



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

June 14, 2012

Threasa Barnes
Loving Joy Assisted Living, Inc.
1089 Dyemeadow Lane
Flint, MI 48532

RE: Application #: AS250317731
Loving Joy Assisted Living, Inc.
1089 Dyemeadow Lane
Flint, MI 48532

Dear Mrs. Barnes:

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 (248) 975-5053.

Sincerely,

Lisa Gundry, Licensing Consultant
Bureau of Children and Adult Licensing
4809 Clio Road
Flint, MI 48504
(810) 931-1220

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS250317731

Applicant Name: Loving Joy Assisted Living, Inc.

Applicant Address: 1089 Dyemeadow Lane
Flint, MI 48532

Applicant Telephone #: (810) 213-7161

Administrator/Licensee Designee: Threasa Barnes, Designee

Name of Facility: Loving Joy Assisted Living, Inc.

Facility Address: 1089 Dyemeadow Lane
Flint, MI 48532

Facility Telephone #: (810) 407-6687

Application Date: 03/20/2012

Capacity: 6

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
AGED
ALZHEIMERS
PHYSICALLY HANDICAPPED

II. DESCRIPTION OF FINDINGS & CONCLUSIONS

03/20/2012	Enrollment
03/29/2012	Application Incomplete Letter Sent
05/17/2012	Inspection Completed On-site
06/13/2012	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The Loving Joy Assisted Living, Inc. home is an immaculate three bedroom home located at 1089 Dyemeadow Lane Flint, MI 48532 in Genesee County. The home is located in a well-established subdivision on a large lot. The physical plant is a one-story brick-sided structure with a large partly-finished basement. It consists of a large living room, a dining room, kitchen, and three resident bedrooms. The main floor has two and a half bathrooms. The main bathroom has a large shower area and is located in the main hallway by the bedrooms. Each bedroom has a closet or wardrobe. The facility has adequate storage areas. There is an attached garage which may be used for additional storage areas. There is a driveway with adequate parking for staff and visitors.

The home has a furnace and hot water heater, which are located in the basement. Floor separation is achieved by a 1¾ inch solid core door equipped with an automatic self-closing device and positive latching hardware. The laundry facilities are located on the main floor. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational.

The facility has a municipal water and sewer system.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
Bedroom 1	13'11 X 15'11	221	2
Bedroom 2	14' x 10'7	148	2
Bedroom 3	11'7 x 11'4	131	2

The home has a large living room. The total living area square footage measures 427 sq. feet. This amount meets the requirements of this rule.

The dining area measures 11'10 x 12'11 which is 152 square feet. This area can comfortably seat six (6) residents. The living room measures 289 square feet. This exceeds the minimum of 35 square feet per resident requirement.

Compliance with Rule 400.14410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were beautifully furnished, clean, and met all applicable rules relating to environmental and fire safety requirements.

The home has two separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30 inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

The home has fire extinguishers, which meets the requirements of R 400.14506. The bedrooms have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.1502, R 400.14503, and R 400.14504.

Based on the above information, it is concluded that this facility can accommodate **six (6)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

A. Program Description

The applicant, Loving Joy Assisted Living, Inc. submitted a copy of the required documentation to the consultant. Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to **six (6)** male or female ambulatory adults whose diagnoses are Mentally Ill, Aged, Alzheimer's, Developmentally Disabled, or Physically Handicapped, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

Loving Joy Assisted Living, Inc. will ensure that the resident's transportation and medical needs are met. Loving Joy Assisted Living, Inc. has transportation available for residents to access community-based resources and services. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

B. Rule/Statutory Violations

On 3/21/2012, Loving Joy Assisted Living, Inc. submitted an application to provide foster care services to six adults at 1089 Dyemeadow Lane Flint, MI 48532.

The applicant, Loving Joy Assisted Living, Inc., which is a "Domestic Nonprofit Corporation", was established in Michigan, on 9/9/2008. The corporation is an experienced adult foster care provider, who currently operated as a previous adult foster care facility in Michigan. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

Loving Joy Assisted Living, Inc. submitted a written statement naming Threasa Barnes as the licensee designee and as the facility administrator. Ms. Barnes submitted a licensing record clearance request that was completed with no LEIN convictions recorded. She also submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. Ms. Barnes has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff 1-to-6 resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org), L-1 Identity Solutions™ (formerly Identix®), and the related documents required to be maintained in each employees record to demonstrate compliance.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can

administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee's file.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

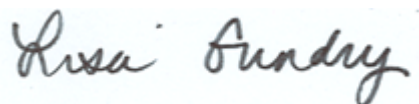
The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

D. Rule and Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).

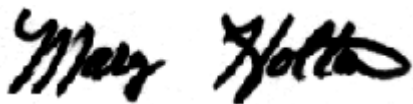


6/14/2012

Lisa Gundry
Licensing Consultant

Date

Approved By:



6/14/2012

Mary Holton
Area Manager

Date