



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 29, 2024

Scott Brown  
Renaissance Community Homes Inc  
P.O. Box 749  
Adrian, MI 49221

RE: Application #: AS630416763  
**Clark Pine**  
**5264 Sunnyside Drive**  
**Clarkston, MI 48346**

Dear Mr. Brown:

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 "Sheena Worthy".

Sheena Worthy, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3026 W Grand Blvd, Suite 9-100  
Detroit, MI 48202

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630416763
<b>Applicant Name:</b>	Renaissance Community Homes Inc
<b>Applicant Address:</b>	1548 W. Maume St. Suite C Adrian, MI 49221
<b>Applicant Telephone #:</b>	(734) 439-0464
<b>Administrator/Licensee Designee:</b>	Scott Brown/Des Des
<b>Name of Facility:</b>	Clark Pine
<b>Facility Address:</b>	5264 Sunnyside Drive Clarkston, MI 48346
<b>Facility Telephone #:</b>	(248) 673-0671
<b>Application Date:</b>	06/13/2023
<b>Capacity:</b>	6
<b>Program Type:</b>	MENTALLY ILL

## II. METHODOLOGY

06/13/2023	Enrollment
06/13/2023	PSOR on Address Completed
06/13/2023	Application Incomplete Letter Sent 1326/New FPs, AFC 100 for des
06/14/2023	Contact - Document Sent Forms sent
06/14/2023	Inspection Report Requested - Health Invoice No: 1033658
06/27/2023	Contact - Document Received AFC-100
09/19/2023	Application Incomplete Letter Sent The checklist was sent to the applicant via email.
09/24/2023	Contact - Document Received I received some of the requested documents.
10/04/2023	Contact - Document Received I received additional documents.
10/04/2023	Inspection Completed-Env. Health: A
02/06/2024	Contact - Document Sent I emailed a list to the applicant regarding the documents that needed corrections.
02/22/2024	Inspection Completed-BCAL Sub. Compliance
02/22/2024	Application Incomplete Letter Sent A confirming letter was sent to the applicant.
02/29/2024	Contact - Document Received I received a statement of correction verifying the needed corrections. I also received a video demonstrating the fire door is equipped with positive latching.
02/29/2024	Application Complete/On-site Needed A statement of correction was received.
02/29/2024	Inspection Completed-BCAL Full Compliance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

This facility is a single-family ranch style home in Clarkston, MI. There are six bedrooms, and two full bathrooms. The main level consists of an employee office, kitchen, living room, all bathrooms, and all six resident's bedrooms. The kitchen area includes a dining area. The home has two approved separate and independent means of egress with non-locking against egress hardware. This facility is wheelchair accessible. The main and second exit in the home is on street level. The garage exit also has a built-in ramp. There is parking available in the driveway. The facility has private water and private sewage. This facility received an environmental inspection on 10/04/23 with an A rating.

There are two water heaters and one furnace in the basement. The basement will not be used for resident activities. The basement door is a solid core door equipped with an automatic self-closing device along with positive latching hardware. There are fire extinguishers located near the employee office, in both sleeping areas, and in the basement. There are smoke alarms in the sleeping areas as well as the residents bedrooms. The smoke alarms are also interconnected.

The refrigerator and freezer are equipped with thermometers. The medications are kept in a locked medication cart in the employee office. The bedrooms have adequate space, linen, and an easily openable window. The bedrooms have a chair, mirror, and closet. The bathrooms and bedrooms have non-locking against egress hardware. During the follow up onsite inspection, I observed the home to be in substantial compliance with rules pertaining to physical plant requirements.

The six resident bedrooms in the home measure as follows:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11.08 x 9.08	100.60	1
2	9.83 x 13.33	131.03	1
3	10.17 x 9.08	92.34	1
4	12.42 x 9.08	112.77	1
5	12.08 x 13.58	164.04	1
6	12.33 x 9.08	111.95	1

**Total Capacity: 6**

The living room measure a total of 277.31 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above-mentioned measurements, it is concluded that this facility can accommodate six residents. It is the licensee designee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

A copy of the program statement, admission policy, discharge policy, job descriptions, personnel policies, and standard procedures were reviewed and accepted as written. Clark Pine will provide 24-hour supervision, protection, and personal care to six female and/or male residents.

