

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 18, 2021

Amy Sheibar Work Skills Corporation 100 Summit Street Brighton, MI 48166

RE: Application #: AS470405553

Coon Lake House

3201 East Coon Lake Road Gena Township, MI 48843

Dear Ms. Sheibar:

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 (517) 284-9730.

Sincerely,

Julie Elkins, Licensing Consultant

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Julie Ellers

Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS470405553

Applicant Name: Work Skills Corporation

Applicant Address: 100 Summit Street

Brighton, MI 48166

Applicant Telephone #: (734) 709-7784

Licensee Designee: Amy Sheibar

Administrator: Amy Sheibar

Name of Facility: Coon Lake House

Facility Address: 3201 East Coon Lake Road

Gena Township, MI 48843

Facility Telephone #: (734) 709-7784

Application Date: 08/24/2020

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODOLOGY

08/24/2020	Enrollment Online enrollment
08/24/2020	Application Incomplete Letter Sent App - Corrected; IRS Itr; 1326, RI-030, & FPs for Amy; AFC100 for Admin.
09/01/2020	Contact - Document Received App - Corrected.
09/01/2020	Inspection Report Requested - Health Inv. #1030849
09/02/2020	Application Incomplete Letter Sent.
09/02/2020	Comment Special Certified Application emailed to LD.
12/22/2020	SC-Application Received – Original.
03/12/2021	Inspection Completed-Env. Health: A.
04/15/2021	Application Complete/On-site Needed.
04/15/2021	Inspection Completed On-site.
04/15/2021	Inspection Completed-BCAL Sub. Compliance.
05/12/2021	Inspection Completed-BCAL Full Compliance.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Coon Lake Home is a large ranch style facility that sits on 6.8 acres in Gena Township in Livingston County. Gena Township is a charter township located in the heart of Livingston County, Michigan. Gena Township has lakes and wetlands, rolling hills and meadows, state parks and wildlife all abound in this beautiful community of country living. Gena Township has restaurants, shopping, banks, post office, library, doctors, hospitals, and a variety of churches.

The front of the facility has a large driveway with ample parking for staff, visitors, and guests. The facility itself has six private resident bedrooms on the main floor of the facility with each resident bedroom having its own private full bathroom. Additionally, the main floor of the facility is equipped with a large kitchen, dining area, laundry room, a large family room and an attached two car garage. The house has a large porch in the front of the house and a deck in the back for residents to be able to sit outside and

enjoy nature. The facility does have an elevator to allow wheelchair users access to the finished walkout basement which is equipped with a large resident recreation area and half bathroom. There are no resident bedrooms in the finished basement rather this area is designed for resident relaxation and interaction as well as for a resident sensory area. The basement does have two means of egress one of which exits at grade therefore the basement area will be utilized and accessible to residents. Licensee designee Amy Sheibar has agreed the elevator will not be used for emergency evacuation.

The facility is wheelchair accessible and includes three wheelchair ramps for ease of entry/exit on the main floor of the facility. The first wheelchair ramp exits out the front door onto the driveway. The second wheelchair ramp is located off the main floor side door of the house and exits into the garage. The third wheelchair ramp exits out of the back of the house onto the deck and wraps around to the driveway. The required exit doors are equipped with positive latching non-locking against egress door hardware. All the bedroom and bathroom doors have conforming door hardware. Hallways and door widths inside of the facility are able to accommodate individuals who use wheelchairs to assist with mobility.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11'5" X 15'5"	176.01	1
2	11'5" X 15'5"	176.01	1
3	14'2" X 15'10"	224.31	1
4	11'9" X 15'10"	186.04	1
5	14'9" X 18'	265.5	1
6	16'1" X 16'	257.33	1
Family			
Room	17'5" X 23'10"	415.1	0
Dining			
room	12'2" X 17'10"	216.97	0
Kitchen	12'2" X 17'5"	211.9	0
Recreation			
Room	27'2" X 40'	1,086.67	0
Basement			
Sitting			
Room	16'4" X 23'11"	390.64	0
Basement			

The indoor living and dining areas measures over 3,600 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 six male or female residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

The facilities heating plant, which is a gas forced furnace, is located in an enclosed room in the finished basement equipped with a 1-3/4-inch solid core door. Floor separation has been obtained by a 1-3/4-inch solid core door with positive latching hardware. The heat plant room itself is also constructed of material which has a 1-hour-fire-resistance rating. The facility is equipped with interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. The facility is equipped with a central air conditioning system and with a backup generator that runs the entire facility if power goes out. The facility has two hot water heaters which are located in a different enclosed room in the finished basement of the facility which is equipped with a 1-3/4-inch solid core door and is also constructed of material which has a 1-hour-fire-resistance rating.

