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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

December 14, 2021

Abass Olalere Sinat Care Services LLC PO Box 741 Inkster, MI 48141

RE: License #: AS820406931

Sinat Group Home 26730 Carlysle St. Inkster, MI 48141

Dear Mr. Olalere:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

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 (313) 456-0380.

Sincerely,

Denasha Walker, Licensing Consultant Bureau of Community and Health Systems

Cadillac Pl. Ste 9-100 3026 W. Grand Blvd Detroit, MI 48202 (313) 300-9922

enclosure

# MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS ADDENDUM TO ORIGINAL LICENSING STUDY REPORT

#### I. IDENTIFYING INFORMATION

**License #:** AS820406931

Licensee Name: Sinat Care Services LLC

Licensee Address: 26730 Carlysle

Inkster, MI 48141

**Licensee Telephone #:** (404) 348-6367

Administrator/Licensee Designee: Abass Olalere

Name of Facility: Sinat Group Home

Facility Address: 26730 Carlysle St.

Inkster, MI 48141

**Facility Telephone #:** (313) 406-9518

Capacity: 4

Program Type: DEVELOPMENTALLY DISABLED

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#### II. Purpose of Addendum

On 11/23/2021, Abass Olalere, Licensee Designee submitted a Request for Modification of the Terms of the Registration/License requesting a change in age requirement from 18 - 45 years old to 18 - 60 years old.

#### III. Methodology

On 11/22/2021- Email received from Mr. Olalere inquiring about how to change the age range of residents admitted into the facility.

On 11/23/2021- Document sent, Modification Request form to Mr. Olalere.

On 11/23/2021- Document received, Modification Request form received from Mr. Olalere.

On 12/09/2021- Document received, updated Admission Policy and Program Statement reflecting the age change.

#### IV. Description of Findings and Conclusions

I reviewed Mr. Olalere training/experience at the time the original license was issued, which included reviewing his training transcript, resume and contacting previous employers. Mr. Olalere has years of experience working with residents between the ages of 18 – 60. At the time Mr. Olalere was licensed he chose to provide adult foster care to adults between the ages of 18 – 45 years old but has since submitted a Modification Request to expand the population age to 18 – 60 years old. The documentation received satisfies the qualifications and training requirements identified in the administrative group home rules. I have also received and reviewed the updated admissions policy and program statement which reflects the age modification and meets the required criteria. Based upon Mr. Olalere's training and experience, he is qualified to provide care to the population age range of 18 – 60 years old.

### V. Recommendation

I recommend approval for the age require being the maximum age for admission.  12/14/2021	ements to be increased to 60 years old
Denasha Walker	 Date
Licensing Consultant	Sate
Approved by:  12/14/2021	
Ardra Hunter	Date
Area Manager	