

RICK SNYDER GOVERNOR

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

MIKE ZIMMER DIRECTOR

October 19, 2015

Jannine Stoddard Sugarbush Manor LLC 12032 Torrey Rd Fenton, MI 48430

RE: Application #: AL250376703

Sugarbush Manor

G - 3257 Beecher Rd Ste A

Flint, MI 48532

Dear Mrs. Stoddard:

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 16 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,

Lisa Gundry, Licensing Consultant

Risa Fundry

Bureau of Community and Health Systems

4809 Clio Road Flint, MI 48504

(810) 931-1220

enclosure

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

I. IDENTIFYING INFORMATION

License #: AL250376703

Applicant Name: Sugarbush Manor LLC

Applicant Address: 12032 Torrey Rd

Fenton, MI 48430

Applicant Telephone #: (810) 577-6080

Licensee Designee Jannine Stoddard, Designee

Administrator: Helen Bonner

Name of Facility: Sugarbush Manor

Facility Address: G - 3257 Beecher Rd Ste A

Flint, MI 48532

Facility Telephone #: (810) 339-6405

Application Date: 04/13/2015

Capacity: 16

Program Type: AGED

ALZHEIMERS

PHYSICALLY HANDICAPPED

II. METHODOLOGY

04/13/2015	Enrollment
04/15/2015	Contact - Document Sent rule and act books
04/15/2015	Inspection Report Requested - Health 1024168
04/15/2015	Inspection Report Requested - Fire
04/15/2015	Contact - Document Sent Fire Safety String
04/15/2015	Application Incomplete Letter Sent Fingerprints for Trisha
04/15/2015	Contact - Document Received 1326 for Jannine
05/05/2015	File Transferred To Field Office Flint
06/01/2015	Application Incomplete Letter Sent
06/01/2015	Application Complete/On-site Needed
06/01/2015	PSOR on Address Completed
09/11/2015	Inspection Completed-Fire Safety : D
09/23/2015	Inspection Completed On-site
09/23/2015	Inspection Completed-BCAL Full Compliance
10/05/2015	Inspection Completed-Fire Safety : A full approval
10/05/2015	Inspection Completed-Env. Health : A
10/19/2015	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Sugarbush Manor, LLC facility is a one story building located at G- 3257 Beecher Road Ste A. in the City of Flint. The structure is a large multiple use building that includes other independent offices and businesses.

The facility has an industrial kitchen. It also consists of a large dining area, three separate sitting areas and a large dining room area. There is a separate room for a beauty shop, as well a conference room for private meetings and gatherings. Each bedroom is equipped with a closet and private bathroom. There are two separate main showers for the residents. The facility has adequate storage areas. There is adequate parking for staff and visitors.

The facilities furnace units are located outside on the rooftop area. The hot water heater is located on the main floor. Floor separation is achieved by a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with laundry facilities. 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 sewer and water system. The facility was inspected by the Genesee County Health Department on October 5, 2015. The facility was determined to be in substantial compliance with all applicable rules.

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

Below are the dimensions for the bedroom spaces

BEDROOM	DIMENSIONS	SQ.	OCCUPANCY
		FOOTAGE	
BEDROOM 1	9'6 x 13'11	132	1
BEDROOM 2	14'4 x 19'10	283	1
BEDROOM 3	11'6 x 20'1	231	1
BEDROOM 4	14'9 x 10	147	1
BEDROOM 5	13'10 x 10	138	1
BEDROOM 6	13'10 x 10	138	1
BEDROOM 7	13'10 x 10	138	1
BEDROOM 8	13'10 x 10	138	1
BEDROOM 9	13'10 x 10	138	1
BEDROOM	13'10 x 22	304	1
10			
BEDROOM	20 x 13	260	2
11	_		
BEDROOM	20 x 13	260	2

12			
BEDROOM	20 x 13	260	2
13			

The maximum capacity of bedroom square footage for residents in the home is (16) sixteen.

There are four separate living areas. The front entrance sitting room area measures 19'1 x 11'8. This provides 221 square feet of living area.

The second great room area measures 21'6 x 21'6. This provides an additional 462 square feet of living area.

The third patio room area measures 19'9 x 21. This provides an extra 414 square feet of living space.

The fourth smaller area measures 20 x 11'10. This provides an extra 236 square feet of living space.

These living areas total 1,333 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The dining room area measures 21 x 17'10, which is 374 square feet. This amount meets the requirements of this rule.

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 facility is wheelchair accessible. Each egress terminates at grade.

The facility was inspected and given full approval by the Bureau of Fire Safety on 10/06/2015. It is equipped with a full sprinkler system, integrated smoke alarm system and meets all required fire safety equipment. Zoning approval was received in December 2014.

The home has fire extinguishers, 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 **20** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant, Sugarbush Manor, LLC, 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 16 male or female ambulatory or non-ambulatory adults, aged 55 and over, whose diagnoses are Aged and/or physically handicapped and may be diagnosed with Alzheimer's, 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.

Sugarbush Manor, LLC, will ensure that the resident's transportation and medical needs are met. The facility is also located in an area where transportation is 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 04/13/2015, Sugarbush Manor, LLC, submitted an application to provide foster care services to 16 adults at 3257 Beecher Road Ste. A Flint, MI 48532.

The applicant, Sugarbush Manor, LLC, which is a "Domestic Limited Liability Company," was established in Michigan, on 10/9/2014. 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 licensee designee currently has several other existing adult foster care licenses.

Sugarbush Manor, LLC, submitted a written statement naming Jannine Stoddard as the licensee designee. Helen Bonner will be the facility administrator. They have submitted a licensing record clearance request that was completed with no LEIN convictions

recorded. Ms. Stoddard and Ms. Bonner also submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. Ms. Stoddard and Ms. Bonner have 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 16-bed facility is adequate and includes a minimum of 1 staff to 15 residents per shift during waking 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-15 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 SolutionsTM (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 and 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 large group home (capacity 16).

Date

Lusa Fundry 10/19/2015 Lisa Gundry Date Licensing Consultant

Approved By:

10/19/2015 Mary E Holton

Area Manager