The purpose of Clark Pine House is to provide intensive residential treatment to mentally ill residents who require additional support in assisting the management of symptoms that occur in mentally ill. The home is a co-ed facility and will serve six residents. The staffing is such that resident programs that provide intensive structure and promote community reintegration can be carried out. The goal of the program is reduction of psychiatric hospitalization and increase the residents independent living skills. The home is staffed 24 hours a day to provide personal care, protection, and supervision. Staffing will be provided for community outings, appointments and as needed in the house during crisis periods, to prevent short-term hospitalizations.

## **C. Applicant and Administrator Qualifications**

Prior to Renaissance Community Homes Inc. requesting licensure for Clark Pine, this facility was being operated as an AFC group home under Synod Residential Services. On October 1, 2023, Synod Residential Services and Renaissance Community Homes merged together. The licensee designee Scott Brown serves as executive director of Synod Residential Services and Renaissance Community Homes. Therefore, Mr. Brown provided a letter granting permission to occupy and inspect the home.

Scott Brown will continue as the licensee designee and Des Des will act as the administrator. A proposed budget was received showing the expected expenses and income to demonstrate financial capability to operate as an adult foster care facility. A licensing record clearance request was completed with no LEIN convictions recorded for Mr. Brown or Mr. Des. Mr. Brown and Mr. Des submitted a medical clearance request with statements from a physician documenting their good health and current TB negative test results.

Mr. Brown has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules such as; reporting requirements, recipient rights, and elder abuse (foster care). Mr. Brown started working for Renaissance House Inc. in 1987 with residents diagnosed with mental illness. Mr. Brown has a total of 39 years of caregiving experience working with residents with

mental illness and/or developmental disabilities in specialized residential AFC group homes. Mr. Brown has been the licensee designee for Clark Pine under Synod Residential Services since 2021. Therefore, Mr. Brown's experience meets the additional training qualifications for nutrition, first aid, CPR, safety and fire, financial administrative management, knowledge of the needs of the population served, and prevention and containment of communicable diseases.

Mr. Des has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules such as; CPR, first aid, nutrition, safety and fire, recipient rights, and communicable diseases. Mr. Des has been the administrator for Clark Pine since November 2022. Therefore, Mr. Des experience meets the additional training qualifications for financial administrative management, foster care, and knowledge of the needs of the population served.

The staffing pattern for the original license of this six-bed facility is adequate and satisfies the requirements identified in the administrative group home rules.

Mr. Brown 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.

Mr. Brown acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, or 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](http://www.miltcpartnership.org)) and the related documents required to be maintained in each employee's record to demonstrate compliance.

Mr. Brown acknowledged 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 designee can administer medication to residents. In addition, Mr. Brown indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Mr. Brown acknowledged his responsibility to obtain all required 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, Mr. Brown

acknowledged his responsibility to maintain all required documentation in each employee's record for each licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Mr. Brown acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Mr. Brown acknowledged his 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. Mr. Brown also agrees to update and complete those forms and obtaining new signatures for each resident on an annual basis.

Mr. Brown acknowledged his 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.

Mr. Brown acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Mr. Brown 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 licensee designee.

Mr. Brown acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Mr. Brown indicated that it is his intent to achieve and maintain compliance with these requirements.

Mr. Brown acknowledged 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. Mr. Brown indicated his intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Mr. Brown acknowledged his responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

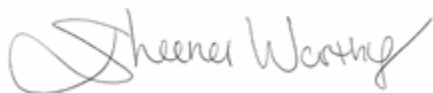
Mr. Brown acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

**D. Rule/Statutory Violations**

Clark Pine was in compliance with the licensing act and applicable administrative rules at the time of licensure.

**IV. RECOMMENDATION**

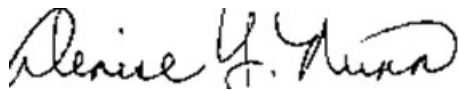
I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).



Sheena Worthy  
Licensing Consultant

02/29/24  
Date

Approved By:



03/29/2024

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Denise Y. Nunn  
Area Manager

Date