

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

August 25, 2023

Sherri Turner Adult Learning Systems-Lower Michigan Suite F 8170 Jackson Road Ann Arbor, MI 48103

> RE: Application #: AS500416792 Romeo 17623 21 Mile Rd. Macomb township, MI 48044

Dear Sherri Turner:

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,

L. Reed

LaShonda Reed, Licensing Consultant Bureau of Community and Health Systems Cadillac Place, Ste 9-100 Detroit, MI 48202 (586) 676-2877

enclosure

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

# I. IDENTIFYING INFORMATION

License #:	AS500416792	
Applicant Name:	Adult Learning Systems-Lower Michigan	
Applicant Address:	Adult Learning Systems-Lower Michigan	
	8170 Jackson Road, Suite F	
	Ann Arbor, MI 48103	
Applicant Telephone #:	(734) 408-0112	
Administrator/Licensee Designee:	Rachell Boykins/Sherri Turner	
Name of Facility:	Romeo	
Facility Address:	17623 21 Mile Rd.	
	Macomb township, MI 48044	
Facility Telephone #:	(734) 402-1112	
Application Date:	06/15/2023	
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Capacity:	6	
Program Type:	DEVELOPMENTALLY DISABLED	
	MENTALLY ILL	

### II. METHODOLOGY

06/15/2023	Enrollment	
06/15/2023	PSOR on Address Completed	
06/15/2023	Application Incomplete Letter Sent 1326 & AFC 100 for Rachell Boykins	
06/15/2023	Contact - Document Sent Forms sent	
07/20/2023	Contact - Document Received AFC100, 1326	
07/21/2023	Application Incomplete Letter Sent	
07/21/2023	Application Complete/On-site Needed	
08/10/2023	Inspection Completed On-site	
08/10/2023	Inspection Completed BCAL Full Compliance	

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

This small adult foster care home is located in a residential area in Macomb Township, MI. The home is a single-story ranch structure with a basement and a two-car attached garage. The first floor of the home consists of a family room, dining room, kitchen, one full bathroom, laundry room and three bedrooms.

The furnace and hot water heater are in the basement with a 1<sup>3</sup>/<sub>4</sub>-inch solid core door equipped with an automatic self-closing device and positive latching hardware located at the top floor. 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 dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12' x 12'.1"	145	2
2	11'.11" x 12'.4"	146.97	2
3	12'.6" x 11'.6"	143.75	2

Total Capacity: 6

The family, dining, room areas measure a total of 1,636.28 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 **six** (**6**) 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 **six** (6) male or female ambulatory or non-ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible.

The program is designed to for residents who have chronic mental illness and or developmental disabilities who no longer require inpatient psychiatric care but need the structure of a group home setting. The resident's diagnosis may vary and include co-occurring disorders and substance abuse issues. There will be 24-hour staff assistance to provide care in personal hygiene, self-care, medication management, medical care, social skills, recreational and vocational activities, transportation, advocacy and support, reintegration into community.

The community and surrounding area resources include, but are not limited to, churches, library, potential employment sites, educational and recreational facilities. Referral services are provided through the local funding agency or other pre-paid health plans within the geographic region. Residents will be referred from: (Community Mental Health).

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 Adult Learning Systems-Lower Michigan (ALS-LM) which is, a "Non-Profit Corporation" that was established in Michigan, on 05/01/1998. ALS-LM 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 ALS-LM has submitted documentation appointing Sherri Turner as licensee designee for this facility and Rachell Boykins as the administrator of the facility. A licensing record clearance request was completed with no lein convictions recorded for the Sherri Turner licensee designee and the administrator Rachell Boykins. Sherri Turner and Rachell Boykins submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results. Sherri Turner, licensee designee and administrator Rachell Boykins have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

Sherri Turner will act as the licensee designee for the facility. Sherri Turner has been fingerprinted and previously approved as a licensee designee. Sherri Turner has been the Executive Director of ALS-LM since 1998. Sherri Turner has a master's degree in public health from Baker College and bachelor's degree in health administration from Eastern Michigan University. Sherri Turner has been employed with ALS-LM since February 1995. Sherri Turner's current position is Executive Director. In this position, she is responsible for 250 plus employees. Sherri Turner previously held the following positions with ALS-LM: Program Director, Residential Manager, Direct Care Worker, Executive/Accounting Assistance and Administrative Assistant. In addition to Sherri Turner's current, and past employment with ALS-LM, Sherri Turner has held the following positions: US Army Reserves-Chief Instructor/ Course Manager (Master Sergeant), Senior Instructor/Human Resources Specialist, and Flight Operations Supervisor. Sherri Turner has certifications in National Professional Human Resources, CPR/First Aid, Commission of Rehabilitation Surveyor and Certified Army Instructor. Sherri Turner has several awards, honors, and activities.

The administrator, Rachell Boykins has been employed with ALS-LM since April 19, 2018. During this time Rachell Boykins' has provided residential services in various settings throughout the agency such as, direct care worker, home supervisor, transportation, assistance with personal care, social, emotional and supervision of person with developmental disabilities and mental illness. Rachell Boykins has over three years of supervisory experience which entails overseeing adult foster care licensing facilities to ensure all contractual requirements are met to include related regulatory guidelines at the state and local levels.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of 1-staff –to- 6 residents per shift. All staff shall be awake during sleeping hours.

ALS-LM 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 1–to-6 resident ratio.

ALS-LM acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have <u>regular</u>, <u>ongoing</u>, "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 (<u>www.miltcpartnership.org</u>), L-1 Identity Solutions<sup>™</sup> (formerly Identix ®), and the related documents required to be maintained in each employees record to demonstrate compliance.

ALS-LM 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, ALS-LM has indicated that resident medications will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

ALS-LM 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, ALS-LM 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 the documents contained within each employee's file.

ALS-LM acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. ALS-LM indicated that it is their intent to achieve and maintain compliance with these requirements.

ALS-LM 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. ALS-LM 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.

ALS-LM acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

ALS-LM acknowledges their responsibility to obtain all 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, ALS-LM 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.

ALS-LM 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

ALS-LM is in compliance with the licensing act and applicable administrative rules at the time of licensure.

#### IV. Recommendation

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

L. Reed

08/23/2023

Date

LaShonda Reed Licensing Consultant

Approved By:

Denie Y. Munn

08/25/2023

Denise Y. Nunn Area Manager

Date