GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 1, 2026

Judith Alemnjuh
Five Star Residential, Inc.
22190 Sussex Street
Oak Park, MI 48237

RE: Application #: AS630420685
Winkleman Home
2740 Winkleman
Waterford, MI 48329

Dear Ms. Alemnjuh:

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) 972-9136.

Sincerely,

Sara E Shaughnessy

Sara Shaughnessy, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd. Ste 9-100
Detroit, MI 48202
(248) 320-3721

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630420685
Licensee Name:	Five Star Residential, Inc.
Licensee Address:	22190 Sussex Street Oak Park, MI 48237
Licensee Telephone #:	(248) 421-2735
Administrator/Licensee Designee:	Judith Alemnjuh
Name of Facility:	Winkleman Home
Facility Address:	2740 Winkleman Waterford, MI 48329
Facility Telephone #:	(248) 421-2735
Application Date:	05/13/2026
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODOLOGY

05/13/2026	On-Line Enrollment
05/15/2026	Comment Email sent to Dana to combine Licensee IDs.
05/15/2026	PSOR on Address Completed
05/15/2026	Contact - Document Sent AppInc sent via email.
05/21/2026	Contact - Document Received 1326/RI030.
05/21/2026	Comment FP sent to Ashley.
05/22/2026	File Transferred To Field Office
05/22/2026	Application Incomplete Letter Sent
06/03/2026	Contact - Document Received
06/03/2026	Application Complete/On-site Needed
06/15/2026	Inspection Completed On-site
06/15/2026	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The home is in a residential neighborhood in Waterford Township, located near Walton Boulevard and Angelus Drive. The home is approximately 7 miles away from St. Joseph Mercy Hospital in Pontiac. There is a Kroger grocery store, approximately 6 miles from the home in Clarkston, as well as a Costco, approximately 7 miles away in Bloomfield Township. The home backs up to Silver Lake Golf Club and there are several parks in the area. The home has parking in a driveway, and it is permitted on the street.

Due to the facility's location, it utilizes both public water and sewage system.

The home is owned by Springhill Housing Corporation and is managed by Community Housing Network. The verification of ownership was made via a provided tax assessment document and confirmed via a search of Oakland County Property Deeds website. Written permission was provided for the facility to operate as an Adult Foster Care facility and for Licensing and Regulatory Affairs to inspect the property.

The facility is a ranch style home. The facility has two means of egress, the front door and a door to the side of the kitchen, that goes through the attached garage. The facility does not have wheelchair ramps and/or exits at grade at two approved means of egress from the first floor; therefore, the facility is not wheelchair accessible and cannot accept residents who require the regular use of a wheelchair.

Upon entering the home, there is a small area with a closet, to the right of the entry door, is a short hallway, containing a linen closet, bathroom, and one resident bedroom. This bathroom contains a toilet, sink, and stand-up shower, with a window and mechanical fan for ventilation. To the left of the entry door is a living room, with sufficient furniture and space to accommodate five residents comfortably. Past the living room, to the right, is a small dining room with a table and enough chairs to accommodate five residents. Off the dining room is a kitchen, the second egress, through the garage, is in the kitchen, as well as the door to the basement. To the left of the living room, down the hall, is two more resident rooms and a bathroom. This bathroom consists of a toilet, bathtub, window, and mechanical fan for ventilation. All resident bedrooms have at least one working egress window, with screens.

The door to the basement is off the kitchen. There is a lock on the top of the door, to keep residents from going down there. The basement is large and contains three separate rooms, and a large main area. The basement also contains the control panel for the smoke detection system and a fire extinguisher. Residents will not be allowed in the basement.

The gas furnace and hot water heater, in addition to the gas-powered washer and dryer, are located in the facility's basement. A 1-3/4 inch solid core door is at the top of the basement stairs. A 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware is in the basement to create floor separation. The facility's clothes dryer is vented to the outside using permanent metal duct work.

The furnace and electrical system were inspected on 09/10/2025 and 06/02/2026 by licensed contractors, Dynamic HVAC and Dave's Electrical Services respectively, and both were determined to be in good condition and function properly. At least one 5-pound multi-purpose fire extinguisher or equivalent is located on each occupied floor and in the basement.

