

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

May 4, 2018

Sherri Turner Adult Learning Systems-Lower Michigan Suite F 8170 Jackson Road Ann Arbor, MI 48103

RE: Application #: AS500392419

Jewell Pointe

11517 27 Mile Road Washington, MI 48094

Dear Ms. Turner:

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,

Kristine Cilluffo, Licensing Consultant

Ristine Cillufo

Bureau of Community and Health Systems

4th Floor, Suite 4B

51111 Woodward Avenue

Pontiac, MI 48342 (248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

| License Application #: | AS500392419 | |
|---|---------------------------------------|--|
| | | |
| Applicant Name: | Adult Learning Systems-Lower Michigan | |
| | | |
| Applicant Address: | Suite F | |
| | 8170 Jackson Road | |
| | Ann Arbor, MI 48103 | |
| | | |
| Applicant Telephone #: | (734) 408-0112 | |
| | | |
| Administrator/Licensee Designee: | Sherri Turner | |
| | | |
| Name of Facility: | Jewell Pointe | |
| Facility Address: | 44547.07 Mile Dood | |
| Facility Address: | 11517 27 Mile Road | |
| | Washington, MI 48094 | |
| Facility Telephone #: | (734) 408-0112 | |
| l acinty relephone #. | (734) 400-0112 | |
| Application Date: | 02/01/2018 | |
| · · · pp. · · · · · · · · · · · · · · · | 02/01/2010 | |
| Capacity: | 6 | |
| | | |
| Program Type: | MENTALLY ILL | |
| | | |

II. METHODOLOGY

| 02/01/2018 | Enrollment Online enrollment |
|------------|---|
| 02/02/2018 | Contact - Document Sent Rule & Act booklets |
| 02/02/2018 | Application Incomplete Letter Sent Rec clearances for Sherri (LD) & Admin |
| 02/09/2018 | Contact - Document Received Licensing file received from Central office |
| 02/13/2018 | Contact - Telephone call made Returned call from Tracey Shier |
| 02/13/2018 | Application Incomplete Letter Sent Emailed application incomplete letter to Tracy Shier and Sherri Turner. |
| 02/22/2018 | Contact - Document Received Received email from Rachel Anna. Email included contract, organizational chart, budget, employee handbook, floor plan, job descriptions, lease agreement, permission to inspect and routine procedures. |
| 02/22/2018 | Contact - Document Sent Email to Rachel Anna |
| 02/23/2018 | Contact - Document Sent Email to and from Tracie Shier |
| 02/26/2018 | Inspection Completed On-site |
| 02/26/2018 | Application Complete/On-site Needed |
| 03/09/2018 | Inspection Completed On-site |
| 03/19/2018 | Contact - Document Received Email from Sherri Turner. Sent return email |
| 03/26/2018 | Contact- Document Sent Email to Sherri Turner. Received return email |
| 04/26/2018 | Contact- Document Received Email from Sherri Turner |

| 05/03/2018 | Contact- Document Received | |
|------------|---|--|
| | Received emailed pictures of new furniture cushions from Sher | |
| | Turner | |
| | | |

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 and Regulations applicable to the licensure of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1994.

A. Physical Description of Facility

Jewell Pointe is a one story small adult foster care home located in Washington, MI. The home has a capacity for six residents. The home has city water and sewer. Parking is available in the front of the home. Emergency medical services are located nearby at Beaumont and Crittenton Hospitals.

The previous licensee for the home was Alternative Community Living, Inc. The licensee requested that residents be moved from the home and license was closed on 02/26/2018. It is anticipated that the residents will be given the opportunity to move back to Jewell Pointe once the new provider is licensed. The new licensee for the home is Adult Learning Systems-Lower Michigan. Sherri Turner will act as the licensee designee for the home. Daniel Grobbel will act as the administrator. Adult Learning Systems provided a copy of the lease agreement and permission to inspect the home.

Jewell Pointe has a capacity of six residents. The home has three bedrooms, two bathrooms, kitchen, dining area, living room, laundry room, offices and den. The furnace is located in the basement. The bedroom and bathroom doors are equipped with positive latching, non-locking against egress hardware. The common areas offer a total of 481 square feet of living space which meets the required 35 square feet of living space for six residents.

The three bedrooms in the home measure as follows:

| Bedrooi | m # | Room Dimensions | Total Square Footage | Total Resident Beds |
|---------|-----|-----------------|----------------------|------------------------|
| 1 | | 14'1" x 16' | 225 | 2 |
| 2 | | 14'1" x 10'2" | 143 | 2 |
| 3 | | 14'1" x 10'6" | 147 | 2 |

Total Capacity: 6

The bedrooms have adequate space, bedding, storage and a window that opens in case of emergency. All of the bedrooms have a chair and a mirror. The refrigerators and

freezers are equipped with thermometers. Medications are kept in locked cabinet. During the onsite inspection through my observation, the home was found to be in substantial compliance with rules pertaining to maintenance and sanitation. Emergency procedures were posted in the home and fire alarms were in working order at the time of inspection. A fire extinguisher was located on each level of the home. I measured the water temperature with a digital thermometer and found the water to be 108.5 degrees Fahrenheit.

B. Program Description

A copy of the program statement was provided for the Jewell Pointe home. The statement indicates that the program is a residential group home for males with mental illness who require a structured setting. Recovery and improvement of functioning for the individuals served is the main focus of the program. The home will service six adult males who have chronic mental illness and no longer require inpatient psychiatric care but need the structure of a group home setting. Diagnosis may vary and include co-occurring disorders, mental conditions, physical disabilities and substance abuse issues. The licensee has a contract with Macomb Community Mental Health and will have special certification for mental illness. The home will provide 24-hour care and supervision and will assist residents with personal hygiene, self-care, medication management, medical care, social skills, recreational and vocational activities, transportation, advocacy and support and reintegration into the community. Area resources include churches, library, potential employment sites and education and recreational facilities.

A copy of staffing pattern was provided. The Jewell Pointe home will have one staff from 12:00 am-8:00 am, two staff from 8:00 am- 4:00 pm and two staff from 4:00 pm to 12:00am.

Sherri Turner is the licensee designee for the home. Ms. Turner has been previously qualified as a licensee designee. She has been employed for Adult Learning Systems since February 1995 and has served as Executive Director since May 1998. Ms. Turner received a Bachelor's degree in Health Administration from Eastern Michigan University in 1996. Ms. Turner has been fingerprinted and provided copy of medical and TB test. Ms. Turner also submitted a current First Aid/CPR certificate and training record.

Daniel Grobbel will act as the administrator for the home. Mr. Grobbel has been employed with Adult Learning Systems since 1989 providing supports to adults with mental illness and developmentally disabled adults. Mr. Grobbel received a Bachelor of Science Degree in Human Resource Development from Oakland University in 1985. Mr. Grobbel has been fingerprinted and provided copy of medical and TB test. Mr. Grobbel provided a current First Aid/CPR certificate and training record.

C. Rule/Statutory Violations

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

IV. RECOMMENDATION

Area Manager

I recommend issuance of a temporary license to the small adult foster care group home, Jewell Pointe, with a capacity of six (6) residents.

The temporary license will be in effect for a six month period. Another licensing renewal will be conducted after six months.

| Kristine Cillello | 05/03/2018 |
|---|------------|
| Kristine Cilluffo Licensing Consultant | Date |
| Approved By: | |
| Denie G. Munn | 05/04/2018 |
| Denise Y. Nunn | Date |