

RICK SNYDER GOVERNOR State of Michigan DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN DIRECTOR

July 21, 2011

Marion Griffin Metro Care Group LLC C/O Marion Griffin PO Box 1815 Dearborn, MI 48121

> RE: Application #: AS500307423 Nummer House 20965 Nummer Warren, MI 48089

Dear Mr Griffin:

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 the capacity of six is approved.

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 (248) 975-5053.

Sincerely,

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Ruth McMahon, Licensing Consultant Bureau of Children and Adult Licensing 39531 Garfield Clinton Township, MI 48038 (586) 228-4705

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500307423		
Applicant Name:	Metro Care Group LLC		
Applicant Address:	16708 Huntington		
	Detroit, MI 48219		
Applicant Telephone #:	(313) 537-3784		
Licensee Designee:	Marion Griffin		
Administrator:	Gail Griffin		
Name of Facility:	Nummer House		
Facility Address:	20965 Nummer		
	Warren, MI 48089		
Facility Telephone #:	(586) 771-5369		
Application Date:	04/05/2010		
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Capacity:	6		
Program Type:	AGED and ALZHEIMERS		

II. METHODOLOGY

04/05/2010	Enrollment
04/08/2010	Contact - Document Received Licensing file received from Central Office on 4/8/2010.
04/09/2010	Application Incomplete Letter Sent
05/19/2010	Contact - Face to Face
05/02/2011	Contact - Document Received
05/19/2011	Application Incomplete Letter Sent
05/26/2011	Inspection Completed On-site
05/26/2011	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Nummer home is located in Warren, Michigan in Macomb County. Mr. Marion Griffin owns the property and is also the Licensee Designee. Proof of ownership and permission to enter was submitted by Mr. Griffin.

The Nummer House is a large two story home with a brick exterior. The home has a large covered front porch that can be used by residents. The home has a large fenced in back yard, with a shed that will be used for storage. The yard can be used by the residents for recreational activities. The home is not approved for wheel chairs.

The home has a two car attached garage, a closed in back sunroom with surrounding windows on the first floor. The home has a deck outside off of the second floor kitchen that can be used by the residents. A gate has been placed at the top of the stairs to the deck to safeguard the residents. Mr. Griffin stated that the residents will not be allowed out on the deck without a staff present.

The home has a basement, which contains the hot water heater, laundry, a furnace, a full bathroom, storage room, a large room that can be used for resident activities. The basement is approved for residents use, because the basement has an exit that leads directly to the outside.

The first floor has a large living room, a dining area, kitchen, a full bathroom and three resident bedrooms.

The second floor has two resident bedrooms, a kitchen, a full bath, a furnace, with two additional rooms which may be used for a live-in staff. At this point a live in staff has not been hired. The room will not be used for residents.

Resident bedrooms were measured at the time of final inspection and were found to be of the following dimensions and accommodation capability:

Location First Floor:	Measurements	Dimensions	Capacity
South	11'7" x 10'5"	120.6 sq. ft.	1
Middle	11'7" x 10'5"	120.6 sq. ft.	1
North	13'6" x 10'1"	136.0 sq. ft.	1
Second Floor:			
Southeast	14'11" x 10'2"	143.2 sq. ft.	1
Northeast	14.11 x 12.11"	192.7 sq. ft.	2

Total Occupancy: 6

The home has public water and public sewage services through the City of Warren.

The home has a living room that measures $13'3" \times 19'.1"$ equals 252.8 sq. feet, plus 9'6" x 5'8" = 53.77 sq. ft. The total space for the living room is 306.5 square feet. The dining area measures 9'10" x 9'1" x = 89.2 square feet. The home has a glass enclosed porch off the kitchen that can be used for residents. It measures 8'5" x 11'3" equals 94.7 square feet. The home has a total of 436.35 sq. feet of living space on the first floor. Based upon the above measurements, there will be more than the required 35 square feet per resident minimal living space available for the residents of the home. The proposed capacity for the home is six

The second floor of the home has two resident bedrooms, a full bath, a kitchen, and an apartment unit that may be used by a live-in staff.

The bedrooms were properly furnished, clean, and neat. Each bedroom has an easily operable window with screen, a mirror for grooming and a chair. The bedrooms all have adequate closet space for the storage of clothing and personal belongings. The bedrooms also have adequate lighting to provide for the residents.

The bathroom areas are equipped with required non-skid surfacing and handrails, to assure resident safety in the maintenance of personal hygiene. The bathrooms were

equipped with soap and paper towels for hand washing. I also observed that the facility was equipped with all required furnishings, linens, cooking and eating utensils.

