

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

July 26, 2017

Patricia Thomas Quest, Inc. 36141 Schoolcraft Road Livonia, MI 48150-1216

RE: Application #: AS630384916

Addison

920 Rochester Road Leonard, MI 48367

Dear Ms. Thomas:

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 (248) 975-5053.

Sincerely,

Kristen Donnay, Licensing Consultant Bureau of Community and Health Systems

4th Floor, Suite 4B

51111 Woodward Avenue

Cisten Donna

Pontiac, MI 48342

(248) 296-2783

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License Application #:	AS630384916	
Applicant Name:	Quest, Inc.	
Applicant Address:	36141 Schoolcraft Road	
	Livonia, MI 48150-1216	
Applicant Telephone #:	(734) 458-8140	
	D	
Licensee Designee:	Patricia Thomas	
Name of Facility	Addison	
Name of Facility:	Addison	
Facility Address:	920 Rochester Road	
i acility Address.	Leonard, MI 48367	
	Leonard, IVII 40007	
Facility Telephone #:	(248) 628-9402	
Total and Total	(= 15) 6=5 5 15=	
Application Date:	07/07/2016	
Capacity:	6	
Program Type:	DEVELOPMENTALLY DISABLED	
	PHYSICALLY HANDICAPPED	
	MENTALLY ILL	

II. METHODOLOGY

07/07/2016	Enrollment		
09/20/2016	Inspection Report Requested - Health 1026174.		
09/20/2016	Comment REDSCREEN to CG/Patricia-AS820014555.		
09/21/2016	Licensing Unit file referred for background check review CH-Yes/Nicole.		
09/21/2016	Contact - Document Sent Act & Rules.		
09/27/2016	Contact - Document Received Licensing file received from Central office		
09/28/2016	Application Incomplete Letter Sent		
10/17/2016	Inspection Completed-Environmental Health: A		
12/13/2016	Contact - Document Received Received program statement, job descriptions, employee handbook, discharge policy		
05/17/2017	Application Incomplete Letter Sent		
06/06/2017	Contact - Document Received Administrator and Licensee Designee qualifications		
06/07/2017	Contact - Document Received Special certification application		
06/09/2017	Contact - Document Received Permission to inspect/right to occupy		
06/09/2017	Application Complete/On-site Needed		
07/11/2017	Inspection Completed-BCAL Full Compliance		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the licensure of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1994.

A. Physical Description of Facility

The Addison adult foster care home is located in a residential area at 920 Rochester Rd., Leonard, MI. The home was constructed in 1983 and is a single story brick structure with an attached two car garage and a large backyard. The first floor of the home consists of a living room, dining room, front room, kitchen, three bedrooms, two full bathrooms, and a laundry room. The home is owned by Community Housing Network.

Addison is located 11 miles away from Crittenton Hospital, which includes a 24/7 emergency department. Oxford Urgent Care is also located near the home for non-emergency medical care. The Addison Township Fire Department and Oakland County Sherriff's Department respond to emergency calls from the home. Additional medical, social, educational, religious, and shopping resources are located nearby within the surrounding community.

The furnace and hot water heater are located in a separate utility room off the back of the house. The entrance to the utility room is outside and is constructed of material with a 1 hour fire resistance rating. The utility room is equipped with a 1¾ inch solid core door with an automatic self-closing device and positive latching hardware. The facility is equipped with an interconnected, hardwired smoke detection system, with battery backup, which is fully operational. The home has private water and a private sewer system. An environmental health inspection was completed on 10/17/16 by the Oakland County Health Division and the facility was determined to be in substantial compliance with applicable rules.

The bedroom and bathroom doors are equipped with positive latching, non-locking against egress hardware. All three bedrooms have adequate space, bedding, and storage. All of the bedrooms have a chair and mirror. During the onsite inspection, I observed that the home was in substantial compliance with rules pertaining to maintenance and sanitation. The refrigerator and freezer are equipped with thermometers. I measured the water temperature with a digital thermometer and it was between 105-120° F.

