



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

SHELLY EDGERTON  
DIRECTOR

December 7, 2018

Godwin Ilonze  
Annextra Healthassist Associates, LLC  
451 N. Hanlon Street  
Westland, MI 48185

RE: Application #: AS630386442  
Annextra Healthassist Associates  
388 W. Hayes Ave.  
Hazel Park, MI 48030

Dear Mr. Ilonze:

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 5 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 "Kristen Donnay".

Kristen Donnay, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(248) 296-2783

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630386442
<b>Applicant Name:</b>	Annextra Healthassist Associates, LLC
<b>Applicant Address:</b>	388 W. Hayes Avenue Hazel Park, MI 48030
<b>Applicant Telephone #:</b>	(313) 377-4486
<b>Administrator/Licensee Designee:</b>	Godwin Ilonze
<b>Name of Facility:</b>	Annextra Healthassist Associates
<b>Facility Address:</b>	388 W. Hayes Ave. Hazel Park, MI 48030
<b>Facility Telephone #:</b>	(248) 808-6608
<b>Application Date:</b>	01/13/2017
<b>Capacity:</b>	5
<b>Program Type:</b>	MENTALLY ILL DEVELOPMENTALLY DISABLED

## II. METHODOLOGY

01/13/2017	Enrollment
01/19/2017	Application Incomplete Letter Sent 1326/Fingerprint/RI 030 for Godwin
09/21/2017	Contact - Document Sent 10 day Inactive Application Letter
10/03/2017	Contact - Document Sent Re-sent 1326/RI 030 via email to applicant per telephone request.
10/04/2017	Contact - Document Received 1326/RI 030/Fingerprint for Godwin Ilonze
10/04/2017	Contact - Document Sent Rule & Act Books
10/04/2017	File Transferred to Field Office Pontiac
10/09/2017	Contact - Document Received Licensing file received from Central office
10/23/2017	Application Incomplete Letter Sent
02/14/2018	Contact - Telephone call made Re: additional documentation needed
05/17/2018	Inspection Completed On-site
05/17/2018	Inspection Completed-BCAL Sub. Compliance
06/06/2018	Corrective Action Plan Received
06/06/2018	Corrective Action Plan Approved
07/31/2018	Inspection Completed On-site
07/31/2018	Application Incomplete Letter Sent
08/17/2018	Contact - Document Sent Rule books, technical assistance
11/08/2018	Application Incomplete Letter Sent

11/11/2018	Contact - Document Received Revised policy and procedures, licensee designee qualifications, physical/TB test
11/15/2018	Inspection Completed On-site
11/15/2018	Inspection Completed- BCAL Full Compliance
11/25/2018	Contact - Document Received Budget, resume, updated policy/procedures
11/25/2018	Application Complete

## II. 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

Annextra Healthassist Associates is located in a residential area at 388 W. Hayes Ave., Hazel Park, MI 48030. The home is a two-story structure with a full basement. The first floor of the home consists of a living room, dining room, kitchen, one full bathroom, one bedroom, and an office area. The second story of the home consists of two bedrooms and one full bathroom. The home is not wheelchair accessible.

Annextra Healthassist Associates is located 6 miles away from Ascension Providence Hospital, which includes a 24/7 emergency department. The Hazel Park police department will respond to emergency calls from the home. The home is located in a suburban area near many restaurants, recreational facilities, hospitals, shopping centers, and places of worship.

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. The facility is equipped with an interconnected, hardwired smoke detection system, with battery backup, which is fully operational. The home has public water and sewer.

The bedroom and bathroom doors are equipped with positive latching, non-locking against egress hardware. All of the bedrooms have adequate space, bedding, and storage. All of the bedrooms have a chair and mirror. During the onsite inspection, I observed that the home was in substantial compliance with rules pertaining to maintenance and sanitation. The refrigerator and freezer are equipped with

thermometers. I measured the water temperature with a digital thermometer and it was between 105-120° F.

Bedrooms were measured during the onsite inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11.3 x 13	146.9	2
2	10.8 x 11.3	122	1
3	11.9 x 13.2	157.1	2

**Total capacity: 5**

The living room and dining room areas offer a total of 289.4 square feet of living space, which exceeds the required 35 square feet of living space for five residents.

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

## **B. Program Description**

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for Annextra Healthassist Associates were reviewed and accepted as written. Annextra Healthassist Associates will provide supervised services twenty-four hours per day, seven days a week to residents with mental illness and developmental disabilities in a family like environment. Annextra Healthassist Associates believes that in a conducive and home-like environment with adequate experienced professional staff, residents will improve their adaptive, social, and psychological skills which will enable them to move back into the community.

Annextra Healthassist Associates will provide assistance and teach residents how to complete activities of daily living including dressing, bathing, personal hygiene, laundry, meal preparation, feeding, and medication administration. Residents will have the opportunity to participate in community-based activities, including day treatment programs, field trips, skill maintenance work programs, and recreational outings.

The proposed staffing pattern for the original license of this five-bed facility is adequate and includes a minimum of one staff to five residents per shift. The applicant acknowledged that the staff to resident ratio may need to be adjusted to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs.

## **C. Applicant and Administrator Qualifications**

The applicant is Annextra Healthassist Associates, LLC, which is a "Domestic Limited Liability Company", established in Michigan on 05/24/16. The applicant has established

an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

Annextra Healthassist Associates, LLC has appointed Godwin Ilonze as the licensee designee and administrator of the facility.

Licensing record clearance requests were completed with no LEIN convictions recorded for Mr. Ilonze. Mr. Ilonze submitted a current medical clearance with a statement from a physician documenting good health and tuberculosis negative results.

Mr. Ilonze meets the qualifications and training requirements identified in the administrative group home rules. Mr. Ilonze has a Bachelor of Arts degree in biology from the College of St. Scholastica, as well as a Practical Nursing Certificate from Athena Career Academy. He has over three years of experience as a direct care worker in an adult foster care facility, providing care and supervision to the mentally ill and developmentally disabled populations. He also has over nine years of experience providing nursing care in a nursing/rehab center.

Mr. Ilonze 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.

Mr. Ilonze 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](http://www.miltcpartnership.org)) and the related documents required to demonstrate compliance.

Mr. Ilonze 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. In addition, Mr. Ilonze has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained for each resident receiving medication.

Mr. Ilonze 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, Mr. Ilonze 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.

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

Mr. Ilonze 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.

Mr. Ilonze 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.

Mr. Ilonze acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Mr. Ilonze acknowledged that 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 Annextra Healthassist Associates, LLC.

Mr. Ilonze 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.

Mr. Ilonze 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.

Mr. Ilonze 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.

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

The facility has been determined to be in compliance with the applicable administrative rules and the licensing statute, based upon the onsite inspection conducted and the licensee's intent to comply with all administrative rules for a small group home as well as the licensing act, Public Act 218 of 1979, as amended.

It should be noted that Annextra Healthassist Associates was operating as an unlicensed facility, as residents have already moved into the home. At the time of licensure, the facility is currently providing services to five individuals.

**III. RECOMMENDATION**

I recommend issuance of a six month temporary license to this adult foster care facility, Annextra Healthassist Associates LLC, with a capacity of five residents.



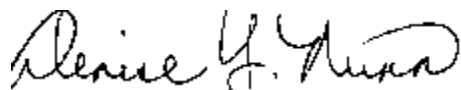
12/06/18

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Kristen Donnay  
Licensing Consultant

Date

Approved By:



12/07/2018

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Denise Y. Nunn  
Area Manager

Date