



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS

MIKE ZIMMER
DIRECTOR

July 24, 2015

Theresa Alvarado
Addie's Acres, LLC
11525 Wood Road
DeWitt, MI 48820

RE: Application #: AL190357883
Addie's Acres, LLC
11633 Wood Road
DeWitt, MI 48820

Dear Ms. Alvarado:

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 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 (517) 284-9720.

Sincerely,

A handwritten signature in cursive script that reads "Dawn Timm".

Dawn N. Timm, Licensing Consultant
Bureau of Community and Health Systems
5303 S Cedar
PO Box 30321
Lansing, MI 48909
(517) 899-5675

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL190357883
Applicant Name:	Addie's Acres, LLC
Applicant Address:	11633 Wood Road DeWitt, MI 48820
Applicant Telephone #:	(517) 410-1197
Licensee Designee:	Theresa Alvarado
Administrator:	Theresa Alvarado
Name of Facility:	Addie's Acres, LLC
Facility Address:	11633 Wood Road DeWitt, MI 48820
Facility Telephone #:	(517) 410-1197
Application Date:	02/19/2014
Capacity:	20
Program Type:	AGED

II. METHODOLOGY

02/19/2014	Enrollment
02/24/2014	Inspection Report Requested - Health Inv. #1022700
02/24/2014	Inspection Report Requested - Fire
02/24/2014	Contact - Document Sent Fire Safety String
03/19/2014	Application Incomplete Letter Sent
06/16/2014	Contact - Telephone call received from Theresa Alvarado. Questions regarding capacity & licensure.
09/12/2014	Contact - Face to Face Met with Theresa Alvarado at the facility to review policy documents
11/01/2014	Contact- Document received- Email received from Theresa Alvarado with policy documents
06/01/2015	Contact- Documents received- Email received from Theresa Alvarado with policy documents
06/24/2015	Inspection Completed-Fire Safety : A
07/02/2015	Contact - Telephone call made to Theresa Alvarado. Scheduled inspection for 07072015.
07/06/2015	Inspection Report Requested - Health Second request for inspection of an original application
07/07/2015	Inspection Completed On-site
07/07/2015	Inspection Completed-BCAL Full Compliance
07/14/2015	Inspection Completed-Env. Health : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility:

Addie's Acres is a newly constructed, ranch style, single story 'V' shaped aluminum sided building. The facility is located in rural Dewitt, Michigan, but is a short distance from East Lansing and Lansing, Michigan, both of which provide numerous choices in medical care, entertainment, shopping, parks, libraries and other community amenities. The facility itself has 16 resident bedrooms, four of which are designated as semi-private and 12 private rooms. Upon entering the facility and walking through the foyer, an individual is greeted by the large activity and/or dining area. Along with the dining tables, there is a piano, craft options, and large windows out which residents may enjoy viewing the surrounding woods and outdoors. After leaving this area, the facility is arranged by wings with the blue wing to the east and the green wing to the west. Each wing houses 8 resident bedrooms, an individual small full-service kitchen, kitchenette, sitting area, a large activity and/or TV room, four full bathrooms, laundry room, and medication room. The facility also has a beauty salon available for resident use and a full sized kitchen that will be used to cook all of the resident meals. There are also covered front and back porches available for residents to enjoy. The facility also has a finished basement, but it is not available for resident use. There is also a designated staff office which will have a bed for the overnight sleeping staff member. All exits and entrances to the facility are at grade and the door widths accommodate wheelchair users. The facility has a private water and private sewage disposal system and was inspected by the Mid-Michigan District Health Department on 07/14/2015. The facility was determined to be in substantial compliance with all applicable rules.

