of Children and Adult Licensing
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 337-5241

Enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AS800309333
Applicant Name:	Cornerstone II, Inc
Applicant Address:	44409 Baseline Rd. Bloomingtondale, MI 49026
Applicant Telephone #:	(269) 628-2100
Administrator/Licensee Designee:	Tracie Hernandez
Name of Facility:	Cornerstone House
Facility Address:	22722 M-43 Kalamazoo, MI 49009
Facility Telephone #:	(269) 668-7070
Application Date:	07/12/2010
Capacity:	6
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

07/12/2010	Enrollment
07/15/2010	Contact - Document Sent Rules & Act booklets
07/16/2010	Inspection Report Requested - Health Inv. #1017639
07/16/2010	Application Incomplete Letter Sent Record clearance for Tracie
07/27/2010	Contact - Document Received Received clearance for Tracie
08/05/2010	Application Incomplete Letter Sent
09/22/2010	Inspection Completed On-site
09/27/2010	Inspection Completed On-site
09/29/2010	Contact - Document Received
10/11/2010	Inspection Completed – Environmental Health: A Report received

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single story structure with a walkout basement located on a secluded rural lot off of a 2 lane highway at 22722 M-43 in Kalamazoo, MI. The facility has 3 bedrooms on the main floor which will be used for resident use. Each bedroom has adequate usable floor space to accommodate 2 residents in each bedroom. The floor plan and exact measurements are on file. Bedroom #3 contains a full bathroom within the room, which will be only for the use of residents in bedroom #3. There is a full bathroom in the hallway near bedrooms #1 and #2, which will be primarily utilized by the residents of those bedrooms. The facility has 353 square feet of living space on the main floor for resident use. Measurements are on file. The walkout basement contains 2 bedrooms and a large living space that is being utilized by 2 live-in staff and their 2 children.

The gas fired furnace and water heater are located in the basement in a 1 hour rated fire enclosure. The furnace and water heater were inspected by Double D Heating & Cooling on 09/20/10 and after some minor repairs were made, were determined to be in good working condition. Hammond Electric Co. conducted an electrical inspection on

09/16/10 and after repairs the electrical system was found to be in satisfactory working condition. The inspection reports are on file.

The facility has private water and septic systems. The Environmental Health Inspection Report from the Van Buren Co. Health Department gave the facility an "A" rating on 09/29/10. An "A" rating indicates substantial compliance with applicable environmental health safety rules.

The licensing consultant conducted an initial fire safety inspection on 09/22/10. Substantial compliance with applicable fire safety rules was determined in a follow-up inspection on 09/27/10. Approved Fire Protection Co. conducted an inspection of the interconnected smoke alarm system on 09/17/10 and the system was found to be in working order. Documentation was submitted to verify that the basement ceilings tiles were Class A rated.

B. Program Description

Cornerstone House will provide personal care, supervision and protection to male and female residents between the ages of 18 and 99 years old. Program type includes mentally ill, developmentally disabled and traumatic brain injured populations. Wheelchair bound residents are not accepted as the facility is not wheelchair accessible. The licensee has submitted Admission and Discharge policies which will be followed by the facility. Local transportation will be provided.

Cornerstone II, Inc. was formed on 10/07/02 in Michigan. Tracie Hernandez is the resident agent for the corporation. Other members of the corporation include John Hernandez, Joel Green and Rosario Serratos. The corporation is in good standing with the Michigan Department of Energy, Labor and Economic Growth as of 04/06/10. Ms. Hernandez has been appointed Licensee Designee and Administrator for the facility. The organizational chart shows John and Tracie Hernandez as the owners.

Cornerstone II, Inc. is leasing the property from Tom Diamond and a signed lease agreement is on file. A 2010 tax statement is on file showing Mr. Diamond as owner of the property. Mr. Diamond has given written permission for licensing to conduct inspections on the property.

Tracie Hernandez has been designated as the Licensee Designee and Administrator for the facility by Cornerstone II, Inc., which has also appointed her to those positions for Cornerstone and Cornerstone II AFC, which have been licensed since 2010 and 2004 respectively. Ms. Hernandez holds those same positions for several other adult foster care group homes operated by the Hernandez family under separate licensee corporations. Ms. Hernandez has her qualifications documented and on file to serve in these capacities. She has owned and operated adult foster care facilities for over 15 years. The Licensing Record Clearance for Ms. Hernandez revealed no criminal history for her. The Licensing Medical Clearance indicated Ms. Hernandez was in compliance with the applicable licensing rules.

Cornerstone House will have live-in staff and shift staff as needed. Sonny and Nancy Rodriguez will be the live-in direct care staff and they have 2 minor children that will also be residing in the home. Their living quarters are in the walkout basement level of the structure. Ms. Hernandez stated that shift staff will be employed to provide awake supervision in the home during the overnight period. There will be at least 1 direct care staff on duty in the facility at all times residents are in the home; additional staffing will be provided if required to meet specialized programming contract terms. As Ms. Hernandez has applied to provide specialized programming, all staff will be trained through approved Department of Community Health training programs.

Ms. Hernandez stated she was familiar with the licensing requirements for maintaining resident and employee records and has demonstrated compliance with the rules in the other adult foster care facilities she operates.

The applicant is found to be in substantial compliance with the licensing act and applicable administrative rules.

IV. RECOMMENDATION

Based on the findings it is recommended that a temporary license be issued. The terms of the license will enable the licensee to operate an adult foster care small group home for 6 residents. The terms of the license will be for a six month period effective 10/11/10.

Donna Konopka

10/11/10

Donna Konopka
Licensing Consultant

Date

Approved By:

Gregory V. Corrigan

10/11/2010

Gregory V. Corrigan
Area Manager

Date