



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 19, 2023

Deshra Vines-Leak
Precious Places, LLC
PO Box 310332
Flint, MI 48505

RE: Application #: AS250412485
Mierriman Senior Living Home
1405 Watch Hill Rd
Flint, MI 48507

Dear Ms. Vines-Leak:

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 effective January 24, 2023.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available, and you need to speak to someone immediately, please contact the local office at (517) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Derrick L. Britton".

Derrick Britton, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 284-9721

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS250412485

Licensee Name: Precious Places, LLC

Licensee Address: PO Box 310332
Flint, MI 48505

Licensee Telephone #: (810) 233-6696

Administrator/Licensee Designee: Deshra Vines-Leak

Name of Facility: Mierriman Senior Living Home

Facility Address: 1405 Watch Hill Rd
Flint, MI 48507

Facility Telephone #: (419) 410-9438

Application Date: 04/27/2022

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
TRAUMATICALLY BRAIN INJURED

Special Certification: Mentally Ill
Developmentally Disabled

II. METHODOLOGY

04/27/2022	On-Line Enrollment
05/27/2022	Contact - Telephone call made Sent an email re App Inc ltr. Will follow up on 5/31
06/02/2022	Inspection Report Requested - Health Invoice No: 1032728
06/03/2022	Application Incomplete Letter Sent App Incomplete emailed w/1326 and AFC 100
08/04/2022	Contact - Document Sent Responded to email w/status. Included forms from 6/3/2022
08/14/2022	Comment Email received indicating prints were scheduled
08/24/2022	Inspection Completed-Env. Health: A
10/28/2022	Contact - Document Received Received 1326
12/01/2022	Application Incomplete Letter Sent
12/14/2022	Contact - Document Received Email received from Sabrina McGowan re: Application incomplete documents
12/15/2022	Contact - Document Received Email from Sabrina McGowan re: appointment for inspection and compiling documents received.
12/28/2022	Contact - Document Received Email from Deshra Vines re: Acceptance of inspection date of 1/9/2023
12/28/2022	Application Complete/On-site needed
01/09/2023	Inspection Completed On-site
01/09/2023	SC-Application Received – Original
01/16/2023	Contact - Document Received

Email from Deshra Vines re: Incomplete items, furnace, and water heater inspection report

01/17/2023 Inspection Completed-BCAL Full Compliance
01/17/2023 SC-Recommend MI and DD
01/17/2023 Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Mierriman Senior Living Home is single-level, brick-sided structure with full basement used for storage and office space. The facility is not wheelchair accessible. The facility consists of an open floor plan with a living room, dining room, kitchen, laundry room, five single-occupancy bedrooms, one double-occupancy bedroom, and three full bathrooms. The facility has three approved means of egress from the main level. The driveway has adequate parking for staff and visitors. The facility utilizes private water and public sewer system. The home, which has operated as a licensed AFC under a different licensee, had an environmental inspection completed on 08/24/2022 with an A rating. The property owner, DL Realty, LLC, has authorized the lease of the property to Precious Places, LLC for the purposes of providing adult foster care services, with Deshra Vines-Leak as the licensee designee/administrator.

The furnace and hot water heater are in the basement behind a one-hour protected enclosure with a 1 ¾ inch solid core door equipped with an automatic, self-closing device. The furnace was inspected on 10/21/2022 and found to be fully functioning. The water heater was inspected on 01/13/2022 and maintenance was completed to make it fully functioning. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician, is fully operational, and tested during the onsite inspection on 01/09/2023. There are fire extinguishers located on each level of the facility.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	9'9" x 10'	99.17 sq. ft.	1
2	10'3" x 11'3"	117.11 sq. ft.	1
3	9'9" x 9'9"	98.34 sq. ft.	1
4	10'9" x 11'6"	126.45 sq. ft.	1
5	9'9" x 16'9"	167.76 sq. ft.	2

The indoor living, dining, sitting, and activity areas measure a total of 446.57 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

The home has three separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30-inch minimum width requirement. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

Based on the above information, this facility can accommodate **six (6)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity. This home is not wheelchair accessible.

B. Program Description

The applicant, Precious Places, LLC, submitted a copy of the required documentation. 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) female and/or male adults, 18 years of age and older, whose diagnosis is aged, developmentally disabled, mentally impaired, physically handicapped, and/or traumatically brain injured in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

Precious Places, LLC will ensure that the resident's transportation and medical needs are met. Precious Places, LLC has transportation available for residents to access community-based resources and services. 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 public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

On 04/27/2022, Precious Places, LLC, applied to provide foster care services to six adults at 1405 Watch Hill Road, Flint, Michigan, 48507. The address was previously licensed as an adult foster care home.

The applicant, Precious Places, LLC, which is a “Michigan Limited Liability Company,” was established in Michigan on 04/20/2020. The applicant submitted a letter of intent to contract with Genesee Health System and continue services for current Genesee Health System residents from the previous licensee.

Precious Places, LLC submitted a written statement naming Deshra Vines-Leak as the licensee designee and facility administrator. Ms. Vines-Leak submitted licensing record clearance requests that were completed. She also submitted medical clearance requests with statements from a physician documenting their good health and current TB-test negative results. Ms. Vines-Leak has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules, and she currently operates a licensed adult foster care facility in good standing that serves the population identified in this application.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift. The applicant acknowledged that the staff to resident ratio may need to be increased to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff 1 to 6 resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org), L-1 Identity Solutions™ (formerly Identix®), and the related documents required to be maintained in each employees record to demonstrate compliance.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can 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.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all the documents contained within each employee’s file.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee and/or visitor.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their responsibility to obtain all the required 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 the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all the documents contained within each resident's file.

The applicant acknowledges their 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 and special certification (developmentally disabled and mentally ill to this AFC adult small group home (capacity 1-6) effective January 24, 2023.



01/19/2023

Derrick Britton
Licensing Consultant

Date

Approved By:



01/19/2023

Mary E. Holton
Area Manager

Date