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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 30, 2021

Eric Van Acker and Angela Jocquico Resilire Neurorehabilitation, LLC Suite 2 16880 Middlebelt Road Livonia, MI 48154

RE: Application #: AS470407552

Norlynn Home 300 Norlynn Drive Howell, MI 48843

Dear Mr. Van Acker and Ms. Jocquico:

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

Julia Ellins

Lansing, MI 48909

enclosure

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

#### I. IDENTIFYING INFORMATION

**License #**: AS470407552

Applicant Name: Resilire Neurorehabilitation, LLC

**Applicant Address:** 7200 Challis Rd.

Brighton, MI 48116

**Applicant Telephone #:** (810) 227-0119

Licensee Designee: Eric Van Acker and Angela Jocquico

Administrator: Eric Van Acker

Name of Facility: Norlynn Home

Facility Address: 300 Norlynn Drive

Howell, MI 48843

**Facility Telephone #:** (810) 227-3887

Application Date: 03/04/2021

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

TRAUMATICALLY BRAIN INJURED

#### II. METHODOLOGY

03/04/2021	Enrollment Online enrollment
03/04/2021	Application Incomplete Letter Sent IRS Itr; 1326, RI-030 & FPs for Eric (LD); AFC100 for Admin
03/15/2021	Contact - Document Received App; IRS Itr; 1326, RI-030, AFC100, med cl & TB for Eric (LD & Admin)
03/31/2021	Inspection Report Requested - Health Inv. #1031379
04/09/2021	Application Incomplete Letter Sent
04/22/2021	Inspection Completed-Env. Health : A
04/28/2021	Application Complete/On-site Needed
04/29/2021	Inspection Completed On-site
04/29/2021	Inspection Completed-BCAL Full Compliance

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

Norlynn Home is an adult foster care home located in Howell, Michigan which is a suburb of Metro Detroit located in the southeast portion of Livingston County. Norlynn Home is about five miles north of highway I-96. Howell is the largest city as well as the county seat in Livingston county. The city of Howell has restaurants, shopping, banks, post office, library, doctors, hospitals, and a variety of churches. The facility has ample parking for staff and visitors. Norlynn Home is a large, six-bedroom ranch style home on a ten-acre lot with a finished walk-out basement. The home has a living room, dining room, kitchen, laundry room and a large recreation room in the walkout, finished basement which is available for resident use. The recreation room in the basement contains a pool table and a large television. The basement egress has a sliding glass door which exits at grade to a large patio. Additionally, the three resident bedrooms located in the basement each have at least one egress window that exits directly to the outside. The house contains two full bathrooms upstairs and two full bathrooms in the basement. The remaining three resident bedrooms are located on the main level of the home. The home has an attached two-car garage. The home has an elevator that colicensee Eric Van Acker and Angela Jocquico agree not to use for emergency evacuation. Additionally, co-licensee Eric Van Acker and Angela Jocquico agreed not admit residents to the lower-level bedroom if the resident has impaired mobility.

The front of the facility has a large driveway with ample parking for staff, visitors, and guests. The facility has two inoperable fireplaces, one in the basement and one on the main floor, that co-licensees Eric Van Acker and Angela Jocquico agreed not to use. The licensee is responsible for assessing each resident at admission to ensure protection and safety related to their ability to navigate the staircase during regular use and in the case of emergency. The staircase is equipped with a handrail that expands the entire length of the staircase to reinforce a safe passageway between the two levels. Any resident that requires regular use of a wheelchair, walker, cane, other device, or any other additional assistance from staff to ambulate and safely evacuate the home in the case of emergency cannot use the basement bedrooms.

The facility's heating plant, including the gas-forced furnace and water heater, is located in the basement, enclosed in a room equipped with a 1-3/4-inch solid core door with an automatic self-closing device and 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 a central air conditioning system and with a backup generator that runs the entire facility if power goes out.

The facility is wheelchair accessible and has two wheelchair ramps. One of the wheelchair ramps is located off the back door and exits into the driveway and the second wheelchair ramp is located off the front of the house onto the driveway. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware. Hallways and door widths inside of the facility are able to accommodate individuals who use wheelchairs to assist with mobility.

