



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 20, 2022

Cheria Gross
Gross Adult Foster Care Inc.
1267 E Farrand Rd
Clio, MI 48420

RE: Application #: AM250410434
Gross Lake Adult Foster Care
3390 W Lake Rd
Clio, MI 48420

Dear Ms. Gross:

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 12 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 (906) 226-4171.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

enclosure

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

I. IDENTIFYING INFORMATION

License #: AM250410434

Applicant Name: Gross Adult Foster Care Inc.

Applicant Address: 1267 E Farrand Rd
Clio, MI 48420

Applicant Telephone #: (810) 691-1459

Administrator/Licensee Designee: Cheria Gross

Name of Facility: Gross Lake Adult Foster Care

Facility Address: 3390 W Lake Rd
Clio, MI 48420

Facility Telephone #: (810) 691-1459
09/27/2021

Application Date:

Capacity: 12

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL

Special Certification: Mentally Ill
Developmentally Disabled

II. METHODOLOGY

09/27/2021	Enrollment Online app download failure
09/28/2021	Application Incomplete Letter Sent 1326 & RI030 for Cheria, AFC100 for Admin
09/28/2021	Inspection Report Requested - Health Invoice No : 1031983
09/28/2021	Contact - Document Sent 1326 & RI030 for Cheria. AFC100 for Admin
09/29/2021	Inspection Report Requested - Fire
10/04/2021	Contact - Document Received 1326 for Cheria
10/14/2021	Inspection Completed-Env. Health : A
10/18/2021	Contact - Document Received AFC100 for Cheria
11/02/2021	Contact - Document Received RI030 for Cheria
11/12/2021	Application Incomplete Letter Sent
11/18/2022	SC-Application Received - Original
12/02/2021	Inspection Completed On-site
12/02/2021	Contact - Document Received Furnace Inspection conducted on 11/26/2021.
04/26/2022	Application Complete/On-site Needed
04/27/2022	Inspection Completed On-site
04/27/2022	Inspection Completed-Env. Health: A
04/27/2022	SC-Inspection Completed On-Site
04/29/2022	Inspection Completed-Fire Safety : A

05/20/2022	Inspection Completed-BCAL Full Compliance
05/20/2022	Recommend License Issuance
05/20/2022	SC-Inspection Full Compliance
05/20/2022	SC-Recommend MI and DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a one level structure, with brick and vinyl siding. It is located in the city of Clio, in a neighborhood with similar style dwellings. It has a spacious yard and adequate parking spaces for staff and visitors. The facility consists of twelve (12) single occupancy resident bedrooms, for a total of 12 bedrooms. Eight (8) single occupancy resident bedrooms have their own half bathrooms. The facility also contains 2 full bathrooms, one with a shower area, and the other contain both a tub and a shower area. There is also an additional half bathroom, a fully equipped kitchen, a dining room, accommodating for 12 residents, a large multi-purpose room, a laundry room, a beauty salon room, a staff office, and two mechanical rooms. There are adequate storage areas throughout the facility. The rear of the home is fenced in and has a pavilion/picnic area. The property is owned by Gross Adult Foster Care Inc.

There are 4 furnaces, located in the 2 mechanical rooms, each enclosed in a 1-3/4-inch solid core door, constructed of material that has a 1-hour-fire resistance rating, equipped with an automatic self-closing device and positive latching hardware. On 11/26/2021, the furnaces were inspected by licensed professionals, Action Plumbing & Heating Inc, deemed to be in safe operational condition. The bureau of fire services inspection was conducted on 04/29/2022, and full approval was given.

The facility is equipped with hard-wired smoke detectors and fire extinguishers throughout the facility.

The facility has a private water and sewer system. The home was determined to be in substantial compliance with all applicable licensing rules pertaining to environmental health, per the inspection completion date of 10/14/2021.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
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1	12 x 12	144 square feet	1
2	12 x 12	144 square feet	1
3	18 x 8	144 square feet	1
4	12 x 11'5	138 square feet	1
5	12 x 11'5	138 square feet	1
6	12 x 11'5	138 square feet	1
7	16 x 10'5	166 square feet	1
8	12 x 11'5	138 square feet	1
9	14 x 10	140 square feet	1
10	10 x 11	110 square feet	1
11	14 x 12	168 square feet	1
12	12 x 12	144 square feet	1

The multi-purpose room contains 464 square feet of indoor living space and this exceeds the requirements for 12 residents.

The home has two separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30-inch minimum width requirement. The required exit doors are equipped with positive latching non-locking against egress hardware. The exit on the west side of the facility is equipped with a wheelchair accessible ramp. There is a large parking lot with ample space for both visitors and staff.

Based on the above information, it is concluded that this facility can accommodate twelve (12) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Gross AFC is designed to provide a quality environment with a normal home-like atmosphere, where each resident has the opportunity to reach his or her highest potential.

Resident will have the opportunity to participate in age and culturally appropriate activities. Gross AFC will also provide basic self-care training to teach/reinforce daily living skills.

The applicant intends to provide 24-hour supervision, protection, and personal care to twelve male or female adults whose diagnosis is mentally impaired,

developmentally disabled and physically handicapped, in the least restrictive environment possible.

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. The facility will make provision for a variety of leisure and recreational equipment.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources including the public schools and library, local museums, and shopping centers. These resources provide an environment to enhance the quality of life and increase the independence of each resident.

C. Applicant and Administrator Qualifications

The applicant, Gross Adult Foster Care Inc, has provided documentation to appoint Ms. Cheria Gross as the licensee designee and administrator. Gross Adult Foster Care Inc submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee/administrator. The licensee /administrator submitted a medical clearance request with statements from a physician documenting her good health and current TB-test negative results.

The licensee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 12-bed facility is adequate and includes a minimum of 1-staff-to-12 residents per shift. All staff shall be awake during sleeping hours.

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 licensing consultant 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 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

Compliance with the physical plant rules has been determined. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via an on-site inspection.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult medium group home (capacity 7-12) and temporary issuance for special certification for the mentally ill and developmentally disabled.

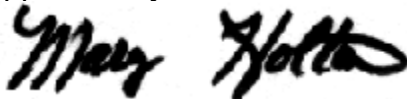


May 20, 2022

Sabrina McGowan
Licensing Consultant

Date

Approved By:



May 20, 2022

Mary E Holton
Area Manager

Date