



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 30, 2025

Carolyn Bruning
Northeast Michigan CMH Authority
400 Johnson Street
Alpena, MI 49707

RE: License #: AS010010124
Mill Creek Home
350 Mill Creek Rd
Harrisville, MI 48740

Dear Ms. Bruning:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

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 (616) 356-0100.

Sincerely,

A handwritten signature in black ink, reading "Johnnie Daniels".

Johnnie Daniels, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa Ave NW
Grand Rapids MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS010010124
Licensee Name:	Northeast Michigan CMH Authority
Licensee Address:	400 Johnson Street Alpena, MI 49707
Licensee Telephone #:	(989) 358-7603
Licensee Designee:	Carolyn Bruning
Name of Facility:	Mill Creek Home
Facility Address:	350 Mill Creek Rd Harrisville, MI 48740
Facility Telephone #:	(989) 724-9941
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. Purpose of Addendum

The purpose of this addendum is to add Mentally ill **program type** to the facility.

III. Methodology

On 4/17/25, application was received for special certification to add mentally ill to the program type.

On 4/24/25, I conducted an inspection of the facility and reviewed the documents.

IV. Description of Findings and Conclusions

The program for the mentally ill residents will include the development of skills related to social interaction, personal hygiene, personal adjustment, and public safety. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs.

V. Recommendation

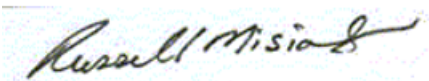
I recommend the modifications to the license to add mentally ill to the program type population served.



5/30/25

Johnnie Daniels
Licensing Consultant

Date



6/2/25

Russell Misiak
Area Manager

Date