



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

October 11, 2023

Aimee Davis
Friends and Family, Inc.
309 S Bailey St
Romeo, MI 48065

RE: Application #: AS500416633
Clinton River Group Home
11475 19 Mile Rd.
Sterling Heights, MI 48314

Dear Ms. Davis:

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 blue ink, appearing to be "EJ".

Eric Johnson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
3026 W Grand Blvd
Detroit, MI 48202

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500416633
Applicant Name:	Friends and Family, Inc.
Applicant Address:	309 S Bailey St Romeo, MI 48065
Applicant Telephone #:	(586) 372-7099
Administrator/Licensee Designee:	Aimee Davis
Name of Facility:	Clinton River Group Home
Facility Address:	11475 19 Mile Rd. Sterling Heights, MI 48314
Facility Telephone #:	(586) 737-7703
Application Date:	04/27/2023
Capacity:	5
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODOLOGY

04/27/2023	Enrollment
06/01/2023	PSOR on Address Completed
06/01/2023	Application Incomplete Letter Sent 1326/RI030/new FPS
06/08/2023	Contact - Document Received 1326/RI030
06/26/2023	Application Incomplete Letter Sent
08/01/2023	Contact - Document Received Licensing documents received
08/31/2023	Application Complete/On-site Needed
09/06/2023	Inspection Completed-Env. Health: A
09/06/2023	Inspection Completed-Fire Safety: A
09/06/2023	Inspection Completed On-site
09/06/2023	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single-family brick and siding ranch style home and is fully landscaped. The home is in a residential neighborhood in Sterling Heights, a suburb north of the city of Detroit. The home and community are serviced by public water and sewage system. Medical, educational, and social resources are located within proximity to the home in the surrounding community.

The area of the home that is designated for residents has one double occupancy bedroom, three single occupancy bedrooms, one full bathroom, one half bathroom, a living room, and a kitchen/dining area. The furnace, hot water heater, and laundry room are located in the basement, which is separated from the main floor by a 1¾ inch solid core door with an automatic self-closing device and positive latching hardware. The facility is equipped with a fully operational smoke detection system. The home has public water and a public sewer system. The home has two forms of egress leading to the outside. The home is qualified for admission of residents who use a wheelchair, as it is equipped with ramps.

The residents' bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	14'4 x 19'7 plus 17'2	281	2
2	10 x 10	100	1
3	11'11 x 9'5	112	1
4	9'2 x 10	92	1

Total capacity: 5

The living and sitting room areas measure a total of 636 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

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

Clinton River Group Home Residential Care intends to provide 24-hour supervision, protection, and personal care to four male or female residents, whose diagnosis is developmentally disabled or physically handicapped. The program will include instruction for daily living, personal hygiene assistance, and social and recreational activities.

Clinton River Group Home Residential Care will utilize local community resources for medical services, dental services, religious observance, and recreation. The goal of the home is to provide residents with a small, comfortable, peaceful place where they can live and get the care they need in a family-like setting. Clinton River Group Home will offer a wide range of social, creative, musical, and physical activities to nurture each resident's mind, body and spirit. They will provide rehabilitative activities and programs to help residents regain lost function and independence on a short-term basis. The home will also professionally assess residents on a regular basis for medication and equipment needs to maximize their functional mobility, independence, and quality of life. Clinton River Group Home will offer individual, independent activities and planned group activities which include music, baking, arts, bird and nature watching, gardening, games and other activities.

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 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

The applicant is Friends and Family, Inc. The applicant has established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

Friends and Family, Inc., appointed Aimee Davis as the licensee designee and administrator of the facility. Ms. Davis has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Davis was previously approved as licensee designee of Friends and Family, Inc. (Copperfield - AS500285118).

The licensee designee, Aimee Davis, has a bachelor's degree from Central Michigan University. She has over 10 years of experience as a director, coordinating and providing services to individuals with disabilities, including developmentally disabled and physically handicapped. She also has over a year of experience as a direct in-home caregiver for the developmentally disabled and mentally ill population.

Licensing record clearance requests were completed for Ms. Davis. Ms. Davis submitted current medical clearances with a statement from a physician documenting good health and tuberculosis negative results.

Ms. Davis 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. Davis 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) and the related documents required to demonstrate compliance.

Ms. Davis 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, 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. Davis 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. Byrd 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.

Ms. Davis 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. Davis 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. Davis 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. Davis acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Davis 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 Friends and Family, Inc.

Ms. Davis 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.

Ms. Davis 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. Davis 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 (capacity 1-5).



10/11/23

Eric Johnson
Licensing Consultant

Date

Approved By:



10/11/2023

Denise Y. Nunn
Area Manager

Date