



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 11, 2022

Shauntel Dye
3925 Spruce
Inkster, MI 48141

RE: Application #: AS820412467
A Servants Heart #1
8536 Ward
Detroit, MI 48141

Dear Mrs. Dye:

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 blue ink that reads "K. Robinson".

K. Robinson, LMSW, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-0574

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS820412467
Licensee Name:	Shauntel Dye
Licensee Address:	3925 Spruce Inkster, MI 48141
Licensee Telephone #:	(248) 499-3151
Administrator/Licensee Designee:	Shauntel Dye
Name of Facility:	A Servants Heart #1
Facility Address:	8536 Ward Detroit, MI 48141
Facility Telephone #:	(313) 659-6682
Application Date:	04/26/2022
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

04/26/2022	On-Line Enrollment
05/20/2022	Contact - Document Received AFC 100, 1326, Ri030, MC
05/25/2022	Lic. Unit file referred for background check review
06/08/2022	PSOR on Address Completed
06/08/2022	File Transferred to Field Office
06/08/2022	Comment Enrollment assigned to K. Robinson for processing
06/09/2022	Application Incomplete Letter Sent
06/28/2022	Contact - Telephone call made Mrs. Dye reported she has 3 residents in care. Advised applicant not to accept more residents until license issued.
07/06/2022	Inspection Completed On-site
08/16/2022	Contact - Telephone call received Call from Mrs. Dye to report the home is ready for inspection.
08/25/2022	Inspection Completed On-site Needs handrails on the open sides of porch.
08/25/2022	Inspection Completed On-site
09/09/2022	Contact - Document Received Received financial documents via email.
09/16/2022	Inspection Completed-BCAL Full Compliance Received photo of handrails installed on open sides of porch.
09/28/2022	Application Incomplete Letter Sent
10/10/2022	Contact – Document received Received furnace inspection (final supporting document).

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The A Servant's Heart #1 home is located on Detroit's northwest side in a residential neighborhood with nearby schools, a church, and other local businesses. This 2-story home is comprised of a living room, dining room, 1 ½ baths, 3 bedrooms, and an office (to be used by Staff only per Mrs. Dye). There is also a semi-finished basement.

The furnace and hot water heater are in the basement behind a steel door equipped with an automatic self-closing device and positive latching hardware. The fire door is located at the top of the basement stairs; the door has a 90-minute fire-resistant rating. The facility is equipped with an interconnected smoke detection system that is hardwired through the home's electrical system. The system was installed by a professional contractor and is fully operational.

The home **cannot** accommodate persons who require the regular use of a wheelchair.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	10.58 X 14.17	150	2
2	13.66 X 10.08	138	2
3	11.75 X 10.25	120	1

The living, dining, and sitting room areas measure a total of 308 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 ambulatory adults whose diagnosis is **developmentally disabled or mentally impaired**, 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: (the Mental Health Authority or other outside agency).

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 is A Servant's Heart Assistant Living, L.L.C., which is a Domestic Limited Liability Company, was established in Michigan, on 01/13/22. 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 Board of Directors of A Servant's Heart Assistant Living, L.L.C. has submitted documentation appointing Shauntel Dye as Licensee Designee for this facility and Shauntel Dye as the Administrator of the facility.

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

The licensee designee 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 **based upon each resident's needs**. 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),

Identego™ (formerly L-1 Identity Solutions®), 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 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

The applicant was in full compliance with the licensing act and applicable administrative rules at the time of licensure.

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small group home (capacity 1 - 5).



10/10/22

Kara Robinson
Licensing Consultant

Date

Approved By:



10/11/22

Ardra Hunter
Area Manager

Date