



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



JENNIFER M. GRANHOLM  
GOVERNOR

ISMAEL AHMED  
DIRECTOR

October 29, 2009

Mary Hall  
Special Tree Residential Centers, Ltd.  
Ste. 2  
16880 Middlebelt Rd.  
Livonia, MI 48154

RE: Application #: AS500300572  
Moravian West Community Residence  
38295 E Horseshoe Drive  
Clinton Township, MI 48038

Dear Ms Hall:

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 six (6) 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 (586) 228-2093.

Sincerely,

Maureen J. Fisher, Licensing Consultant  
Bureau of Children and Adult Licensing  
39531 Garfield  
Clinton Township, MI 48038  
(586) 228-2368

enclosure

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

**I. IDENTIFYING INFORMATION**

**License #:** AS500300572

**Applicant Name:** Special Tree Residential Centers, Ltd.

**Applicant Address:** 39000 Chase Road  
Romulus, MI 48174

**Applicant Telephone #:** (734) 941-1142

**Administrator/Licensee Designee:** Mary Hall, Designee

**Name of Facility:** Moravian West Community Residence

**Facility Address:** 38295 E Horseshoe Drive  
Clinton Township, MI 48038

**Facility Telephone #:** (586) 307-8140

**Application Date:** 02/20/2009

**Capacity:** 6

**Program Type:** TRAUMATICALLY BRAIN INJURED

## II. METHODOLOGY

|            |  |
|------------|--|
| 02/20/2009 | Enrollment   |
| 03/04/2009 | Contact - Document Received<br>File received from Central Office on 3/4/2009.                    |
| 03/06/2009 | Application Incomplete Letter Sent   |
| 10/05/2009 | Inspection Completed On-Site (preliminary inspection)  |
| 10/23/2009 | Application Complete/On-site Needed<br>Final documents received; onsite scheduled for 10/29/2009 |
| 10/29/2009 | Inspection Completed On-site   |
| 10/29/2009 | Inspection Completed-BFS Full Compliance   |

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The facility is located in a residential neighborhood within the suburb of Clinton Township, a suburb northeast of the City of Detroit. The property is owned by the licensee corporation, Special Trees Residential Centers, Ltd., a Michigan corporation. Proof of ownership and a certificate of occupancy issued by the Charter Township of Clinton Building Department 10/13/2009 is contained in the facility file. The community is fully developed and features medical, recreational, and educational resources in close proximity to the facility.

Moravian West Community Residence facility is a 5100 square foot, brick, ranch-style home with an attached two car garage with a cement block-style patio in the rear yard and a utility shed for the storage of maintenance equipment. The patio (accessed from the home from the kitchen/dinette area) and front porch are installed and graded in a manner that provides for wheelchair accessibility; an additional wood wheelchair ramp is located at the rear of the home at an egress door near the bedrooms. A privacy fence is located at the back of the rear yard; otherwise, the rear yard is not enclosed by fencing. The property is fully landscaped in keep in a manner consistent with other homes in the community. The home and surrounding community is serviced by public water and sewage systems.

The home is heated and cooled by a gas, forced-air heating system (with three furnaces, one on the first floor of the home and two in the basement) and central air conditioning. In compliance with R400.14511 for furnaces located in the basement, the facility has standard floor separation which includes a fully-stopped fire door that is equipped with a self-closing device and positive-latching hardware at the top of the basement stairs. The furnace that is located on the first floor is enclosed in a room that is fully dry walled and has a solid-core door in a fully-stopped frame that is equipped

with an automatic self-closing device and positive-latching hardware; the enclosure includes a permanent outside vent to assure proper combustion.

The home features six bedrooms, three full baths and a lavatory, a game room, a living room, a dining room, a large kitchen with a dining area, an activities room, a room designated as a staff office, a first floor laundry room, and a basement under part of the house. Gas fireplaces are located in the game room and kitchen; per the licensee, the fuel source to both fireplaces has been disconnected and neither unit will be used at this time. As discussed with the licensee designee and administrator at the time of the final inspection, should they wish to use one or both fireplaces in the future, notice to the Department is required that includes verification that the chimneys have been inspected and found to be in safe condition and that the dampers have been affixed in a permanently open position for the venting of gas fumes.