The propane furnace and water heater are located in the basement. Floor separation is created by a fire-rated metal door that is equipped with an automatic self-closing device and positive latching hardware.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational or battery-powered, single-station smoke detectors have been installed near sleeping areas, on each occupied floor of the home, in the basement (if applicable) and near all flame- or heat-producing equipment and is fully sprinkled. The facility has been determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules. The facility was inspected and determined to be in compliance on 06/24/2015.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
Staff Office/Room #1	14'4" x 8'9"	125.13 square feet	None
Room #2	9'7" x 11'0" + 2'2" x 3'4"	112.57 square feet	One residents
Room #3	11'4" x 9'9" + 2'2" x 3'4"	117.65 square feet	One residents
Room #4	13'3" x 12'2"	161.12 square feet	Two residents
Room #5	11'2" x 8'10" + 4'10" x 4'6"	120.24 square feet	One resident
Room #6	11'2" x 8'10" + 4'10" x 4'6"	120.24 square feet	One resident
Room #7	13'3" x 12'2"	161.12 square feet	Two residents
Room #8	11'2" x 10'0" + 2'5" x 3'7"	119.86 square feet	One resident
Room #9	11'4" x 9'7" + 3'6" x 2'4"	116.76 square feet	One resident
Room #10	Storage Room		None
Room #11	11'0" x 9'5" + 2'3" x 3'4"	111.12 square feet	One resident
Room #12	11'0" x 9'5" + 2'3" x 3'4"	111.12 square feet	One resident
Room #13	13'3" x 12'2"	161.12 square feet	Two residents
Room #14	11'2" x 9'0" + 4'7" x 4'8"	121.42 square feet	One resident

Room #15	11'2" x 9'0" + 4'7" x 4'8"	121.42 square feet	One resident
Room #16	13'3" x 12'2"	161.12 square feet	Two residents
Room #17	11'2" x 10'0" + 2'3" x 3'4"	118.77 square feet	One resident
Room #18	11'2" x 10'0" + 2'3" x 3'4"	118.77 square feet	One resident
Green sitting room	12'8" x 11'5"	144.58 square feet	
Green kitchenette	13'9" x 12'0"	165 square feet	
Green Living Area	15'8" x 21'0"	328.86 square feet	
Blue sitting room	12'8" x 11'5"	144.58 square feet	
Blue kitchenette	13'9" x 12'0"	165 square feet	
Blue Living Area	15'8" x 12'0"	328.86 square feet	
Dining area/Activity Area	Multiple measurements	527 total square feet	

The indoor living and dining areas measure a total of 1803.88 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate twenty residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description:

The applicant intends to provide 24-hour supervision, protection and personal care to twenty male and/or female residents who are aged with mild to moderate personal care needs. The applicant does not intend to provide care to individuals who exhibit wandering or aggressive behavior. The program will include social interaction, music, interactive games, reminiscing, exercise programs, outdoor activities, and any other requests of interest to residents. The applicant intends to accept residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life of residents.

C. Applicant and Administrator Qualifications:

The applicant is Addie's Acres, L.L.C., a "Domestic Limited Liability Company", established in Michigan on 05/13/2013. 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 members of Addie's Acres, L.L.C. have submitted documentation appointing Theresa Alvarado as licensee designee and administrator for this facility.

Criminal history background checks of the applicant and administrator were completed and she was determined to be of good moral character to provide licensed adult foster care. Mrs. Alvarado submitted statements from a physician documenting her good health and current negative tuberculosis test results.

Mrs. Alvarado has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mrs. Alvarado currently operates a licensed AFC family home and has successfully since February 2002. Mrs. Alvarado currently provides care to men and women who are aged and who have numerous other physical health diagnoses including Alzheimer's disease and/or various stages of dementia. Mrs. Alvarado is also a registered nurse by profession and is familiar with advances and up-to-date treatment methods for elderly individuals. She has enjoyed providing individualized care to elders in her private home for the past 13 years and is looking forward to continuing to do so only on a grander scale. Mrs. Alvarado strongly believes in finding what a resident feels passionate about and helping them continue to keep those interests alive and also finding new ones as well.

The staffing pattern for the original license of this twenty bed facility is adequate and includes a minimum of three staff for twenty residents per shift. The applicant acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs and also due to the arrangement of the physical setting. The applicant has indicated that direct care staff will be awake during sleeping hours, but any additional direct care staff needed for emergency purposes will be allowed to sleep during the midnight shift.

The applicant 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.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by licensee designee will 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 acknowledged the 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 acknowledged the 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 acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

The applicant acknowledge the responsibility to obtain the required 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 acknowledged the 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 acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged 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 acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

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


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

D. Rule/Statutory Violations:

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION:

I recommend issuance of a six-month temporary license to this adult foster care group home with a capacity of twenty residents.



07/23/2015

Dawn N. Timm
Licensing Consultant

Date

Approved By:



7/24/15

Betsy Montgomery
Area Manager

Date