



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 2, 2022

Earsha Riggin
14124 Merriman Road
Livonia, MI 48154

RE: Application #: AS820408887
Successfully Living
821 N. Haggerty Rd
Canton, MI 48187

Dear Ms. Riggin:

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 5 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 (313) 456-0380.

Sincerely,

A handwritten signature in cursive script, appearing to read "Denasha Walker".

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
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AS820408887
Licensee Name:	Earsha Riggin
Licensee Address:	14124 Merriman Road Livonia, MI 48154
Licensee Telephone #:	(734) 846-1519
Administrator/Licensee Designee:	Ava Croft
Name of Facility:	Successfully Living
Facility Address:	821 N. Haggerty Rd Canton, MI 48187
Facility Telephone #:	(734) 846-1519 06/01/2021
Application Date:	
Capacity:	5
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODOLOGY

06/01/2021	On-Line Enrollment
07/07/2021	Inspection Report Requested - Health invoice No: 1031782
07/07/2021	Contact - Document Sent forms sent
02/09/2022	Contact - Document Received 1326a, ri030, afc100
02/16/2022	Lic. Unit file referred for background check review
03/01/2022	Application Incomplete Letter Sent via email
04/02/2022	Contact - Document Received
04/14/2022	Contact - Document Received
05/04/2022	Contact - Document Received
05/05/2022	Inspection Completed On-site
05/05/2022	Inspection Completed-BCAL Sub. Compliance
06/17/2022	Application Complete/On-site Needed
06/21/2022	Inspection Completed On-site additional repairs needed
07/15/2022	Inspection Completed On-site
07/15/2022	Inspection Completed-BCAL Full Compliance
07/29/2022	Contact - Document Received
08/02/2022	SC-Application Received - Original
08/02/2022	SC-Recommend DD
08/02/2022	SC-Certification issued DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Successfully Living is located in the city of Canton, in the county of Wayne. This single-family, ranch style home sits on 0.69 acres with a large front yard and an extended two-car driveway on the South side of the home with adequate parking for staff and visitors. The home has a brick two-tone tan and brown exterior with an attached two-car garage and partially fenced backyard. The home has a dine-in kitchen, living room, four bedrooms one of which will be used for recreational purposes, two full baths, one-half bath, and an office area. There are two means of egress, the main front entrance and through the recreational room. The main entrance leads to an enclosed porch with a wheelchair ramp and the recreational room patio door exit which leads to an enclosed deck with a wheelchair ramp. The home utilizes public water and sewage disposal.

This home is wheelchair accessible.

The furnace and hot water heater are located in the basement in a room that is constructed of material that has a 1-hour-fire-resistance rating with a 1-3/4-inch solid core door equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1 West	11.58 x 15.58	180	2
2 Northwest	15.33 x 13.17	202	2
3 Northeast	10.66 x 11	117	1

The living, dining, and sitting room areas measure a total of 257 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate **five (5)** 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 the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection, and personal care to **five (5)** male or female physically handicapped and developmentally disabled, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal

behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from: (Gateway, Consumer Link, and Synergy Partners).

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. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by a review of the applicant's a financial statement, credit report and the budget statement submitted to operate the adult foster care facility. Based on this information, the applicant meets the requirements for financial stability and capability.

A licensing record clearance request was completed with no lein convictions recorded for the applicant and the administrator. The applicant and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The applicant 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 **5**-bed facility is adequate and includes a minimum of **1** staff –to- **5** 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 employees 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 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 with a capacity of **5** residents.



8/02/2022

Denasha Walker
Licensing Consultant

Date

Approved By:



8/02/2022

Ardra Hunter
Area Manager

Date