

RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF HEALTH CARE SERVICES

MIKE ZIMMER DIRECTOR

May 19, 2015

Melissa Bentley PO Box 460 Clio, MI 48420

> RE: Application #: AS250373896 Bentley Manor I 1214 W Vienna Road Clio, MI 48420

Dear Ms. Bentley:

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 (810) 787-7031.

Sincerely,

Rosa Fundry

Lisa Gundry, Licensing Consultant Bureau of Children and Adult Licensing 4809 Clio Road Flint, MI 48504 (810) 931-1220

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

| License #: | AS250373896 |
|----------------------------------|--|
| Licensee Name: | Melissa Bentley |
| Licensee Address: | 2099 W Wilson Road CLIO, MI 48420 |
| Licensee Telephone #: | (810) 691-5018 |
| Administrator/Licensee Designee: | Melissa Bentley |
| Name of Facility: | Bentley Manor I |
| Facility Address: | 1214 W Vienna Road Clio, MI 48420 |
| Facility Telephone #: | (810) 547-1763 |
| Application Date: | 02/27/2015 |
| Capacity: | 6 |
| Program Type: | PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED ALZHEIMERS |

II. METHODOLOGY

| 02/27/2015 | On-Line Enrollment |
|------------|---|
| 03/02/2015 | Inspection Report Requested - Health |
| 03/02/2015 | Contact - Document Sent Rule and Act Books |
| 03/02/2015 | File Transferred To Field Office Flint |
| 03/11/2015 | Application Incomplete Letter Sent |
| 04/22/2015 | Inspection Completed On-site |
| 04/28/2015 | Inspection Completed-Env. Health : A |
| 05/19/2015 | Recommend License Issuance |

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Bentley Manor I is a five bedroom home located at 1214 W. Vienna Road Clio, MI 484830 in Genesee County. Bentley Manor I is a ranch style home located on a large, landscaped lot in Genesee County.

The home is made up of a living room, kitchen, family room/dining area, two full bathrooms, a half bathroom, and five resident bedrooms. The laundry facilities are located on the main floor. The facility has adequate storage areas. There is a large driveway with an area for staff and visitors to park.

The home has a furnace and hot water heater, both located in the basement. Floor separation is achieved with a 1³/₄ inch solid core door equipped with an automatic selfclosing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational.

The facility has a municipal water and private sewer system. On 4/28/2014, the Genesee County Health Department inspected and approved the sewer system.

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

| Bedroom # | Room Dimensions | Total Square Footage | Total Resident Beds |
|-----------|-----------------|----------------------|---------------------|
| North | 10'9 x 13'7 | 136 | 1 |
| BEDROOM 1 | | | |

| Northeast BEDROOM 2 | 12'8 X 17'5 | 220 | 2 |
|-------------------------|-------------|-----|---|
| Southeast BEDROOM 3 | 10'6 x 11'6 | 121 | 1 |
| South Central BEDROOM 4 | 11'6 x 11 | 126 | 1 |
| Southwest BEDROOM 5 | 11'5 x 12'4 | 140 | 1 |

Based on the above information, it is concluded that this facility can accommodate **six** (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

The living room measures 16'2 x 15'9, which is 254 square feet of living space. The extra living space near the back of the house is a combined dining and additional living room. This space measures $17'8 \times 17'2$ and provides 304 square feet of living space. This area can comfortably seat six residents. The total living space is 558 square feet, which complies with the 35 square feet/per resident requirement. This home is not wheelchair accessible.

Compliance with Rule 400.14410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were adequately furnished, clean, and met all applicable rules relating to environmental and fire safety requirements.

The home has three separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30 inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

The home has a fire extinguisher, which meets the requirements of R 400.14506. The bedrooms have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.1502, R 400.14503, and R 400.14504.

Based on the above information, it is concluded that this facility can accommodate **six** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant, Melissa Bentley, submitted a copy of the required documentation to the consultant. 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 ambulatory adults who are ages 18 and over with a

diagnosis of mentally ill, developmentally disabled, aged, Alzheimer's or physically handicapped in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

Bentley Manor I will ensure that the resident's transportation and medical needs are met. Bentley Manor I has transportation available for residents to access community-based resources and services. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

On 2/27/2015, Melissa Bentley submitted an application to provide foster care services to six adults at 1214 W. Vienna Road Clio, MI.

The applicant is an experienced adult foster care provider, currently operating as a licensee designee at several group homes with a licensed capacity for six adults or more. 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 applicant submitted a written statement naming Melissa Bentley as the licensee and the facility administrator. Ms. Bentley submitted a licensing record clearance request that was completed and found to meet licensing requirements. She also submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. Ms. Bentley has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff 1-to-6 resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have <u>regular</u>, <u>ongoing</u>, "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 (<u>www.miltcpartnership.org</u>), L-1 Identity Solutions[™] (formerly Identix ®), and the related documents required to be maintained in each employees 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 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 volunteer and the retention schedule for all of the documents contained within each employee's file.

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 an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their responsibility to obtain all of the required 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. In addition, 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 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 temporary license to this AFC adult small group home (capacity 1-6).

Rosa Fundry

5/19/15

Lisa Gundry Licensing Consultant

Date

Approved By:

Holto 5/19/15

Mary E Holton Area Manager Date