



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

February 25, 2014

Nanci and Stephen Lubinski
13893 Ridgewood Drive
Holland, MI 49424

RE: Application #: AF700355378
Moving Forward
14861 Blair
Holland, MI 49424

Dear Nanci and Stephen Lubinski:

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 contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

Ian Tschirhart, Licensing Consultant
Bureau of Children and Adult Licensing
Unit 13, 7th Floor
350 Ottawa, NW
Grand Rapids, MI 49503
(616) 644-9526

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF700355378

Applicant Name: Nanci and Stephen Lubinski

Applicant Address: 13893 Ridgewood Drive
Holland, MI 49424

Applicant Telephone #: (616) 786-9860

Administrator/Licensee Designee: N/A

Name of Facility: Moving Forward

Facility Address: 14861 Blair
Holland, MI 49424

Facility Telephone #: (616) 836-0875

Application Date: 01/07/2014

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED, MENTAL ILLNESS, TRUAMATIC BRAIN INJURY

II. METHODOLOGY

| | |
|------------|---|
| 01/07/2014 | Enrollment |
| 01/22/2014 | Contact - Document Received 1326 for Rhianna Lubinski (Responsible Person) |
| 01/28/2014 | Inspection Report Requested - Health 1022582 |
| 01/28/2014 | PSOR on Address Completed |
| 01/31/2014 | Application Complete/On-site Needed |
| 01/31/2014 | File Transferred To Field Office Grand Rapids |

| | |
|------------|---|
| 02/10/2014 | Inspection Completed-Env. Health : A |
| 02/13/2014 | Inspection Completed On-site |
| 02/13/2014 | Inspection Completed-BCAL Full Compliance |

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Moving Forward is located at 14861 Blair Road in Holland, Michigan, which is in Ottawa County. The zip code is 49424. The facility is a two-story home with sage green vinyl siding with cream trim. There is an attached two-car garage, a detached two-car garage, and a detached wooden shed. All of these structures appear to be in good, clean, safe condition. The home sits on about an acre and a half to two acres, and the land is slightly hilly with several trees. The landscaping, driveway, and walkway are all in good condition. The licensees, Nanci L. and Stephen M. Lubinski, have submitted a Rental Agreement that shows that they are renting this home; they have also submitted written permission for this dwelling to be inspected.

Moving Forward is a very large home with very large living spaces. There are three bedrooms in the basement, along with a full bath, a living area, a large storage/recreation area and a furnace/water heater room. The licensees have had the water heater and furnace serviced. The door to the furnace/water heater room is a 1 ¾ inch solid core door equipped with a self-closing device and positive latching hardware. There is an emergency escape egress in the basement that leads directly to ground level outside, as it is a walk-out basement. The upper level of the home will be used by the residents, but is primarily the living space for the licensees, Michael and Nanci Lubinski. The home is equipped with interconnected smoke detectors, which are located in each bedroom, near the kitchen, and in the common area of the basement. The smoke detectors were tested on 2/13/2014 and worked appropriately. There is an operable A-B-C fire extinguisher on each floor, including the basement and are easily accessible. Evacuation routes are placed on the walls in conspicuous places, and emergency telephone numbers are posted next to the home's telephone.

The home uses private water and sewage services. A sanitarian from the Ottawa County Department-Environmental Health performed an inspection on 2/11/2014. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

| Bedroom # | Room Dimensions | Total Square Footage | Total Resident Beds |
|-----------|-----------------|----------------------|---------------------|
| 1 | 13'10" X 12'1" | 167 | 2 |
| 2 | 13'2" X 11'5" | 150 | 2 |
| 3 | 12'3" X 11'5" | 139 | 2 |

Total Capacity: 6

The living, dining, family room, and recreation areas measure a total of 1327 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The kitchen has all the necessary cooking and eating utensils, and has a garbage can with a tight-fitting lid.

There are handrails at all of the interior and exterior stairs and in the bathtub used by the residents.

Caustics used in the home will be kept in the laundry room in a cupboard high off the floor and away from the food preparation area. A cabinet that has a lock on it will be used to store the residents' medications.

All of the furniture, appliances, equipment, etc. are clean and in good condition. The overall maintenance and cleanliness of the home is good.

A telephone is available for residents to use. Telephone numbers for emergency services is posted near the telephone.

B. Program Description

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 18 to 60 years old whose diagnosis is developmentally disabled and/or mental illness or Traumatic Brain Injured (TBI), in the least restrictive environment possible. The applicant has submitted an application to be specially certified for the developmentally disabled population simultaneously with the application for an adult foster care license. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support 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.

The licensee will provide all transportation for program and medical needs and a first aid kit will be kept in the vehicle. 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.

C. Applicant and Administrator Qualifications

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee designee, who is also the administrator. The licensee designee/administrator submitted a medical clearance request with a statement from a physician documenting their good health and current TB-tine negative results.

The licensee designee/administrator has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Nanci and Stephen Lubinski own and operate another Family AFC Home, Ridgewood, since 1990. That license will be closed before the license for Moving Forward is issued.

The licensees have named Rhianna Lubinski as their responsible person, who will operate the home in the absence of the licensees.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift.

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 –to- 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 applicant understands the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to be maintained in each employee’s 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/Statutory Violations

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

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small/large group home (capacity 6).



February 18, 2014

Licensing Consultant

Date

Approved By:



February 18, 2014

Jerry Hendrick
Area Manager

Date