The facility is equipped with interconnected, hardwired smoke detection system, with battery backup. The system was inspected on 08/29/2025 and was determined to be fully operational and in good condition. Smoke detectors are located in all sleeping areas, on each occupied floor, basement, living rooms, dens, dayrooms, and similar spaced along with all areas that contain flame or heat producing equipment.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	10'8" x 13'5"	143.11	2
2	13'5" x 11'5"	153.17	2
3	9'09" x 8'8"	84.5	1

The living, dining, and sitting room areas measure a total of **258.4** 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 **five (5)** 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, emergency preparedness plans, standard procedures, and a visitation policy that addresses overnight visitors were reviewed and accepted as written.

The applicant intends to provide 24-hour supervision, protection and personal care to five both male and female, ambulatory adults, whose diagnosis is developmentally disabled or with mental illness in the least restrictive environment possible.

The program's long-term goal is to offer an alternative residential service for those who can no longer live in their homes. They will work with residents to increase their level of functioning, thereby opening the doors of opportunity for those that can move to semi-independent or independent living. The short-term goal with residents will focus on independent living via increasing their social skills and learning how to relate to others in a non-hostile, non-aggressive, and appropriate manner. Residents will be encouraged to be actively involved in specialized programs, such day programs, skills building workshops, or vocational training. They will assist residents in learning to utilize community resources, such as libraries and recreation centers, along with religious services, if they choose to.

If required, behavioral intervention and crisis intervention programs and personal behavior support plans will be developed and identified in the assessment plan for each resident's social, behavioral, and developmental needs and designed and implemented specific to each resident. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The applicant intends to accept residents from local community mental health agencies, local Department of Health and Human Services, and Adult Protective Services. The applicant has submitted an application or special certification for mental illness and developmental disabilities.

The applicant will ensure the availability of transportation services as agreed upon in the Resident Care Agreement but shall ensure immediate emergency transportation through use of a recognized available community service or vehicle that is owned by the licensee, administrator, or direct care staff on duty.

The applicant will make provisions for a variety of leisure and recreational equipment. It is the intent of the applicant to utilize local community resources including libraries, local museums, shopping centers, and local parks for additional entertainment and leisure activities.

C. Applicant and Administrator Qualifications

The applicant is Five Star Residential Inc., which is a domestic non-profit corporation that was established in Michigan, on 07/25/2013. The applicant has acknowledged sufficient financial resources to provide for the adequate care of the residents. 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.

The Board of Directors of Five Star Residential, Inc. have submitted documentation appointing Judith Alemnjuh as Licensee Designee for this facility and Judith Alemnjuh as the Administrator of the facility.

A licensing record clearance request was completed with no LEIN convictions recorded for Judith Alemnjuh. The licensee designee submitted a medical clearance with a statement from a physician documenting the licensee designee's good health, dated 05/29/2026.

The licensee designee provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Alemnjuh has held nursing positions as a registered nurse from 2012-2018, in a cardiac/telemetry unit and a cardiac intensive care unit. In 2018, Ms. Alemnjuh started as an administrator for Five Star Residential Inc., where she has provided leadership and oversight for residential care programs serving individuals with mental illness and developmental disabilities. Ms. Alemnjuh has experience in providing assistance with activities of daily living, including personal care, medication administration, meal preparation, mobility assistance and behavioral support. She also possesses management experience involving staff supervision, compliance with licensing requirements, and oversite of resident care and documentation.

The staffing pattern for the original license of this 5-bed facility is adequate and includes a minimum of 2 staff –to- 5 residents during the 7am-3pm and 3pm-11pm shifts, with 1 staff-to-5 residents during the 11pm-7am shift. The applicant 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.

The applicant 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.

The applicant 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.

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) and the related documents required to be maintained in each employee's 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 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.

The applicant 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.

The applicant acknowledges their 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.

The applicant acknowledges their 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.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges recording each resident's funds and itemized transactions including payment for services. The applicant acknowledges this document 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.

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 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.

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care small group home, capacity of 5.

07/01/2026

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Sara Shaughnessy Date
Licensing Consultant

Approved By:

07/01/2026

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Ardra Hunter Date
Area Manager