

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

June 18, 2019

Kimberly O'Neal Spectrum Community Services 28303 Joy Rd. Westland, MI 48185

> RE: Application #: AS630397256 Oakhill Home 7010 Oak Hill Rd. Clarkston, MI 48348

Dear Ms. O'Neal:

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,

Kisten Doma

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

License #:	AS630397256	
Licensee Name:	Spectrum Community Services	
Licensee Address:	28303 Joy Rd.	
	Westland, MI 48185	
Licensee Telephone #:	(616) 447-9380	
Licensee Designee:	Kimberly O'Neal	
	Kinch out Montin	
Administrator:	Kimberly Martin	
Name of Essility	Oakhill Home	
Name of Facility:		
Facility Address:	7010 Oak Hill Rd.	
racinty Address.	Clarkston, MI 48348	
Facility Telephone #:	(248) 625-7575	
Application Date:	11/15/2018	
••		
Capacity:	6	
Program Type:	PHYSICALLY HANDICAPPED	
	DEVELOPMENTALLY DISABLED	
	MENTALLY ILL	
	AGED	

# II. METHODOLOGY

11/15/2018	On-Line Enrollment	
11/16/2018	Contact - Document Sent Acts book.	
11/16/2018	Lic. Unit file referred for background check review Given to Candace Facility/People with Red Screen.	
11/16/2018	Lic. Unit file referred for background check review Given to Candace Kimberly has ICHAT hit.	
12/05/2018	Contact - Document Received 1326 for Kimberly O. 100 for Kimberly M.	
12/05/2018	File Transferred To Field Office Pontiac.	
12/10/2018	Contact - Document Received Licensing file received from Central office	
12/20/2018	Application Incomplete Letter Sent	
01/14/2019	Contact- Document Received Program statements and policies	
02/28/2019	Inspection Completed On-site	
02/28/2019	Inspection Completed-BCAL Sub. Compliance	
03/20/2019	Inspection Report Requested - Health	
03/21/2019	Corrective Action Plan Received	
03/21/2019	Corrective Action Plan Approved	
05/08/2019	Contact- Document Received Special Cert. Application	
05/20/2019	Inspection Completed-Env. Health : A	
05/20/2019	Application Complete/On-site Needed	
06/12/2019	Inspection Completed On-site	
06/12/2019	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 and Regulations applicable to the licensure of small group facilities, licensed or proposed to be licensed after 05/24/1994.

### A. Physical Description of Facility

Oakhill Home is a single-story ranch home located at 7010 Oak Hill Rd., Clarkston, MI 48348. The first floor of the home consists of a living room, dining room, kitchen, office, three double occupancy bedrooms, two full bathrooms, one half bathroom, and a laundry room. The home has two primary means of egress, which lead directly to firm-surfaced, unobstructed ground which allows the occupants to move a safe distance away from the building. The home is qualified for admission of residents who use a wheelchair.

Oakhill Home is located in a residential area of Clarkston with similar style single family homes. The facility is a short distance from many restaurants, recreational facilities, hospitals, shopping centers, and places of worship. The Oakland County Sheriff's Department responds to emergency calls from the home.

The furnace and hot water heater are located in a utility room on the main floor of the home. They are enclosed in a room with a 1<sup>3</sup>/<sub>4</sub> inch solid core door 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 private water and a private sewer system. An environmental health inspection was completed on 05/20/19 by the Oakland County Health Division and the facility was determined to be in substantial compliance with applicable rules.

Resident bedrooms were measured during the onsite inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	13.2 x 12.6	166.3	2
2	13.6 x 11.6	157.8	2
3	15.6 x 11.2	174.7	2

Total capacity: 6

Resident Living Space	Room Dimensions	Total Square Footage
Dining Room	13.8 x 10.9	150.4
Living Room	12.9 x 12.3	158.7

The living room and dining room areas offer a total of 309.1 square feet of living space, which exceeds the minimum of 35 square feet per resident.

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

## B. Program Description

Admission and discharge policies, program statements, refund policies, personnel policies, and standard procedures for Oakhill Home were reviewed and accepted as written. Oakhill Home will provide personal care, supervision, and protection, in addition to room and board, on a 24-hour/day schedule, seven days per week for both men and women who are aged, mentally ill, developmentally disabled, and/or physically handicapped. The program will focus on skill building in the areas of self-care, communication, socialization, cognitive functioning, and daily living. The program will also focus on normalizing life patterns and helping each individual to achieve his/her maximum potential. All of the residents in the home will be encouraged to participate in a day program to promote socialization and community integration. A personal behavior support plan will be designed and implemented to address each resident's social, behavioral, and developmental needs. If necessary, behavior interventions and specialized interventions will be developed and identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques. Oakhill Home intends to accept referrals from Oakland County Community Health Network, Macomb/Oakland Regional Center (MORC), and other community mental health agencies.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life and increase the independence of residents.

The proposed staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of one staff to six residents per shift. The applicant acknowledged that they will ensure the staff to resident ratio is adequate in order 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

Spectrum Community Services, Inc., is a "Non-Profit Corporation" established in Michigan on 11/18/1988. Spectrum Community Services, Inc., submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Board of Directors of Spectrum Community Services, Inc., has submitted documentation appointing Kimberly O'Neal as licensee designee and Kimberly Martin as administrator of the facility.

Criminal history background checks were completed for the licensee designee, Kimberly O'Neal, and the administrator, Kimberly Martin. They were determined to be of good moral character to provide licensed adult foster care. Ms. O'Neal and Ms. Martin submitted current medical clearances with a statement from a physician documenting good health and tuberculosis negative results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. The licensee designee, Kimberly O'Neal, has a bachelor's degree in interdisciplinary studies and has completed all training requirements. Ms. O'Neal has over six years of experience working with and providing services to individuals with developmental disabilities and/or mental illness. She has held positions as a support coordinator, behavioral technician, program administrator, and director since she began employment with Spectrum Community Services in 2011. The administrator, Kimberly Martin, has a diploma and more than twenty years of experience working with developmentally disabled and mentally ill individuals. Over the past ten years, Ms. Martin has held positions as a direct care worker, medical coordinator, program administrator and quality coordinator.

Ms. O'Neal and Ms. Martin 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.

Ms. O'Neal and Ms. Martin acknowledged an understanding of the responsibility to assess the good moral character of employees. Ms. O'Neal and Ms. Martin acknowledge 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.

Ms. O'Neal and Ms. Martin acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the 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.

Ms. O'Neal and Ms. Martin 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, Ms. O'Neal and Ms. Martin acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. O'Neal and Ms. Martin acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

Ms. O'Neal and Ms. Martin acknowledge 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.

Ms. O'Neal and Ms. Martin 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.

Ms. O'Neal and Ms. Martin acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. O'Neal and Ms. Martin 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 the applicant.

Ms. O'Neal and Ms. Martin 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. Ms. O'Neal and Ms. Martin indicated the intent to respect and safeguard these resident rights.

Ms. O'Neal and Ms. Martin 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.

Ms. O'Neal and Ms. Martin 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. 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 Spectrum Community Services was operating Oakhill Home under a management agreement with the previous licensee, LADD, Inc., while licensure was pending. At the time of licensure, the facility is currently providing services to five individuals.

#### **IV. RECOMMENDATION**

I recommend issuance of a six-month temporary license to this adult foster care facility, Oakhill Home, with a capacity of six residents.

Kisten Donna

06/14/19

Kristen Donnay Licensing Consultant Date

Approved By:

Denie Y. Munn

06/18/2019

Denise Y. Nunn Area Manager

Date