



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

December 23, 2014

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

RE: Application #: AS310367108
Paradise House
45224 Paradise Road
Chassell, MI 49916

Dear Mr. Cornack:

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 #:	AS310367108
Applicant Name:	Moriah Incorporated
Applicant Address:	3200 E Eisenhower Ann Arbor, MI 48108
Applicant Telephone #:	(734) 677-0070
Licensee Designee: Administrator Name of Facility:	John Cornack, Designee Robert Knoch Paradise House
Facility Address:	45224 Paradise Road Chassell, MI 49916
Facility Telephone #:	(906) 481-1210
Application Date:	10/14/2014
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

10/14/2014	Enrollment
10/17/2014	Contact - Document Received Packet given to consultant
11/05/2014	Contact - Telephone call received Spoke to Rob. Environmental scheduled for 11/13/2014
11/10/2014	Application Incomplete Letter Sent
11/13/2014	Inspection Completed-Environmental Health : D
11/14/2014	Email received Received required documents
11/21/2014	Inspection Completed On-site
12/09/2014	Email received Received final required documents and pictures of the required changes for full compliance
12/10/2014	Inspection Completed-Environmental Health : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The home is a 2 story home owned by Moriah Incorporated who has been providing adult foster care for many years in Lower Michigan (Washtenaw County). This is a new Adult Foster Care home licensed for 6 residents located in Upper Michigan (Houghton County). The Licensee Designee is John Cornack and the Administrator is Robert Knoch. The facility is handicap accessible with 2 approved means of egress on the main floor fully equipped with wheelchair ramps.

The home is located in a quiet country setting on Paradise Road in Chassel MI. The home is about 10 minutes from case management agencies, medical, dental, psychological and psychiatric services. The community hospitals, shopping centers and recreational opportunities are all reasonably close to the home. The home is a six bedroom home giving each resident a private bedroom.

There are 3 bedrooms on the main floor and 3 bedrooms on the ground floor.

Main Floor rooms include:

Bedroom 1 10' 10" x 14' 6" or 147 sq. feet

Bedroom 2 13' 3" x 15' 6" or 207 sq. feet

Bedroom 3 16' x 14' or 224 sq. feet this bedroom also has a private bathroom.

Main floor living room: 24' x 14' 8" or 355 sq. feet

Dining room 13' 7" x 11' 3" or 154 sq. feet

Lower level rooms include:

Bedroom 4 15' 9" x 13' 11" or 208 sq. feet

Bedroom 5 9' 9" x 13' 11" or 129 sq. feet

Bedroom 6 10' 6" x 14' 6" or 154 sq. feet

Living room/ common area 21' 9" x 26' 5" or 508 sq. feet

There is a multipurpose room available for resident use that is 14' 9" x 11' 10" or 165 sq. feet.

There are bathrooms located on both floors that are barrier free.

The furnace is located in the basement and fully enclosed with the appropriate fire safety requirements.

B. Program Description

The facility provides 24-hour supervision, protection and personal care for up to 6 residents over the age of 18 who are physically handicapped or have a traumatic brain injury. There will be at least 1 staff person on duty at all times.

The program will emphasize and encourage involvement in meaningful, purposeful activities of life at any care level and/or needs of the residents. The program will also promote dignity for all residents and focus on the importance of maintaining as much independence as possible, while offering quality care that is personalized for each individual's needs. The residents have access to the community and are encouraged as much independence as they are capable.

The facility has been found in full compliance with fire safety and environmental health.

A licensing record clearance was completed with no LEIN convictions. The facility has submitted medical clearance request documents which include current negative TB results and that there is no physical or mental health conditions existing that would limit their ability to work with or around vulnerable adults.

The applicant acknowledge an understanding of the requirements to maintain this category license type. They also acknowledge 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. The applicant has provided documentation to satisfy the qualifications and training requirements identified in the small 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.

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 applicants has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained. The applicant acknowledges 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 applicants acknowledge 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.

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 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.

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.

C. Rule/Statutory Violations

The facility was found to be in substantial compliance with licensing rules.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this small adult foster care home with a capacity of 6 residents.

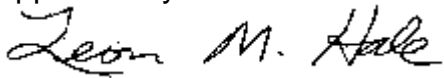


12/22/14

Laura Dupras
Licensing Consultant

Date

Approved By:



12/23/2014

Leon M. Hale
Area Manager

Date