The facility utilizes private water supply and sewage disposal system which was inspected by the health department and found to be in full compliance with all applicable environmental health rules on 03/12/2021.

B. Program Description

The applicant intends to provide 24-hour supervision, protection, and personal care to six male and/or female residents who are physically handicapped and/or those diagnosed with developmental disabilities and/or mental illness. The program will include opportunities to develop relationships and socialize with one another and direct care staff members through crafts, bingo, coloring, reading, puzzles, watching television/movies and enjoying the outdoors. The program will assist residents to move towards independence and maintain healthy community connections. Family and friends are strongly encouraged to visit as often as possible with their loved one.

The applicant intends to accept residents with private sources of payment and anticipates receiving referrals by word of mouth or through advertising.

In addition to the above program elements, it is the intent of the applicant to provide recreational activities at the facility such as books for reading, bingo, games, puzzles, crafts, and movies for entertainment. The facility has a large porch and deck for use during warmer weather to enjoy the outdoors.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of Ms. Amy Sheibar to utilize local community resources such as the library, shopping areas/restaurants, Michigan Works, and local churches for recreational activities. The program will utilize resources to provide an environment to enhance the quality of life of residents and increase the independence of residents as appropriate.

C. Applicant and Administrator Qualifications

The applicant Work Skills Corporation is a "Non- Profit Corporation", established in Michigan on November 26, 1973. The applicant 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 has appointed Ms. Amy Sheibar at licensee designee and administrator. Ms. Sheibar reports that all resident files will be kept on the facility grounds.

Criminal history background checks of Ms. Amy Sheibar, the applicant and administrator were completed, and Ms. Amy Sheibar was determined to be of good moral character to provide licensed adult foster care. Ms. Amy Sheibar submitted a statement from a physician documenting good health and current negative tuberculosis test results.

The applicant and administrator, Ms. Amy Sheibar provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Sheibar has a Master of Science degree in Clinical Behavioral Psychology. She has 18 years' experience as a behavioral psychologist. Since 2013, Ms. Sheibar's experiences include writing behavior support plans, conducting staff training, and monitoring adults with Mental Illness and Developmental Disabilities. Additionally, Ms. Sheibar has provided outpatient therapy to adults and adolescents with mental illness. Ms. Sheibar has been providing clinical support services for adults with a variety of mental health diagnoses, developmental and physical handicaps by writing service plans, monitoring progress and reviewing reports since 2013. Ms. Sheibar has 8 ½ years' experience as an admissions coordinator for a traumatic brain injured (TBI) program and is a certified brain injury specialist. Ms. Sheibar has been a licensee designee and administrator for another licensed facility that provides service to those with traumatic brain injuries since 2013. Ms. Sheibar reports that several of the residents in that licensed home has a variety of physical challenges secondary to their brain injury diagnosis. Ms. Sheibar is a Crisis Prevention Intervention (CPI) instructor and has been supervising a program for autistic youth since 2018. Ms. Sheibar reports having experience in working with adults that have autism, intellectual disabilities, developmental disabilities, fibromyalgia, chronic fatigue syndrome, amputation, back injury/disability, brain injury, cancer, cerebral palsy, diabetes, epilepsy, hearing loss, heart disease, homelessness, kidney disease, learning disability, mental illness, multiple sclerosis, muscular dystrophy, paraplegia, pervasive developmental disability, quadriplegia, and substance abuse.

Ms. Amy Sheibar indicated that the staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of one staff for six residents per shift. Ms. Amy Sheibar acknowledged that the staff to resident ratio may need to be adjusted in order to provide the level of supervision or personal care required by the residents due to changes in the personal care, supervision, or protection needs. During nighttime hours, direct care staff members will be awake.

Ms. Amy Sheibar 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. Amy Sheibar acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledged 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. Amy Sheibar 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 Ms. Sheibar will administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Ms. Amy Sheibar 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 applicant 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. Amy Sheibar 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. Amy Sheibar 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.

Ms. Amy Sheibar 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. Amy Sheibar acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all resident personal money transactions that have been agreed to be managed by the applicant.

Ms. Amy Sheibar 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. The applicant indicated the intent to respect and safeguard these resident rights.

Ms. Amy Sheibar 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. Amy Sheibar 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

Compliance with the licensing act and administrative rules related to the physical plant has been determined. 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 with a capacity of six (6) residents.

Julie Ellers	05/17/	2021
Julie Elkins Licensing Consultant		Date
Approved By:		
Dawn Simm	05/18/2021	
Dawn N. Timm Area Manager		Date