The home has two primary means of egress, which lead directly to firm-surfaced, unobstructed concrete which allows the occupants to move a safe distance away from the building. The home is qualified for admission of residents who use a wheelchair.

Resident bedrooms were measured during the onsite inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	16.6 x 11.2	185.9	2
2	17 x 11.2	190.4	2
3	17 x 11.2	190.4	2

Total capacity: 6

Resident Living Space	Room Dimensions	Total Square Footage
Living & Dining Room	15.2 x 24.2	367.8
Front Room	15.2 X 14.8	224.96

The living room, dining room, and front room areas offer a total of 592.76 square feet of living space, which exceeds the minimum of 35 square feet per resident.

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

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for Addison were reviewed and accepted as written. Addison will provided personal care, supervision, and protection, in addition to room and board, on a 24-hour/day schedule, seven days per week. Addison will provide assistance with activities of daily living including dressing, bathing, personal hygiene, laundry, meal preparation, feeding, and medication administration. Addison will provide services and adult living skills for both men and women including recreational activities, health care, assistance with day programs, and transportation in a community setting as outlined in each resident's person centered plan. The home is handicapped accessible and has the capacity to accommodate six residents with developmental disabilities and/or mental illness.

The proposed staffing pattern for the original license of this six bed facility is adequate and includes a minimum of one staff to six residents per shift. The applicant acknowledged that she will ensure the staff to resident ratio is adequate 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.

C. Applicant and Administrator Qualifications

The applicant is Quest, Inc., which is a "Domestic Nonprofit Corporation", established in Michigan on 06/29/83. The applicant has established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

Patricia Thomas has been appointed as the licensee designee and Nicole Scott has been appointed as the administrator of the facility.

Licensing record clearance requests were completed with no LEIN convictions recorded for Ms. Thomas or Ms. Scott. The licensee designee and administrator submitted current medical clearances with statements from a physician documenting good health and tuberculosis negative results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Thomas has been qualified as a licensee designee since May 2005. She has many years of experience as a licensee designee and administrator for adult foster care facilities serving the mentally ill, developmentally disabled, and physically handicapped populations. The administrator, Ms. Scott, has several years of experience as an administrative assistant, caregiver, and home manager, working in adult foster care facilities with the populations identified in the application.

Ms. Thomas 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.

Ms. Thomas acknowledged an understanding of the responsibility to assess the good moral character of employees and 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.

Ms. Thomas acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff who have received medication training and have been determined competent by the licensee or licensee designee will administer medication to residents. In addition, Ms. Thomas 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. Thomas 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, the licensee designee acknowledged the responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteers and to follow the retention schedule for all of the documents contained within the employee file.

Ms. Thomas acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

Ms. Thomas acknowledged the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal 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 updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Ms. Thomas acknowledged the responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

Ms. Thomas acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The licensee designee acknowledged that a separate Resident Funds Part II BCAL-2319 form will be completed for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the residents' personal money transactions that have been agreed to be managed by Addison.

Ms. Thomas acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights and indicated the intent to respect and safeguard these resident rights.

Ms. Thomas acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

Ms. Thomas acknowledged the 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 facility has been determined to be in compliance with the applicable administrative rules and the licensing statute, based upon the onsite inspection conducted and the licensee's intent to comply with all administrative rules for a small group home as well as the licensing act, Public Act 218 of 1979, as amended.

It should be noted that Quest, Inc. was operating Addison under a management agreement with the previous licensee, Progressive Residential Services Inc., while licensure was pending. At the time of licensure, the facility is currently providing services to five individuals.

IV. RECOMMENDATION

Denise Y. Nunn

Area Manager

I recommend issuance of a six month temporary license to this adult foster care facility, Addison, with a capacity of six residents.

Date

Kisten Donnay		
Ο,	07/14/17	
Kristen Donnay Licensing Consultant	Date	
Approved By:		
Denie G. Munn	07/26/2017	

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