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 in compliance with all fire safety requirements of small six bed adult foster care facilities.

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 rules on 04/22/2021.

All the bedrooms are spacious and include ample closet space. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square	Total Resident
		Footage	Beds
1	18' X 13'	234	1
2	17'3" X 10'8"	184	1
3	17'2" X 11'	188.83	1
4	15' X 10'	150	1
In basement			
5	18' X 13'6"	243	1

In basement			
6			1
In basement	24'9" X 18'8"	462	
Laundry room	7" X 8"6"	59.5	0
Kitchen	14' X 14'6"	203	0
Living Room	24'9"X 18'8"	462	0
Dining Room	14' X 12'	168	0
Recreation Room			
in basement	30'10" X 29'2"	899.31	0

The indoor living and dining areas measures over 4,900 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 residents.

#### **B. Program Description**

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection, and personal care to six (6) male or female ambulatory or non-ambulatory adults who have been diagnosed with a traumatic brain injury and/or are physically handicap. The applicant is also able to accommodate those who require the regular use of a wheelchair, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. The program will include opportunities to socialize with one another and direct care staff members through crafts, bingo, coloring, reading, puzzles, watching television and enjoying the outdoors. 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 for payment.

The facility will continually assess the individual and make changes as necessary to meet the resident needs 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. The licensee will ensure transportation is available for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including libraries, local museums, shopping centers, local parks, recreational activities and planned resident outings as a source of entertainment. Additionally, the facility offers supplemental support services such as occupation therapy, physical therapy, behavioral therapy, speech therapy, recreational therapy, vocational services, social work services and psychiatry.

#### C. Applicant and Administrator Qualifications:

The applicant is Resilire Neurorehabilitation, LLC, a "For Profit Corporation", established in Michigan on April 24, 2020. 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 submitted documentation appointing co-licensee designees Mr. Eric Van Acker and Ms. Angela Jocquico as licensee designees and Mr. Eric Van Acker as administrator for this facility. Criminal history background checks of the applicants and administrator were completed, and they were both determined to be of good moral character to provide licensed adult foster care. Mr. Eric Van Acker and Ms. Angela Jocquico both submitted a statement from a physician documenting good health and current negative tuberculosis test results.

The co-licensee designee/administrator, Mr. Eric Van Acker has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mr. Eric Van Acker started his career working at another licensed facility in 1988 and has been a licensee designee/administrator with that same corporation since 1990 where he provided care to residents diagnosed with traumatic brain injury and/or those diagnosed with a physical handicap.

The co-licensee designee Angela Jocquico has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Jocquico started her career working at another licensed facility in 1999 and has been a licensee designee/administrator with that same corporation since 2013 where she provided care to residents diagnosed with traumatic brain injury and/or those diagnosed with a physical handicap.

The 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 the staffing pattern may need to change to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The applicant indicated direct care staff will be awake during sleeping hours. Mr. Van Acker and Ms. Jocquico 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. Van Acker and Ms. Jocquico 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.

Mr. Van Acker and Ms. Jocquico 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 licensee designees Mr. Van Acker and Ms. Jocquico will administer medication to residents. In addition, Mr. Eric Van Acker has indicated resident medication will be stored in a locked

cabinet and daily medication logs will be maintained on each resident receiving medication.

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

Mr. Van Acker and Ms. Jocquico 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. Van Acker and Ms. Jocquico 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. Van Acker and Ms. Jocquico 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. Eric Van Acker an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

Mr. Van Acker and Ms. Jocquico 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 of the residents' personal money transactions that have been agreed to be managed by the applicant.

Mr. Van Acker and Ms. Jocquico an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. Mr. Van Acker and Ms. Jocquico indicated the intent to respect and safeguard these resident rights.

Mr. Van Acker and Ms. Jocquico 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. Van Acker and Ms. Jocquico 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. Mr. Eric Van Acker acknowledged that residents with mobility impairments will only reside on the main floor of the facility.

### 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

Area Manager

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

Julia Ellis		
y	04/	30/2021
Julie Elkins Licensing Consultant		Date
Approved By:		
Dawn Jimm	04/30/2021	
Dawn N. Timm		 Date