

RICK SNYDER GOVERNOR State of Michigan DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN DIRECTOR

November 5, 2013

Denise Foote Impact Inc 1001 Military St Port Huron, MI 48060

> RE: License #: AS740012984 Simpson House 3240 Simpson Rd Fort Gratiot, MI 48059

Dear Ms. Foote:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility. Per your request, the population served in the Simpson House facility has been expanded to include the mentally ill population. The facility's special certification has also been expanded to include both the developmentally disabled and mentally ill populations.

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,

Manner J. Ficher

Maureen J. Fisher, Licensing Consultant Bureau of Children and Adult Licensing 4th Floor, Suite 4B 51111 Woodward Avenue Pontiac, MI 48342 (586) 256-1081

enclosure

## MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING ADDENDUM TO ORIGINAL LICENSING STUDY REPORT

# I. IDENTIFYING INFORMATION

License #:	AS740012984
Licensee Name:	Impact Inc
Licensee Address:	1001 Military St Port Huron, MI 48060
Licensee Telephone #:	(810) 985-5437
Licensee Designee:	Denise Foote
Administrator:	Kristine Curtis
Name of Facility:	Simpson House
Facility Address:	3240 Simpson Rd Fort Gratiot, MI 48059
Facility Telephone #:	(810) 985-5706
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED CLF/DD MENTALLY ILL

### II. Purpose of Addendum

The licensee submitted application—including that of special certification-- to expand the program served at the facility to include the mentally ill population.

### III. Methodology

- 11/1/2013 Request for modification of terms of the license received along with revised program statement, admission policy, etc.
- 11/4/2013 Application for modification of Certification of Specialized Programs received.
- 11/5/2013 Review of application materials.

### IV. Description of Findings and Conclusions

On 11/1/2013, the licensee organization submitted a request to modify the terms of the license to expand the program scope from developmentally disabled and physically handicapped to also include the mentally ill population. On 11/4/2013, the licensee organization submitted the supplemental application needed for amendment of the special certification status to include the new population.

On 11/5/2013, I reviewed the applications and amended program materials and determined them to be complete.

### V. Recommendation

I recommend approval of modification of the terms of this license and special certification to add the mentally ill population.

Manner J. Ficher

11/5/2013

Maureen J. Fisher Licensing Consultant Date