



STATE OF MICHIGAN  
DEPARTMENT OF HUMAN SERVICES  
OFFICE OF CHILDREN AND ADULT LICENSING



JENNIFER M. GRANHOLM  
GOVERNOR

MARIANNE UDOW  
DIRECTOR

November 10, 2005

Risa Britten  
Jewish Apartments & Services  
15100 W. Ten Mile Rd.  
Oak Park, MI 48237

RE: Application #: AL630276749  
Jewish Apt. & Ser. Coville III  
15100 W. Ten Mile Rd.  
Oak Park, MI 48237

Dear Ms. Britten:

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 20 is issued.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (248) 975-5054.

Sincerely,

Genevieve Lopez, Licensing Consultant  
Office of Children and Adult Licensing  
Suite 358  
41000 Woodward  
Bloomfield Hills, MI 48304  
(248) 975-5069

enclosure

cc: OCDHS

**MICHIGAN DEPARTMENT OF HUMAN SERVICES  
OFFICE OF CHILDREN AND ADULT LICENSING  
LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL630276749
<b>Applicant Name:</b>	Jewish Apartments & Services
<b>Applicant Address:</b>	15100 W. Ten Mile Rd. Oak Park, MI 48237
<b>Applicant Telephone #:</b>	(248) 967-4240
<b>Administrator/Licensee Designee:</b>	Risa Britten, Designee
<b>Name of Facility:</b>	Jewish Apt. & Ser. Coville III
<b>Facility Address:</b>	15100 W. Ten Mile Rd. Oak Park, MI 48237
<b>Facility Telephone #:</b>	(248) 592-1106
<b>Application Date:</b>	06/11/2005
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED

## II. METHODOLOGY

06/11/2005	Enrollment
06/16/2005	Inspection Report Requested - Fire
06/16/2005	Inspection Report Requested - Health
06/16/2005	Application Incomplete Letter Sent re: rec. cl. for Risa & Susan
06/27/2005	Contact - Document Received 1326's for Susan Mulka & Risa Britten
07/22/2005	Application Complete/On-site Needed rec'd. rec. cl.
07/26/2005	Preliminary Inspection
08/12/2005	On-site Inspection Completed
10/11/2005	On-site Inspection Conducted
11/09/2005	On-site Inspection Conducted Final inspection
11/10/2005	Contact- Telephone Call Received Call from OCDPH sanitarian Call from BCCFS

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. of the Michigan Public Acts of 19979, as amended, and the Administrative Rules and Regulations applicable to the licensure of large group facilities with an approved capacity of 13-20, licensed or proposed to be licensed after 5/24/1994.

In accordance with department policy, the proper authorities have conducted a plan review, fire safety and environmental inspections.

The following is a report of the findings of the original licensing evaluation for the Jewish Apartments & Services Coville III:

### A. Physical Description of Facility

The proposed facility is located at 15100 W. Ten Mile Rd in Oak Park. It is located on the fourth floor of a 15-story apartment building serving an aged population. Jewish Federation is the owner of record and proof of ownership is contained in the record.

The owners submitted a copy of the Section 8 HAP contract for projects with HUD-insured and HUD-hold mortgages.

The facility is located on the fourth floor of the 15-floor building. The fourth floor was completely remodeled into the adult foster facility. The facility contains twelve individual units varying in size and layout. Each unit contains a full bath, "kitchenette" with a sink, microwave and small refrigerator, living area and bedroom. All meals are prepared for the residents in the main community kitchen and residents eat in the dining area. Each unit has control over the heating and cooling of the unit. Heating is electrical. The resident units are located around the perimeter of the facility. The center of the facility contains the common areas of a kitchen, dining area, T.V. lounge, reading lounge, laundry room, staff bathroom, office and electrical room. A central hot water tank is located at the top of the building, which supplies hot water for the facility. Extensive grounds that are well landscaped surround the facility.

Resident units were reviewed but not measured. The following room dimensions were obtained from the blue prints (in the file) that were also submitted to the Bureau of Construction Codes and Fire Safety:

<b>UNIT</b>	<b>DIMENSIONS</b>	<b>AREA/SQ.FT.</b>	<b>CAPACITY</b>
#1	13' x 11'6"	149.5	1
#2	17' x 11'	187	1
#3	10' x 14'	140	1
#4*	26' x 11'	286	2
#5	12' x 12'	144	1
#6	14'6" x 12'6"	181.3	1
#7	14'6" X 12'6"	181.3	1
#8	12'9" X 12'3"	156.2	1
#9*	26'9" X 11'3"	297	2
#10	13'11" X 12'9"	177.3	1
#11	11'6" X 15'9"	181	1
#12	11' X 9'3"	101.8	1

CAPACITY=14

\*Units #4 and #9 are intended for double occupancy of couples.

The following are the living space measurements obtained from the architect's blue prints:

<b>LOCATION</b>	<b>DIMENSIONS</b>	<b>SQ.FT.</b>
TV Lounge	16' x 20	320
Dining area	16'5" x 8'	131

Reading Lounge

16' x 20'9"

332  
783

A total of 490 square feet is required to meet the 35 square feet per resident requirement. The facility contains 783 square feet, which computes to 55.9 square feet per resident exceeding the licensing requirement.

At the time of the final inspection, the facility lacked bedroom furnishings, bedding and linens due to the fact that residents prefer to bring their own. The applicant has provided a written statement assuring that unit furnishings will meet the licensing requirements in terms of suitability and condition. This statement also acknowledges the licensee's responsibility to furnish the units if someone opts not to bring his own furniture.

