



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 25, 2019

Karen Harris  
Integrated Living, Inc.  
43133 Schoenherr Road  
Sterling Heights, MI 48313

RE: Application #: AS500397073  
Rondale Home  
8145 Rondale  
Shelby Township, MI 48316

Dear Mrs. Harris:

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,

A handwritten signature in cursive script that reads "Roeiah Epps".

Roeiah Epps, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(586) 256-1776

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS500397073
<b>Applicant Name:</b>	Integrated Living, Inc.
<b>Applicant Address:</b>	43133 Schoenherr Road Sterling Heights, MI 48313
<b>Applicant Telephone #:</b>	(586) 731-9800
<b>Licensee Designee:</b>	Karen Harris
<b>Name of Facility:</b>	Rondale Home
<b>Facility Address:</b>	8145 Rondale Shelby Township, MI 48316
<b>Facility Telephone #:</b>	(586) 961-2492
<b>Application Date:</b>	11/01/2018
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODOLOGY

11/01/2018	Enrollment Online enrollment
11/01/2018	Contact - Document Sent Rule & Act booklets
11/01/2018	Application Incomplete Letter Sent App - signed & dated; IRS letter; clearance for Karen (LD) & AFC 100 for admin
11/07/2018	Contact - Document Received App - signed & dated; rec cl & AFC100 for Karen; IRS ltr
11/08/2018	Contact - Document Received App - Updated; AFC100 - for Edwina (Admin)
11/13/2018	Contact - Document Received Licensing file received from Central office
08/06/2019	Application Incomplete Letter Sent
08/28/2019	Contact - Document Received Facility reassigned in BITS
08/29/2019	Inspection Completed-BCAL Sub. Compliance
08/29/2019	Inspection Completed On-site
08/30/2019	Application Incomplete Letter Sent
09/19/2019	Inspection Completed-BCAL Full Compliance

## II. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The home is located in a suburban community of Shelby Township, east of M-53. The facility is a small brick and aluminum-sided home on a residential lot. The living and dining space in the facility contains 425 sq. ft. of activity space. This is adequate for the proposed number of occupants. The facility is equipped with an interconnected, hardwired smoke detection and sprinkler system with battery back-up which was installed by a licensed electrician and is fully operational. The facility is also wheelchair accessible.

The bedroom space is as follows:

<b>Location</b>	<b>Dimensions</b>	<b>Square Footage</b>	<b>Capacity</b>
Bedroom 1	15'2" x 11'4"	173 sq. ft.	2
Bedroom 2	14'2" x 11'4"	162 sq. ft.	2
Bedroom 3	14'10" x 11'2"	158 sq. ft.	2

**Total capacity: 6**

## **B. Program Description**

The applicant intends to provide 24-hour supervision, protection and personal care to 6 residents who are developmentally disabled. The program will include social interaction, personal hygiene care and transportation

## **C. Applicant and Administrator Qualifications**

The applicant is Integrated Living, Inc., which is a "Domestic Non-Profit Company" established in Michigan on 12/3/91. The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents along with a projected budget.

The board of directors for Integrated Living, Inc. has submitted documentation appointing Karen Harris as the licensee designee and Edwina Patterson as the administrator of the facility.

A licensing record clearance was completed and the licensee designee and administrator are of good moral character. The licensee designee and administrator submitted physician statement documents for themselves documenting their good health and current TB test with negative results.

The licensee designee and administrator provided verification of their education and years of experience working with adults who are diagnosed with a developmental disability. The licensee designee and administrator also supplied verification of the necessary hours for training. Ms. Harris has approximately 27 years of training and experience of providing direct care services to the developmentally disabled population. Ms. Harris also has several licensed adult foster care homes and significant experience with Macomb County Community Mental Health. The administrator, Ms. Patterson, has seven years of training and experience with providing direct care to developmentally disabled population as well.

The licensee designee and administrator acknowledged it is their responsibility to assess the good moral character of employees and those who will have ongoing, regular and direct contact with the residents. The licensee designee and administrator were also instructed about background check requirements. The licensee designee and administrator were provided technical assistance on the process for obtaining criminal

record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org), L-1 Identity Solutions (formerly Identix®), and the related documents required to be maintained in each employees record to demonstrate compliance.

The licensee designee, Karen Harris, acknowledged and understands the administrative rules regarding medication procedures. In addition, she indicated that residents medications will be stored in a locked cabinet and a daily medication log will be maintained.

The licensee designee, Karen Harris, understands the administrative rules regarding informing each resident of their rights and providing a copy of those rights to them. The licensee designee acknowledged awareness of the administrative rules regarding discharge and procedural requirements for issuing written discharge notices.

The licensee designee, Karen Harris, also understands the administrative rules regarding discharge and procedural requirements for issuing written discharge notices.

The licensee designee, Karen Harris, understands the administrative rules regarding written and verbal reporting of accidents and incidents and the responsibility to conduct timely investigations of the cause. The licensee designee has indicated that it is her intention to maintain compliance with this requirement. The licensee designee and administrator acknowledged it is their responsibility to maintain required resident records.

The licensee designee, Karen Harris, was in compliance with the licensing act and applicable administrative rules at the time of licensure.

### III. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home with a capacity of six residents.



9/24/19

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Roeiah Epps  
Licensing Consultant

Date

Approved By:



9/25/2019

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Denise Y. Nunn  
Area Manager

Date