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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 14, 2022

Debra Waynick
RDP Rehabilitation, Inc.
51145 Nicolette Dr.
New Baltimore, MI 48047

RE: Application #: AS630411261
**Progressions 2104 S Rochester
2104 S Rochester Road
Rochester Hills, MI 48307**

Dear Ms. Waynick:

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 "Stephanie Gonzalez".

Stephanie Gonzalez, LCSW
Adult Foster Care Licensing Consultant
Bureau of Community and Health Systems
Department of Licensing and Regulatory Affairs
Cadillac Place, Ste 9-100
Detroit, MI 48202
Cell: 248-514-9391
Fax: 517-763-0204

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630411261
Applicant Name:	RDP Rehabilitation, Inc.
Applicant Address:	Suite 102 36975 Utica Road Clinton Township, MI 48036
Applicant Telephone #:	(586) 651-8818
Licensee Designee:	Debra Waynick
Administrator:	Debra Waynick
Name of Facility:	Progressions 2104 S Rochester
Facility Address:	2104 S Rochester Road Rochester Hills, MI 48307
Facility Telephone #:	(248) 608-8553
Application Date:	01/03/2022
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

01/03/2022	Enrollment
01/03/2022	Application Incomplete Letter Sent 1326, Fp, RI030, AFC 100
02/11/2022	Contact - Document Received afc 100, 1326a
02/23/2022	Application Incomplete Letter Sent
03/10/2022	Contact - Document Received Email exchange with applicant regarding documents needed.
03/21/2022	Contact - Document Sent Follow-up email sent to applicant, to inquire as to when documents will begin to be sent to me for review.
03/22/2022	Contact - Document Received Application documents received via email
05/23/2022	Contact - Telephone call made Spoke to Steve Stasiw, corp. member. Steve stated that Ms. Waynick is currently on vacation, and he will submit the remaining app. docs by end of next week.
06/23/2022	Contact - Document Received Additional documentation received
06/23/2022	Inspection Completed On-site
06/23/2022	Application Complete/On-site Needed
07/07/2022	Contact - Document Received Additional documentation received
07/07/2022	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a ranch-style home with a basement, located within the city of Rochester Hills, Michigan. The home consists of six bedrooms, four full-size bathrooms, one ½ bathroom, a kitchen and dining room, all located on the main floor of the home. Upon entering the open-concept home, the living room, dining room and kitchen are the first

rooms entered. To the left of the living room is a hallway that leads to three resident bedrooms and two full size bathrooms. To the right of the kitchen is a hallway that leads to three additional resident bedrooms and two full-size bathrooms, one ½ bathroom and the door that leads to the basement. Directly past the dining room is a door that leads to the basement, which houses the furnace and hot water heater. The home is wheelchair accessible and has two approved means of egress that are equipped with a ramp from the first floor. The home utilizes a public water supply and sewage disposal system.

The home utilizes a gas furnace and gas hot water heater system. The furnace and hot water heater are located in the basement and are equipped with a 1¾ inch solid core door with an automatic self-closing device and positive latching hardware.

The facility is equipped with battery-powered, single-station smoke detectors, which have been installed near sleeping areas, on each occupied floor of the home, in the basement and near all flame or heat-producing equipment.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12' x 12' 8"	152	1
2	12 x 12	144	1
3	10' 7" x 14' 8"	155	1
4	14' 6" x 10'	145	1
5	15' 8" x 10'	156	1
6	15' 8" x 10'	156	1

Total capacity: 6

The indoor living and dining areas measure a total of 850 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate six (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant intends to provide 24-hour supervision, protection, and personal care to **six (6)** male and/or female residents who are physically handicapped or traumatically brain-injured. The program will include social interaction, training to develop personal hygiene, personal adjustment, public safety and independent living skills, opportunity for involvement in educational or day programs or employment and transportation. The applicant intends to accept referrals from Oakland County DHS, Oakland CMH, Veterans Administration, or residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by

staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life and increase the independence, if applicable, of residents.

C. Applicant and Administrator Qualifications

The applicant is RDP Rehabilitation Inc., L.L.C., a “Domestic Limited Liability Company”, established in Michigan on 12/7/2021. The applicant 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.

The members of RDP Rehabilitation Inc., L.L.C. have submitted documentation appointing Debra Waynick as licensee designee and administrator of the facility.

A criminal history background check of Ms. Waynick was completed, and she was determined to be of good moral character to provide licensed adult foster care. Ms. Waynick submitted a statement from a physician documenting her good health and current negative tuberculosis test results.

Ms. Waynick provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Waynick began her career as a direct care staff in 2008. Over the last 14 years, Ms. Waynick has taken on the role of direct care staff, home manager, supervisor, and program director of adult foster care facilities. Ms. Waynick has many years of experience providing bathing, dressing, personal care, supervision, medication management and safety to the adult foster care population.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 1 staff for 6 residents per shift. Ms. Waynick acknowledged that the staff to resident ratio may need to be decreased 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. Ms. Waynick has indicated that direct care staff will be awake during sleeping hours.

Ms. Waynick 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. Waynick acknowledged an understanding of the responsibility to assess the good moral character of employees. The Ms. Waynick acknowledged 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. Waynick acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by Ms. Waynick will administer medication to residents. In addition, Ms. Waynick 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. Waynick 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, Ms. Waynick acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. Waynick 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. Waynick 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. Waynick 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. Waynick acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Waynick acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created 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 resident's personal money transactions that have been agreed to be managed by the applicant.

Ms. Waynick 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. Ms. Waynick indicated the intent to respect and safeguard these resident rights.

Ms. Waynick 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. Waynick 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.

Ms. Waynick acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).

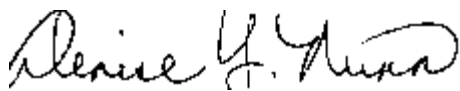


7/13/2022

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:



07/14/2022

Denise Y. Nunn
Area Manager

Date