



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 12, 2025

Anisha Jordan
6809 Stonebridge Ct
West Bloomfield, MI 48322

RE: Application #: AS630419182
Dynamic Home And Help
30431 Ventura St
Southfield, MI 48076

Dear Ms. Jordan:

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 (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Johnna Cade".

Johnna Cade, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(248) 302-2409

enclosure

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

I. IDENTIFYING INFORMATION

| | |
|------------------------------|---|
| License #: | AS630419182 |
| | |
| Licensee Name: | Anisha Jordan |
| | |
| Licensee Address: | 6809 Stonebridge Ct West Bloomfield, MI 48322 |
| | |
| Licensee Telephone #: | (248) 514-0975 |
| | |
| Administrator: | Anisha Jordan |
| | |
| Name of Facility: | Dynamic Home And Help |
| | |
| Facility Address: | 30431 Ventura St Southfield, MI 48076 |
| | |
| Facility Telephone #: | (248) 514-0975 |
| | |
| Application Date: | 01/31/2025 |
| | |
| Capacity: | 6 |
| | |
| Program Type: | PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED |

II. METHODOLOGY

| | |
|------------|---|
| 01/31/2025 | On-Line Enrollment |
| 02/14/2025 | PSOR on Address Completed |
| 02/14/2025 | Contact - Document Sent Forms sent |
| 02/18/2025 | Contact - Document Received 1326/RI030 |
| 02/27/2025 | Application Incomplete Letter Sent |
| 04/07/2025 | Contact - Document Received Licensee resume, First Aid/AED, physical form & TB test. |
| 04/10/2025 | Contact - Document Received Copy of deed received. |
| 04/21/2025 | Contact - Document Received Admission Policy, Discharge Policy, Program Statement, Confidentiality Policy Template, Direct Care Staff Training Policy, Mandatory Reporting Policy, Resident Care Related Prohibited Practices, Resident Rights Policy, Review of Rules & Act Policy. |
| 04/24/2025 | Contact - Document Received Organizational Chart, Staffing Pattern, Routine Procedures, Direct Care Staff Job Description, Floor Plan, Financial and Administrative Training and licensee's Adult Foster Care training. |
| 04/28/2025 | Contact - Document Received Credit report, copy of licensee's degree, and resident care related prohibited practices policy. |
| 05/20/2025 | Application Complete/On-site Needed |
| 05/20/2025 | Inspection Completed On-site |
| 05/20/2025 | Inspection Completed-BCAL Full Compliance |
| 05/21/2025 | PSOR on Address Completed No hits. |

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This two-story colonial home is located in Pinewood Manor Subdivision in Southfield, Michigan. The home has five bedrooms and three and a half bathrooms. The home has a living room, dining room, and family room. Bedrooms # 1 – 4 are located on the second floor of the home. Bedroom # 1 has an attached full bathroom. There is a full bathroom upstairs and on the main level of the home there is half a bathroom. Bedroom # 5 which is located on the main level of the home, has a full bathroom attached. This home has a finished basement, a large, fenced yard with a concrete patio, and an attached 2-car garage. This home utilizes public water and sewage. The gas furnace and hot water heater are located in the basement. The laundry room is on the main floor.

The facility is equipped with smoke detectors. The bedrooms and bathroom doors are equipped with positive latching, non-locking against egress hardware. All the bedrooms have adequate space, bedding, and storage. All the bedrooms have a chair and mirror.

During the onsite inspection, I observed that the home was in substantial compliance with rules pertaining to maintenance and sanitation. The home is not wheelchair accessible and therefore they will not accept residents who are unable to ambulate.

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

| Bedroom # | Room Dimensions | Total Square Footage | Total Resident Beds |
|-----------|-------------------|----------------------|---------------------|
| 1 | 18'.6" x 11'.5" | 213.9 | 2 |
| 2 | 9' x 10' | 94 | 1 |
| 3 | 13'.4" x 12' | 160.8 | 1 |
| 4 | 11'.7" x 12'.33" | 144.8 | 2 |
| 5 | 17'.16" x 10'.91" | 187.21 | 0 |

Total Capacity: 6

*Note - Bedroom # 5 is on the main floor, bedrooms 1 – 4 are upstairs. At the time of licensure bedroom # 5 is being used as a staff office. However, this is an approved bedroom with an attached full bathroom which has adequate space for up to two (2) resident beds. The total capacity of this facility is six (6). It is the licensee's responsibility not to exceed the facility's licensed capacity.

