



RICK SNYDER
GOVERNOR

State of Michigan
DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN
DIRECTOR

March 21, 2013

Christopher Risner
Dansville Country Care LLC
P.O. Box 122
Dansville, MI 48819

RE: Application #: AS330336343
Stockbridge Country Care
3454 Parman
Stockbridge, MI 49285

Dear Mr. Risner:

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 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 (517) 373-2506.

Sincerely,

Christopher Holvey, Licensing Consultant
Bureau of Children and Adult Licensing
4809 Clio Road
Flint, MI 48504
(517) 899-5659

Enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS330336343
Applicant Name:	Dansville Country Care LLC
Applicant Address:	1060 S. Jackson St. Dansville, MI 48819
Applicant Telephone #:	(517) 623-0119
Licensee Designee:	Christopher Risner
Administrator:	Carrie Moran
Name of Facility:	Stockbridge Country Care
Facility Address:	3454 Parman Stockbridge, MI 49285
Facility Telephone #:	(517) 623-0119
Application Date:	08/22/2012
Capacity:	6
Program Type:	AGED ALZHEIMERS

II. METHODOLOGY

08/22/2012	Enrollment
08/27/2012	Contact - Document Sent Rules & Act booklets
08/27/2012	Inspection Report Requested - Health Inv. #1020630
08/27/2012	Application Incomplete Letter Sent FP's for Christopher
09/11/2012	Inspection Completed-Env. Health : A
10/29/2012	Application Complete/On-site Needed
11/21/2012	Application Incomplete Letter Sent
02/28/2013	Contact – Telephone call made Spoke to administrator to schedule inspection date.
03/14/2013	Inspection Completed On-site
03/19/2013	Inspection completed – BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Stockbridge Country Care is a ranch style home with vinyl siding that sits on 2 ½ acres of land located in Stockbridge, MI. The facility has an attached two-car garage with concrete floors and room for storage. There is a covered wooden porch at the front entrance of the facility with an attached wheelchair ramp that exits directly to the driveway. There is a second wheelchair ramp attached to a covered wooden deck that is located in the back of the facility. Access to the back deck is made through the sliding door located in the facility's dining room. The facility has a large gravel driveway that provides ample parking space for staff and visitors.

The main level of the home consists of a living room, dining room, kitchen, one-half staff bathroom, two full resident bathrooms, and three resident bedrooms. All exterior exits have alarms to signal staff of anyone entering and/or exiting the facility.

The furnace and hot water heater are located in the basement and are separated from residents by a fully stopped, solid wood core door that is equipped with an automatic self-closing device and positive-latching hardware. Also located in the basement are a

washer and dryer for laundry and a large amount of storage space. There is one fire extinguisher located on each level of the facility. The smoke detectors are all hard-wired into the home's electrical system and are located in all sleeping areas, kitchen, living areas, and in areas of the home that contain heat or flame producing equipment.

The resident bedrooms and all living areas measured as follows:

Living Room	13' 2" x 22' 6" = 296 square feet	
Bedroom #1	13' 8" x 11' 6" = 157 square feet	Up to 2 residents
Bedroom #2	13' 5" x 10' 8" = 143 square feet	Up to 2 residents
Bedroom #3	15' 6" x 16' 6" = 256 square feet	Up to 2 residents

The facility has a private water supply and private sewage disposal system. The Ingham County Health Department inspected the facility on 9/11/12 and the facility received an "A" rating.

B. Program Description

The facility will provide 24-hour supervision, protection and personal care for up to six male and/or female aged residents who may or may not suffer from Alzheimer's/ Dementia. The facility has all the comforts of home in a quiet hometown atmosphere. The program will provide visiting physicians, hospice care, Alzheimer's care, home cooked meals, cable television, laundry services, medication supervision, and recreational activities, while continuing to provide assistance with activities of daily living. The facility is wheelchair accessible. Alarms have been placed on all exits to alert staff members when someone exits/enters the facility.

Christopher Risner is the applicant/licensee and Carrie Moran is the administrator of the facility. A criminal history background check was completed for the applicant and the administrator. They have been determined to be of good moral character. The applicant and administrator submitted statements from a physician documenting their good health and current TB-tine negative results.

The applicant has sufficient resources to provide for the adequate care of the residents as evidenced by projected income for AFC residents along with other financial resources.

The applicant acknowledges understanding the requirement for the licensee of an adult foster care family home to reside in the home to maintain this category type of adult foster care license.

The supervision of residents in this family home licensed for (6) resident will be the responsibility of the family home applicant 24 hours a day / 7 days a week with the responsible person on call to provide supervision in relief. The applicant has indicated that for the original license of this 6-bed family home, there is adequate supervision with 1 responsible person on-site for six (6) residents. The applicant acknowledges that the

number of responsible persons on-site to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents.

The applicant acknowledges an understanding of the training and qualification requirements for the responsible person or volunteers providing care to residents in the home.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents, 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](http://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 establish good moral character and suitability, obtain and maintain documentation of good physical and mental health status, maintain documentation of all required trainings, and obtain all required documentation and signatures that are to be completed prior to the responsible person and volunteers or staff working directly with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, responsible person, or volunteer or staff, and the retention schedule for all of the documents contained within each employee’s file.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator and direct care staff or volunteers and the retention schedule for all of the documents contained within the employee’s file. 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, the required forms and signatures to be completed 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 the retention schedule for all of the documents contained within each resident's file.

The applicant acknowledges an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-day discharge written notice to a resident, as well as, when a resident can be discharged before the issuance of a 30-day discharge written notice.

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 an accident involving resident, employee, and/or visitor.

The applicant 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.

The applicant acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

Christopher Risner has been the licensee designee of a small AFC group home since May 2012 and has over ten years' of experience as a part-time caregiver for one relative who was physically disabled and one relative who suffered from Alzheimer's. He also has one year of college credits for business administration. Carrie Moran has experience as a co-licensee and full-time staff of an AFC facility for four months, as well as, a "responsible person" for an AFC facility for six years. Ms. Moran has seventeen years' experience as a home health aide and five years' experience as a competency evaluated nursing assistant (CENA) providing hospice care to elderly suffering from Alzheimer's/ Dementia. Both Mr. Risner and Ms. Moran plan to work at the facility as direct care staff and will be present at the facility on a regular basis to maintain a working knowledge of the residents and their needs and to assist with care of the residents as necessary. Mr. Risner reports that all resident files will be kept on the facility grounds.

C. Rule/Statutory Violations

Compliance with the physical plant rules has been determined. All items cited for correction have been verified by visual inspection. Compliance with Quality of Care rules will be assessed during the period of temporary licensing via an on-site inspection.

IV. RECOMMENDATION

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




3/21/13

Christopher Holvey
Licensing Consultant

Date

Approved By:



3/21/13

Mary E Holton
Area Manager

Date