



RICK SNYDER  
GOVERNOR

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



MAURA D. CORRIGAN  
DIRECTOR

February 20, 2013

Karen LaFave  
Adult Learning Systems - UP, Inc  
290 Rublien St, Suite F  
Marquette, MI 49855

RE: Application #: AS520326257  
Superior Home  
651 West Spring Street  
Marquette, MI 49855

Dear Ms. LaFave:

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 (906) 226-4171.

Sincerely,

Laura Dupras, Licensing Consultant  
Bureau of Children and Adult Licensing  
234 W. Baraga Ave.  
Marquette, MI 49855  
(906) 290-3428

enclosure

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

**I. IDENTIFYING INFORMATION**

**License #:** AS520326257

**Applicant Name:** Adult Learning Systems - UP, Inc

**Applicant Address:** 290 Rublien St, Suite F  
Marquette, MI 49855

**Applicant Telephone #:** (906) 228-7370

**Administrator/Licensee Designee:** Karen LaFave, Designee  
Debra Upson Administrator

**Name of Facility:** Superior Home

**Facility Address:** 651 West Spring Street  
Marquette, MI 49855

**Facility Telephone #:** (906) 228-6622  
06/11/2012

**Application Date:**

**Capacity:** 6

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

## II. METHODOLOGY

01/25/2012	Contact - Document Received Received required policies, procedures, program statement and house rules.
06/11/2012	Enrollment
06/19/2012	Application Incomplete Letter Sent needs fingerprints for Karen and Debra
01/18/2013	Application Complete/OFS Needed
01/25/2013	Inspection Completed On-site Received all permits and deeds
01/25/2013	Inspection Completed-BCAL Full Compliance
01/31/2013	SC-Application Received - Original

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The home was newly built and passed the final right to occupy inspection on 01/10/2013. This is single level home located on a dead end street. The home has 6 bedrooms, 2 handicap accessible bathrooms and a full basement.

The 6 bedrooms run the length of the far wall making them visible from the kitchen and living room. All of the bedrooms measure 11' x 11', they have a large closet and a window. They are furnished with a bed, matching dresser and night stand.

The home is very open allowing you to see every room in the home without obstruction. The living room/ dining room area measures 33' x 14' 6", the kitchen is 14' x 9', and the bathrooms are located one on each end of the home. The laundry room is located on the main floor of the facility. There are 2 means of egress on the main floor with a ramp at each exit.

The basement is fully finished. There is a bathroom, staff office, conference room, nurse's office, doctor's office and a large recreation room that measures 31'6" x 14'. The heat plant is fully enclosed with self-latching door equipment. There are 2 means of egress from the basement but the basement is not handicap accessible.

The facility is located in close proximity to the hospital, library and other community agencies.

## **B. Program Description**

The Superior Home is owned by Adult Learning Systems -UP, with Karen LaFave being appointed the Licensee Designee and Debra Upson is the Administrator. Superior Crisis Residential (SCR) is a 6 bed, special residential treatment program for person 18 years of age and older. "SCR is designed to provide a short term alternative to inpatient psychiatric services for individuals experiencing acute psychiatric crisis. Services may only be used to avert a psychiatric admission, or to shorten the length of an inpatient stay."(SCR program description) The length of the stay will depend on the needs of the individual but the intention is to use the facility for 3-14 days.

The facility will be staffed 24 hours a day with direct care staff. There will be a nurse on site for 1 hour per resident a day and on call 24 hours a day. There will be a psychiatrist available on call 24 hours a day. The nurses and the psychiatrist have an office on site but their hours on site will vary day to day.

Discharge planning starts the day the resident arrives at the facility. There will be individual and group treatment conducted by the trained staff. There is a set of house rules that each resident will be required to adhere to in order to stay in the facility.

A licensing record clearance was completed with no LEIN convictions recorded for Ms. LaFave and Ms. Upson. Ms. LaFave and Ms. Upson each submitted a medical clearance request document which includes a current negative TB result, and that there are no physical or mental health condition existing that would limit her ability to work with or around vulnerable adults.

Ms. LaFave and Ms. Upson both acknowledged an understanding of the requirements to maintain this category license type. She also acknowledges an understanding of the required documentation to be completed and signed for each resident prior to admission and for each employee prior to starting work in the facility. Ms. Lafave has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, the resident information or both.

Ms. LaFave and Ms. Upson acknowledged 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.

Ms. LaFave and Ms. Upson acknowledged the 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 volunteers and the retention schedule for all of the documents contained within the employee's file.

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

Ms. LaFave and Ms. Upson acknowledged the 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 the 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.

A walk through of the facility determined that the facility is in compliance with fire safety and environmental health rules.

### **C. Rule/Statutory Violations**

The facility was in substantial compliance of the rules.

## **IV. RECOMMENDATION**

A six month temporary license is recommended for this Small group home with a capacity of 6 residents.



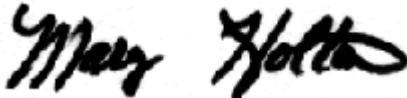
February 20, 2013

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Laura Dupras  
Licensing Consultant

Date

Approved By:



February 20, 2013

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Mary E Holton  
Area Manager

Date