The living room, dining room, and family room measure a total of 622.88 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement. Based on the above information, it is concluded that this facility can accommodate six (6) residents.

B. Program Description

Dynamic Home & Help provides supported community living and personal care services to individuals diagnosed with mental illness, Autism and Traumatic Brain Injury, developmental disabilities, and physical impairments a clean and respectful environment. This includes a loving and safe setting that meets the needs of individuals with disabilities. Trained staff will assist and support residents with daily living, decision making and emotional support while focusing on individual goals and objectives. Dynamic Home & Help strives to promote independence. Staff will provide detailed services to residents with respect and careful attention to maintain their personal goals and objectives.

Dynamic Home & Help will provide 24-hour supervision, protection and personal care to six adults, male and female, whose diagnosis is physically handicapped, developmentally disabled, mentally ill, aged and/or traumatically brain injured, in the least restrictive environment possible. This home offers both single and double bedrooms to aid in meeting the needs of all residents.

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 male or female adults whose diagnosis is physically handicapped, developmentally disabled, mentally ill, aged and/or traumatically brain injured. The program will include assisting residents with personal care activities such as dressing, grooming, bathing, and taking medications. Assisting residents with daily living skills such as meal planning and preparation, laundry, household chores. Assisting residents in appropriate socialization in the home as well as in the community. This will include independent leisure time and one-on-one interaction and group activities

The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize community resources including public schools, libraries, local museums, shopping centers, and local parks. This facility is located 1.8 miles away from Corewell Health William Beaumont University Hospital which has a 24/7 emergency department.

C. Applicant and Administrator Qualifications

The applicant is Anisha Jordan. Ms. Jordan submitted financial statements and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

A licensing record clearance request was completed with no LEIN convictions recorded for licensee, Anisha Jordan. Ms. Jordan submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. The licensee, Ms. Jordan, provided documentation to satisfy the qualifications

and training requirements identified in the administrative group home rules. Ms. Jordan has a Master of Special Education from Grand Canyon University, a Master of Science and a Bachelor of Science from Central Michigan University. Ms. Jordan has extensive experience working as a special education teacher helping to enhance her student's math, reading, language, social, and life skills. Ms. Jordan also has a background in management leadership skills, employee development, and organizational skills.

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, Ms. Jordan acknowledges that the staff –to- resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. The applicant has indicated that direct care staff will be awake during sleeping hours.

Ms. Jordan acknowledged that at no time will this facility rely on “roaming” staff or other staff that are on duty and working at another facility to be considered part of this facility's staff –to- resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

Ms. Jordan acknowledges 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. Jordan 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) and the related documents required to be maintained in each employee's record to demonstrate compliance.

Ms. Jordan 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, Ms. Jordan 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. Jordan acknowledges her 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, the applicant acknowledges their responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. Jordan acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Ms. Jordan acknowledges her responsibility to obtain the required written assessment, 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. Jordan acknowledges her 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. Jordan acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges 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 resident's personal money transactions that have been agreed to be managed by the applicant.

Ms. Jordan 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.

Ms. Jordan 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.

Ms. Jordan acknowledges her 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 facility has been determined to be in compliance with the applicable administrative rules and the licensing statute, based upon the onsite inspection conducted and the licensee's intent to comply with all administrative rules for a small group home as well as the licensing act, Public Act 218 of 1979, as amended.

IV. RECOMMENDATION

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

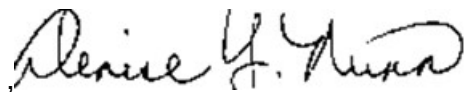


05/22/2025

Johnna Cade
Licensing Consultant

Date

Approved By:



6/12/2025

Denise Y. Nunn
Area Manager

Date