



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

December 10, 2012

John Cornack
Moriah Incorporated
3200 E Eisenhower
Ann Arbor, MI 48108

RE: Application #: AS810321336
The Loft of Manchester
8737 M-52
Manchester, MI 48158

Dear Mr. Cornack:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined full 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 (517) 241-2585.

Sincerely,

Karen Davis, Licensing Consultant
Bureau of Children and Adult Licensing
301 E. Louis Glick Hwy
Jackson, MI 49201
(517) 262-8574

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS810321336
Applicant Name:	Moriah Incorporated
Applicant Address:	3200 E Eisenhower Ann Arbor, MI 48108
Applicant Telephone #:	(734) 677-0070
Administrator	Christine Myran
Licensee Designee:	John Cornack
Name of Facility:	The Loft of Manchester
Facility Address:	8737 M-52 Manchester, MI 48158
Facility Telephone #:	(734) 677-0070
Application Date:	05/16/2012
Capacity:	6
Program Type:	TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

05/16/2012	Enrollment
05/17/2012	Inspection Report Requested - Health
05/25/2012	Application Complete/On-site Needed T/C with Christine Myran she is not ready for an inspection to date. She stated that she would be ready for the inspection by the end of June 2012. She stated she would follow-up with a letter giving the specific time frame she would be ready.
09/14/2012	Inspection Completed-Env. Health : A
10/02/2012	Inspection Completed On-site
10/10/2012	Inspection Completed – BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Lofts of Manchester is located in a rural area at 8737 M-52, Manchester, Michigan, 48158. The facility is an updated 100 year old two story wood/brick barn. The facility grounds has farm animals and several acreage of farm land. There is ample parking for staff and visitors.

The facility has five bedrooms and 1 and 1/2 baths. The main floor has two bedrooms, large bathroom with shower and separate bathtub. The bathtub will not be utilized by the residents and a statement has been submitted by the licensee. The kitchen and dining area are connected. The dining area will seat eight individuals. There is a large great room with pool table and seating area for watching television or activities. The laundry room is on the main floor. There are two means of egress on the main floor - the main entrance and side door off the kitchen. The second floor has three bedrooms with a half bath. There are two means of egress, the new outside stairway and the main stairs. The home utilizes a private water supply and sewage disposal system.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. The gas furnace and water heater is housed in a cellar that is not connected to the facility. The enclosed furnace area is equipped with a 1-3/4 inch solid core door with automatic self-closing device and positive latching hardware. The furnace area has a smoke detector. There are fire extinguishers on the main level and second level of the facility.

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	15' x 9'4"	141	1
Bedroom 2	24'2" x 14' 8.5"	358.16	2
Bedroom 3	11'8" x 11' 8"	139.4	1
Bedroom 4	11' 8" x 11' 7.5"	138.06	1
Bedroom 5	12'11" x 12'3"	184.96	1

The indoor living and dining areas measure a total of **575** square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

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

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to six (6) ambulatory male and/or female residents who are traumatically brain-injured. The program will include social interaction; personal adjustment, public safety and independent living skills; and opportunity for involvement in educational programs, day programs, gardening, employment and transportation. The applicant intends to accept referrals from the Veterans Administration or residents with private sources for payment.

The residence is a fully renovated barn with tall open rooms and external stairs. Residents admitted to the home will be assessed for ability to safely navigate up and down the 26 feet tall external stairway to the ground from the second floor.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including library, local museums, shopping centers, and churches. These resources provide an environment to enhance the quality of life and increase the independence.

C. Applicant and Administrator Qualifications

The applicant is Moriah, Inc., a For Profit Corporation established in Michigan on 06/10/1993. 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.

The Board of Directors of Moriah, Inc. has submitted documentation appointing John Cornack as licensee designee and Christine Myran as the administrator of the facility.

Criminal history background checks of John Cornack and Christine Myran were completed and they were determined to be of good moral character to provide licensed adult foster care. The licensee and administrator submitted statements from a physician documenting her good health and current negative tuberculosis test results.

John Cornack and Christine Myran provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Myran is an occupational therapist licensed by the State of Michigan. She has worked at the Eisenhower Center for 15 years in various capacities. Ms. Myran is a certified brain injury specialist.

The staffing pattern for the original license of this six (6) bed facility is adequate and includes a minimum of two (2) staff for six (6) residents per shift. The applicant acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The applicant has indicated that direct care staff will be awake during sleeping hours.

John Cornack and Christine Myran acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

John Cornack and Christine Myran acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

John Cornack and Christine Myran acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by Christine Myran, licensee to 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.

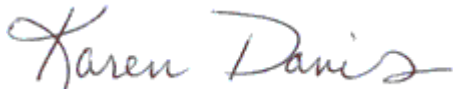
John Cornack and Christine Myran acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition,

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care family home with a capacity of six (6).



12/10/2012

Karen Davis
Licensing Consultant

Date

Approved By:



12/10/12

Betsy Montgomery
Area Manager

Date