The house was fully furnished at the time of final inspection. The hot water temperature at the time of final inspection was observed to be within the acceptable range as designated in R400.14401(2). The refrigerator and freezer were equipped with approved thermometers. Cabinetry for the storage of medications and cleaning supplies included locking devices as required by R400.14312(1) and R400.14401(6). All three bathrooms were equipped with required safety equipment including non-skid surfacing and handrails and included soap and paper towels for hand washing.

I measured six resident bedrooms and the communal rooms designated for resident use and activities to determine capacity in accordance with R400.14409(6)(c) and R400.14405(1). The square footage more than exceeds what is required by rule for a small group home with a maximum capacity of six residents. The measurements are as follows:

|               |                |                   |
|---------------|----------------|-------------------|
| Bedroom 1     | 13'8" x 10'    | 134.3 square feet |
| Bedroom 2     | 11' x 13'4"    | 146.6 square feet |
| Bedroom 3     | 16'2" x 9'10"  | 159 square feet   |
| Bedroom 4     | 12' x 11'      | 132 square feet   |
| Bedroom 5     | 14' x 14'      | 196 square feet   |
| Bedroom 6     | 14'11" x 12'7" | 187.7 square feet |
| Game Room     | 14'4" x 15'    | 290 square feet   |
| Living Room   | 24'8" x 17'8"  | 435.5 square feet |
| Dinette       | 9' x 11'       | 99 square feet    |
| Dining Room   | 16'4" x 11'6"  | 187.8 square feet |
| Activity Room | 10' x 19'4"    | 193.3 square feet |

(Total square footage of community space: 1205.6 square feet.)

## **B. Program Description**

Moravian West Community Residence is being established by the Special Tree Residential Centers, Ltd. to service a maximum of six male and female adults with traumatic brain injuries and/or spinal cord injuries. This corporation, established in the State of Michigan in 1985, operates fifteen other adult foster care facilities serving the same populations in Macomb, Wayne, Oakland, and Saginaw counties. The licensee designee, Mary Jo Hall, and administrator, Geoffrey Rantala have a demonstrated history of meeting the program requirements detailed in R400.14201 and R400.14202 for these positions. They have submitted Record Clearance Requests and proof of their good health and negative tuberculosis testing results as required.

The applicant has submitted all required documentation including financial documentation assuring the financial capability and stability of this corporation. The staffing plan indicates that the ratio of staff to residents will vary in accordance with the needs and number of residents residing in the facility at any given time, specifically:

1. 1:4 during the day and afternoon shifts
2. 1:5 or 1:3 during the midnight shift
3. at times when there are 6 residents or more than 3 residents with 2 utilizing wheelchairs, 2 staff will be scheduled for the midnight shift

The applicant has stated that all staff will meet all training and competency requirements in accordance with R400.14204.

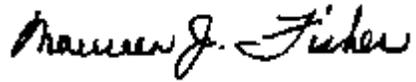
I have reviewed the personnel policies, job descriptions, and house rules submitted by the applicant and found that they meet all requirements. The applicant was provided technical assistance on the statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct service to residents. Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident, and employee record keeping, including the handling and accounting of resident funds.

## **C. Rule/Statutory Violations**

The applicant was found to be in substantial compliance with the licensing act and applicable administrative rules.

**IV. RECOMMENDATION**

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



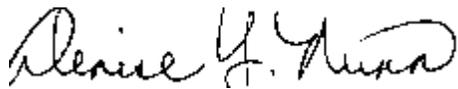
10/29/2009

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Maureen J. Fisher  
Licensing Consultant

Date

Approved By:



10/29/2009

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Denise Y. Nunn  
Area Manager

Date