



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 4, 2024

Glenda Jackson
Warwick Services, LLC
35474 Mound Rd
Sterling Heights, MI 48310

RE: Application #:	AM250418534 Warwick Home 5296 Warwick Trail Grand Blanc, MI 48439
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Dear Glenda Jackson:

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 11 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) 643-7960.

Sincerely,

Shamidah Wyden, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48607
989-395-6853

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM250418534
Applicant Name:	Warwick Services, LLC
Applicant Address:	35474 Mound Rd Sterling Heights, MI 48310
Applicant Telephone #:	(586) 709-9517
Licensee Designee:	Glenda Jackson
Name of Facility:	Warwick Home
Facility Address:	5296 Warwick Trail Grand Blanc, MI 48439
Facility Telephone #:	810-584-7560
Application Date:	05/22/2024
Capacity:	11
Program Type:	AGED

II. METHODOLOGY

01/26/2024	Inspection Completed-Fire Safety: A please refer to AM250399240
05/22/2024	Enrollment
05/24/2024	Application Incomplete Letter Sent requested 1326/RI030, AFC100 and IRS letter
05/24/2024	PSOR on Address Completed
05/24/2024	Contact - Document Sent forms sent
06/06/2024	File Transferred To Field Office
06/18/2024	Application Incomplete Letter Sent
10/01/2024	Inspection Completed On-site
10/01/2024	Inspection Completed- Environmental Health: A
10/01/2024	Inspection Completed-BCAL Sub. Compliance
10/07/2024	Application Incomplete Letter Sent
12/03/2024	Application Complete/ On-site Needed
12/03/2024	Inspection Completed On-site
12/04/2024	Inspection Completed- BCAL Full Compliance
12/04/2024	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Warwick Home is located at 5296 Warwick Trail Grand Blanc, MI 48439, in Grand Blanc Township. The home is situated off of South Saginaw Road between McCandlish Rd. and East Baldwin Rd. This facility is short distance from local restaurants, a grocery store, and other businesses. The property is owned by Warwick Services, LLC. The property was granted special land use zoning approval for adult foster care for up to 12 residents on May 3, 2018. The facility was previously licensed as Warwick AFC LLC under license number AM250399240 since 01/10/2020. The facility is a single-story building, with four exit doors. This facility contains eight resident bedrooms, a kitchen,

laundry room, living room, dining room, and two full bathrooms. This facility has a public water and sewer system. The facility is wheelchair accessible.

The furnace and hot water heater are located in in a room that is constructed of material that has a 1-hour-fire-resistance rating. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. A furnace cleaning, inspection, and service was conducted on 10/08/2024 by Blessing Plumbing and Heating Co. The Bureau of Fire Services conducted a final fire safety inspection on 01/26/2024 and issued a full approval- A-rating.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	15 ft 10 in x 15ft 1in	238.8 sq. ft.	2
2	15ft 4in x 11 ft 8in- (3ft 10in x 2ft 4in) - (3ft 6in x 2ft 4in)	161.79 sq. ft.	2
3	11ft 2in x 11ft 2in – 5ft 10in x 2ft 5in	110.6 sq. ft.	1
4	8ft 8in x 11 ft 2in- 5ft 10 in x 2ft 5in	82.68 sq. ft.	1
5	9ft 5in x 14ft 7 in- 2ft 3in x 3ft 10 in	128.68 sq. ft.	1
6	16 ft 11in x 8ft 6in	143.8 sq. ft.	1
7	8ft 10 in x 16 ft 11 in -3ft 7in x 2ft 5 in	140.74 sq. ft.	1
8	21ft 8 in x 15ft 2in - 15ft 9 in x 1ft 10 in	299.72 sq. ft.	2

The living, dining, and sitting room areas measure a total of 594.7 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 eleven (11) residents. It is the licensee’s responsibility not to exceed the facility’s licensed capacity.

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 eleven (11) male or female ambulatory adults aged 55 and older, whose diagnosis is aged, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from: Senior Placement Services of Michigan.

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.

The licensee will assist residents with connecting with outside agencies for transportation, 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 public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is Warwick Services, L.L.C., which is a "Domestic Limited Liability Company", was established in Michigan, on 04/19/2024. 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.

Warwick Services, L.L.C. has submitted documentation appointing Glenda Jackson as licensee designee and administrator of the facility.

A licensing record clearance request was completed with no lein convictions recorded for the applicant licensee designee/administrator Glenda Jackson. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee/administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 11-bed facility is adequate and includes a minimum of 1 staff to 11 residents per shift. 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 –to- 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 of 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 of 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 of 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

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure. Compliance with the physical plant rules has been determined. Compliance with Quality-of-care rules will be assessed during the period of temporary licensing via an on-site inspection.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care medium group home (capacity 7-11).



12/04/2024

Shamidah Wyden
Licensing Consultant

Date

Approved By:



12/04/2024

Mary E. Holton
Area Manager

Date