I reviewed the facility's emergency procedures, which contain written instructions to be followed in case of fire and medical emergency. Evacuation routes were also posted in the facility, with emergency telephone numbers posted in proximity to the telephone. The home had its emergency preparedness plans posted as required. The home has emergency medical services available through the City of Warren. Fire drill records will be maintained by Marion Griffin the Licensee Designee. Mr. Griffin has indicated that it is the corporation's intent to conduct fire drills during the day, afternoon, and sleep hours on a quarterly basis, as well as to maintain a record of these fire drills and resident performance during such drills.

Based upon the above observations and information, I found this facility to be in substantial compliance with administrative rules pertaining to emergency preparedness and fire safety.

Mr. Griffin has installed a Wireless Interconnected smoke alarm system. This Alarm System has been approved by the City of Warren.

Mr. Griffin provided me with a letter from the Division of Buildings and Safety Engineering from the City of Warren. They inspected the building, the electrical, plumbing, mechanical and zoning during the period from April 2009 through February 2010. The letter states that the building/residential structure is approved as meeting the minimum standards of the City of Warren's 2003 Property Maintenance Code and is suitable as a habitable dwelling.

Marion Griffin submitted a copy of the program statement to for review and inclusion in the licensing record. The document is acceptable as written. The facility will offer a program for six aged, female or male adults, who are 60 years or older and who require 24 hour supervision. The home is not equipped to serve people who require wheelchair use.

The home's objectives are listed as:

To provide the residents with a maximum number of opportunities to exercise personal choice

For residents to experience personal growth

For the residents to develop the capacity for meeting the normal challenges of daily living to the extent that their individual potential and abilities allow, develop self-reliance.

On 04/05/2010 a license application and application fee was received from Mr. Marion Griffin, acting on behalf of the Metro Group LLC to operate a small group AFC facility at the above referenced address in Warren, Michigan. The corporation is a domestic profit corporation. The filing endorsement from the Department of Energy, Labor, and

Economic Growth has a filing date of March 10, 2010. The applicant corporation is seeking to operate a program for adult women and men who are developmentally disabled and/or mentally ill.

A Record Clearance, a medical and TB test have been submitted for both Gail Griffin, the administrator/home manager and Marion Griffin, the Licensee Designee.

As part of the application process the applicant submitted admission and discharge policies for Metro Care Home LLC. The documents are acceptable as written. Included in the documents was a proposed staffing pattern, a current lease, a floor plan with room use and size specifications, and current financial documents.

As part of the licensing process, the Mr. Griffin presented the corporate personnel policies, routine procedures, and job descriptions for review. The documents are kept in the home and are available for review.

The administrative structure for Nummer House is Marion Griffin Licensee Designee, Gail Griffin the administrator. Gail Griffin has designated Marion Griffin as the person to act on behalf of the administrator if she is not available. Gail Griffin will also act as the home manager.

Mrs. Griffin has submitted her training, a resume which details her experience with the populations identified in the Admissions policy. Mrs. Griffin has experience with the elderly and with individuals who are diagnosed with Alzheimer's. Mrs. Griffin took care of her elderly family members and a friend. Mrs. Griffin is currently employed as a direct care staff in a licensed small group home.

The Griffin's plan to hire and train staff as the home's capacity increases.

Fire drill records will be maintained. Marion Griffin has indicated that it is the corporation's intent to conduct fire drills during the day, afternoon, and sleep hours on a quarterly basis, as well as to maintain a record of these fire drills, and resident performance during such drills.

Marion Griffin understands requirements pertaining to resident records, resident rights and prohibited practices. Marion Griffin understands requirements pertaining to incident and accident reports, safeguarding and distributing of prescription medication, investigating and reporting abuse and neglect to Adult Protective Services and Licensing.

Marion Griffin is aware of the rules relating to resident recreation and intends to comply through an activity schedule for the home, which will expose the residents to a variety of community based recreation and leisure time activities.

Marion Griffin is aware of the requirements regarding emergency and regular transportation.

Individuals, who are interested in placement in the Nummer House, should contact Mr. Griffin for an interview.

The home is in compliance with all applicable rules.

IV. RECOMMENDATION:

I recommend issuance of a temporary license to the AFC adult small group home with capacity of 6.

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Ruth McMahon Licensing Consultant

07/21/2011 Date

Approved By:

Denice J. Munn

07/21/2011

Denise Y. Nunn Area Manager Date