The approval of a 4<sup>th</sup> floor facility was dependent upon the Bureau of Construction Codes and Fire Safety review of the floor plans and subsequent fire safety approval. R 400.15405 (4) prohibits the housing of residents above a second floor of a three-story building. The applicant's executive director, Marsha Goldsmith Kamin, made an inquiry on 7/8/04 of the director of the Office of Children and Adult Licensing, James B. Gale, pertaining to the licensing of the fourth floor as an adult foster care large group home. He responded that the establishment of an adult foster care facility on the fourth floor of a multi-story building was prohibited if the intended population had impaired mobility. He further stated that the proposal required preliminary approval by the Bureau of Construction Codes and Fire Safety for use of the fourth floor and that the applicant must provide a written statement that persons of impaired mobility would not be admitted or retained at the facility. The applicant addressed this issue in the admission/discharge policy.

Norman Grant conducted the final plan review on 9/12/05 did not disapprove the establishment of an adult foster care facility in a multi-level structure. Nancy Timmons conducted fire safety inspections on 11/8/05 and 11/10/05 and gave verbal approval to this consultant on 11/10/05.

The facility has public water and sewage systems. Oakland County Department of Public Health conducted an environmental plan review on 7/25/05. Robert Harlabakes, sanitarian with Oakland County DPH, conducted inspections on 11/9/05 and 11/10/05. He gave environmental approval on 11/10/05.

Zoning approval was received from Kevin J. Rulkowski, City Planner on behalf of the City of Oak Park. He wrote on 9/12/05 "The proposed use of the Fourth Floor for assisted living, Large Group Adult Care (13-20 person capacity), is allowable in this zoning district."

## **B. Administrative/Program/Resident Care/Record Keeping**

### **1. Population & Admission Criteria**

The applicant submitted an admission/discharge policy and program statement that was complied with licensing requirements.

According to both documents, the proposed population will be elderly of both genders over 62. Due to the location of the facility (on the fourth floor) and the conditions of the fire safety approval, residents must be ambulatory and able to evacuate the facility by the stairways.

According to the discharge policy, residents who develop uncontrolled incontinence unresponsive to toileting schedules or medication, problematic behavior or develop impaired mobility will be considered for discharge.

The program statement indicates that a variety of supportive services are available to residents to ensure that they function as independently as possible. Choice is a very important part of the Coville program providing residents with the freedom of choice to decide what services and in what activities they will participate. A variety of recreational/socialization/educational activities are available to the residents through the Jewish Community Center located near the facility. Specialized care plans are developed by the applicant's service coordinators and include the resident, the designated representative and if applicable, the resident's physician.

As of the final inspection, eight prospective residents were identified for placement. Two were married and would be occupying one of the larger units identified for couples. All eight were ambulatory, verbal and could take care of their basic needs.

## **2. Applicant**

The applicant, Jewish Apartments & Services, a domestic, nonprofit corporation will be operating the facility. Federation Apartments Inc filed Articles of Incorporation with the State of Michigan on October 16, 1969. A certificate of Assumed Name was filed on August 28, 1998 for Jewish Apartments & Services Inc. A subsidiary of the applicant is JCare, Inc that handles staff and their issues. Corporate documents were submitted such as the current list of the board of directors and the organizational chart.

The applicant operates two other large group homes for the elderly. The applicant's financial stability and capability was demonstrated by the submission of such financial documents as the budget and financial statements.

## **3. Licensee Designee/Administrator**

Risa Britten submitted all necessary documents as licensee designee including medical and licensing record clearances as did the administrator, Susan Mulka. Both individuals have extensive experience working with the proposed population and have been involved in the administering programs for residential care for the elderly since 2003. Ms. Mulka has a B.S. from Madonna with majors in gerontology and psychology. The

information submitted during the licensing process demonstrates compliance with the licensing requirements related to education, experience with the designated population, competencies, good moral character and health.

#### **4. Staffing Plan, Proposed Ratios, Staff Training and Competencies**

The facility will be operated on a shift rotation basis with eight staff. The applicant submitted a staffing plan that indicates that there will be 3:14 from 8:30 am to 4 pm, 2:14 from 4:30 pm to 7:30 pm and 1:14 from 7:30 pm to 8:30 am. Staff records were reviewed and several were already experienced having worked in the other two adult foster care facilities in the building. Three who were recently hired were scheduled to complete CPR and first aid training in the next two weeks. There are two chefs whose primary responsibilities are to prepare meals but who will also assist with direct care duties.

The administrator is aware that direct care staffing levels are subject to change based on resident care needs. However, admission criteria reflect the intent to admit only those residents who do not need intensive supervision or extensive personal care assistance. She is also aware that new staff prior to the assumption of duties must be competent in the areas required by R 440.15204 (3).

The applicant was provided technical assistance on the statutory requirements (Section 34a of PA 218), pertaining to the hiring or contracting of persons who provide care to residents.

Technical assistance was provided to the applicant on Act and administrative rule requirements related to assessing the good moral character of all staff of this facility.

#### **5. Records & Record Keeping**

Corporate, facility and staff records were reviewed including emergency/fire procedures, evacuation plan, personnel policies, program statement, admission/discharge policy and staff training.

Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident and employee record keeping. Several forms were provided.

The applicant is found to be in compliance with the licensing act and applicable administrative rules.

