



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

June 18, 2018

Dr. Randal Bruce
Aspire Rehabilitation Services, LLC
Suite 211
1000 John R
Troy, MI 48083

RE: Application #: AS500392093
Eden Park
35008 Eden Park Drive
Sterling Heights, MI 48312

Dear Dr. Randal Bruce:

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 "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(586) 676-2877

enclosure

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

I. IDENTIFYING INFORMATION

License Application #:	AS500392093
Licensee Name:	Aspire Rehabilitation Services, LLC
Licensee Address:	Suite 211 1000 John R Troy, MI 48083
Licensee Telephone #:	(248) 951-8180
Administrator/Licensee Designee:	Dr. Randal Bruce
Name of Facility:	Eden Park
Facility Address:	35008 Eden Park Drive Sterling Heights, MI 48312
Facility Telephone #:	(248) 951-8180
Application Date:	01/11/2018
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

01/11/2018	On-Line Enrollment
01/17/2018	Contact - Document Sent Rule & Act booklets
01/30/2018	Contact - Document Received Application and record clearances for Randal Bruce, PhD. Licensee Designee/administrator.
01/31/2018	Contact - Document Received The Licensing Unit received the RI-030 for Dr. Bruce.
02/03/2018	Contact - Document Received Licensing file received from Central office
02/13/2018	Application Incomplete Letter Sent
03/12/2018	Application Complete/OFS Needed
04/30/2018	Inspection Completed-BCAL Sub. Compliance
05/03/2018	Document Sent Confirming Letter emailed to Dr. Bruce.
05/12/2018	Documents Received Dr. Bruce faxed/mailed and emailed documents needed.
05/14/2018	Documents Received Dr. Bruce faxed/mailed and emailed documents needed.
05/25/2018	Technical Assistance A phone conference with Dr. Bruce regarding direct experience with the population. Received revised resume via email.
06/04/2018	Contact- Email I sent email to Dr. Bruce regarding his application name.
06/04/2018	Contact- Email I received revised program statement and admissions policy to correct name of applicant and population types.
06/04/2018	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules governing operation of small group adult foster care facilities with an approved capacity of 1-6 residents, licensed or proposed to be licensed after 5/24/1994.

A. Physical Description of Facility

Eden Park home is in the city of Sterling Heights MI, in Macomb County. The home is single family brick ranch style home on a corner lot. The home has two full bathrooms, first floor laundry, kitchen, private backyard, large shed and a two-car attached garage. The home has an unfinished basement. The home is not wheelchair accessible.

The gas furnace and hot water heater are located on the basement level of the home and is constructed of materials that provide a 1-hour-fire-resistant rating with a 1¾ inch solid core door in a fully stoppable frame, equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with smoke detectors and operational. The home has central air and forced heating. The home uses municipal water and sewage.

The home is close to Baumgartner Park, Sterling Heights Family Park and Freedom Hill County Park. The home is in Warren Consolidated school district. The home is near many community resources, several restaurants and shopping centers. The home is owned by Klarns Daoud and Wasnaa S. Daoud and an appropriate warranty deed was submitted.

The dimensions and capacity of the bedrooms are as follows:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	18 x 12	216	2
2	15 x 13	195	2
3	14 x 12	168	2

Total capacity: 6

The living room, dining, and kitchen measure a total of 708 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 6 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Eden Park is designed to provide adult foster care to six adults 18 years of age and older both male and female residents. The population served will be primarily traumatic brain injuries and physical handicapped (ambulatory) and aged. Eden Park caters to the

physically handicapped that are either in transition to the next level of independence or wish to remain long term.

Eden Park will provide a safe and supportive, family orientated, home-like setting while facilitating community involvement. Eden Park will offer to each resident a highly individualized learning and giving environment within a structured daily routine. Program services provided include assistance and skills training in basic and advanced activities of daily living; group and individual leisure activities and community integration; and transportation and assistance as needed with community activities, services and therapeutic programs. These services will be provided by trained Rehabilitation Service Technicians, who will treat each resident as an individual with unique needs and abilities, and will help each resident to attain his or her highest potential in community living skills.

The residents in the home may attend day programs and therapies, such as recreational or vocational rehabilitation. On the weekends and during the evening hours, the residents may go into the community (e.g. movies, out to eat, shopping, concerts, and sporting events). Transportation will be available within a 20-mile radius, when not covered by insurance and on a first come basis as vehicles are available. The home is in a residential area that is in Sterling Heights and the Rehabilitation Technicians will make every effort to have the residents do as many activities as possible. We encourage the relatives of the residents to be involved.

C. Applicant and Administrator Qualifications

The applicant is Aspire Rehabilitation Services LLC. which is a "Domestic Nonprofit Corporation", established in Michigan on 01/25/2013. An annual budget was provided projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

Randal Bruce Ph.D. has been appointed as the licensee designee and administrator of the facility. Licensing record clearance requests were completed with no LEIN convictions recorded for Dr. Bruce. Dr. Bruce submitted a current medical clearance with a statement from a physician documenting good health and tuberculosis negative results.

Dr. Bruce, has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Dr. Bruce has experience in nursing homes when he worked as a nurse's aide/direct care aid to elderly patients. Dr. Bruce has worked with the following populations: elderly, clients with dementia and general rehabilitation clients. Dr. Bruce worked in group homes providing care to both elderly, dementia and traumatically brain injured clients. Dr. Bruce was responsible for a set number of patients or a wing, and his responsibilities ranged from feeding, dressing, personal care such as changing diapers, bathing, assisting with activities of daily living ADLs, making beds, getting clients up and putting them to bed.

Dr. Bruce provided the actual competencies and relevant to his experience and training with the population to be served at Eden Park. In addition, to his direct experience with the population, Dr. Bruce is a licensed clinical psychologist/neurologist and board-certified rehabilitation psychologist. Dr. Bruce has 30 years' experience with evaluating and treating individuals with traumatic brain and spinal cord injuries and their families.

Dr. Bruce 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.

Dr. Bruce acknowledged an understanding of the responsibility to assess the good moral character of employees and acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

Dr. Bruce acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff who have received medication training and have been determined competent by the licensee or licensee designee will administer medication to residents. Resident medication will be stored in a locked cabinet and daily medication logs will be maintained on each resident receiving medication.

Dr. Bruce acknowledged the responsibility to obtain all required good 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, the licensee designee acknowledged the responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteers and to follow the retention schedule for all of the documents contained within the employee file.

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

Dr. Bruce acknowledged the 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 as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Dr. Bruce acknowledged the 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.

Dr. Bruce acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. A separate Resident Funds Part II BCAL-2319 form will be completed 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 residents' personal money transactions that have been agreed to be managed by Lake Orion.

Dr. Bruce acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights and indicated the intent to respect and safeguard these resident rights.

Dr. Bruce acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

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

D. Rules/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determine. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

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

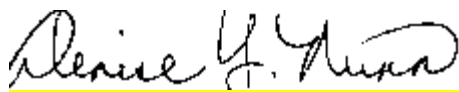


06/04/2018

LaShonda Reed
Licensing Consultant

Date

Approved By:



06/18/2018

Denise Y. Nunn
Area Manager

Date