

STATE OF MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



May 19, 2009

Lawrence Maniaci Homes of Opportunity Inc. 15878 Kingston Dr Fraser, MI 48026

RE: Application #: AS630294018

Christian Hills 1788 Crooks

Rochester Hills, MI 48309

Dear Mr. Maniaci:

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 4 is issued.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (248) 975-5053.

Sincerely,

Mildred Schwarcz, Licensing Consultant Bureau of Children and Adult Licensing

Whiledred Afschwarz

Suite 1000 28 N. Saginaw Pontiac, MI 48342 (248) 972-9131

Enclosure

MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License #: AS630294018

Applicant Name: Homes of Opportunity Inc

Applicant Address: 15878 Kingston Dr

Fraser, MI 48026

Applicant Telephone #: (586) 296-6188

Administrator/Licensee Designee: Lawrence Maniaci

Name of Facility: Christian Hills

Facility Address: 1788 Crooks

Rochester Hills, MI 48309

Facility Telephone #: (248) 375-9817

Application Date: 12/06/2007

Capacity: 4

Program Type: DEVELOPMENTALLY DISABLED

II. METHODOLOGY

12/06/2007	Enrollment
01/08/2008	Application Incomplete Letter Sent
01/31/2008	Contact - Document Received
01/31/2008	Application Complete/On-site Needed
04/03/2008	Inspection Completed On-site
04/18/2008	Comment Mailed preliminary findings
03/19/2009	Inspection Completed On-site Follow up to the preliminary inspection.
05/14/2009	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The proposed facility is a ranch style structure, located in a residential area of Rochester Hills. The neighborhood consists of similar type single family dwellings. Recreational, medical, cultural, and educational resources are readily available within the city of Rochester Hills, as well as in the surrounding communities of Rochester, Auburn Hills, and Troy.

The main floor consists of three resident bedrooms, the living room, dining room, kitchen, a staff office and three full bathrooms. There is an attached two car garage. The laundry facilities are in the basement.

The furnace and hot water heater are located in the basement with a 1¾ inch solid core door equipped with an automatic self-closing device and positive latching hardware located at the bottom of stairs. The facility is equipped with an interconnected, hardwired smoke detection system, with battery back up, 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	11'4"x9'11"-1'8"x1'	111	1
2	12'5"x18'-2'2"x9'9"	221	2
3	11'4"x13'3"	150	1

The living, dining, and sitting room areas measure a total of 538 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The maximum capacity is restricted to four (4).

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 four (4) male or female ambulatory adults whose diagnosis is 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 Macomb Oakland Regional Center.

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, libraries, local museums, shopping centers and local parks.

C. Applicant and Administrator Qualifications

The applicant is Homes of Opportunity, Inc., which is a "Non-Profit Domestic Corporation". This license entity was established in Michigan on 4/8/1980. 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 Homes of Opportunity, Inc. has submitted documentation appointing Lawrence Maniaci as Licensee Designee and Administrator of the facility.

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

The licensee designee and administrator provided documentation to satisfy the qualifications and training requirements identified in the administrative group home

rules. Homes of Opportunity, Inc. currently operates several other licensed adult foster care facilities in the State of Michigan.

The staffing pattern for the original license of this four-bed facility is adequate and includes a minimum of 2 staff to 4 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 <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 SolutionsTM (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 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 daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges their responsibility to obtain all required documentation and signatures 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 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 required forms and signatures 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

The applicant was in compliance with the licensing act and all applicable administrative rules at the time of licensure. It should be noted, however, that at the time of licensure, this facility is currently providing services to four individuals. This application was essentially a change in licensee due to Macomb Oakland Regional Center terminating their contract for services with the previous licensee.

IV. RECOMMENDATION

Mail clad A Sob . Treez

I recommend issuance of a temporary license to this adult foster care small group home (capacity 1-4).

The court you were	05/14/2009
Mildred Schwarcz Licensing Consultant	Dat
Approved By:	
Denice G. Hunn	05/19/2009
Denise Y. Nunn Area Manager	Date