GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 15, 2026

Arica Estell
Grace Realty LLC
15530 Middlebelt Rd
Livonia, MI 48154

RE: Application #: AS820420261
Grace Care Homes
2533 Virginia Park
Detroit, MI 48206

Dear Ms. Estell:

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 4 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 (313) 456-0380.

Sincerely,

DaShawnda Lindsey, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place Ste 2-730
3044 W Grand Blvd, Annex
Detroit, MI 48202

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS820420261
Licensee Name:	Grace Realty LLC
Licensee Address:	15530 Middlebelt Rd Livonia, MI 48154
Licensee Telephone #:	(313) 461-0486
Administrator/Licensee Designee:	Arica Estell
Name of Facility:	Grace Care Homes
Facility Address:	2533 Virginia Park Detroit, MI 48206
Facility Telephone #:	(734) 579-0029
Application Date:	02/02/2026
Capacity:	4
Program Type:	AGED

II. METHODOLOGY

02/02/2026	On-Line Enrollment
02/03/2026	PSOR on Address Completed
02/03/2026	Contact - Document Sent forms
03/18/2026	Contact - Document Received 1326/RI030, IRS LTR
03/18/2026	Contact - Document Sent
03/18/2026	Contact - Document Received
03/18/2026	File Transferred To Field Office
03/19/2026	Application Incomplete Letter Sent
03/24/2026	Application Complete/On-site Needed
03/24/2026	Contact - Document Received
04/03/2026	Inspection Completed On-site
04/03/2026	Inspection Completed-BCAL Sub. Compliance
04/06/2026	Application Incomplete Letter Sent
04/19/2026	Contact - Document Received
05/20/2026	Contact - Document Sent
05/27/2026	Contact - Document Received
05/28/2026	Contact - Document Sent
06/12/2026	Contact - Document Sent
06/22/2026	Contact - Document Received
06/29/2026	Inspection Completed On-site

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is in a residential area in Detroit, Michigan. Nearby major roads are West Euclid St. and West Linwood St. Henry Ford Hospital Main is about two miles from the facility. There are multiple fast-food chains such as McDonald's and KFC within miles of the facility. For recreational activities, Riverwalk and Belle Isle are located less than 10 miles from facility. There is available parking in front of the facility. The facility uses both public water and sewage system.

The owner of the facility is KS Two Consulting LLC. I observed the Quit Claim Deed to verify ownership. The applicant submitted a copy of the lease as well as permission to occupy the facility and permission to the State of Michigan to inspect the facility for adult foster care purposes.

The facility is a two-level home. The facility does not have wheelchair ramps 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.

The main floor consists of a living room, dining area, kitchen, coffee area, lavatory, office space and laundry area. The facility's clothes dryer is vented to the outside using permanent metal duct work.

The second floor consists of three resident bedrooms, den/family room, full bathroom, and a stairway. Two of the residents' bedrooms have a full bathroom attached to it.

The basement consists of a heating plant, storage space, and a stairway. The basement will not be available for resident use.

The furnace and hot water heater are in the facility's basement. A 1-3/4-inch solid core door equipped with an automatic self-closing device and positive latching hardware is located at the top of the stairs to create floor separation.

The furnace and water heater were inspected on 03/30/2026 by Airman Heat & Air LLC. It was determined to be in good condition and functioning 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 back-up, which was inspected by a licensed electrician on 06/18/2026 and 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
Suite 201	13’3”X9’	119.25	1
Suite 202	13’8”X10’ + 9’4”X8’1”	211.84	2
Suite 203	8’11”X7’ + 3’11X11’8”	108.19	1

The living, dining, and sitting room areas measure a total of 471.54 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 four (4) 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 four (4) male and female adults whose diagnosis is aged in the least restrictive environment possible.

The program will promote independence and social interaction by assisting residents with cooking and cleaning skills, self-care, public safety skills, life skills training support, personal hygiene, and personal adjustment skills. The licensee will promote group activities and outings, house meetings, and provide companionship and emotional support to combat isolation and depression. The applicant’s program will also provide individualized support adapted to each resident’s cognitive and emotional needs, coordination with providers and outside agencies, structured daily routines that provide stability while encouraging skill building, behavioral support planning, and facilitation of community integration based on individual abilities and goals.

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, programs or agencies working with

the aged populations such as Senior Care Partners, private pay individuals, and/or Adult Protective Services as referral sources.

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 Grace Realty LLC, which is a “Domestic Limited Liability Company”, was established in Michigan, on 01/23/2024. The applicant has acknowledged sufficient financial resources to provide for the adequate care of the residents. The applicant established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of Grace Realty LLC have submitted documentation appointing Arica Estell as Licensee Designee and the Administrator of the facility.

A licensing record clearance request was completed with no LEIN convictions recorded for Ms. Estell. Ms. Estell submitted a medical clearance with a statement from a physician documenting Ms. Estell’s good health, dated 04/03/2026.

Ms. Estell has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Estell has several years of direct care experience serving the elderly population. She has provided assistance with activities of daily living, including personal care, medication administration, meal preparation, mobility assistance and behavioral support.

The staffing pattern for the original license of this 4-bed facility is adequate and includes a minimum of 1 staff –to- 4 residents per shift. Ms. Estell acknowledged 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. Ms. Estell has indicated that direct care staff will be awake during sleeping hours.

Ms. Estell 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. Estell 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. Estell 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. Estell acknowledged 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. Estell 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. Estell acknowledged 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, Ms. Estell acknowledged her 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. Estell acknowledged 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. Estell acknowledged 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. Estell acknowledged 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. Estell acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Estell acknowledged recording each resident's funds and itemized transactions including payment for services. Ms. Estell acknowledged 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.

Ms. Estell acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Ms. Estell indicated that it is her intent to achieve and maintain compliance with these requirements.

Ms. Estell acknowledged 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. Ms. Estell has indicated her intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Ms. Estell acknowledged her responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Ms. Estell acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

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 temporary license to this AFC adult small group home (capacity 6).

07/14/2026

DaShawnda Lindsey — Date
Licensing Consultant

Approved By:

07/15/2026

Ardra Hunter — Date
Area Manager