



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

May 18, 2016

Ferdinand Policarpio
Genesis Senior Care, LLC
4111 Renee Drive
Troy, MI 48085

RE: Application #: AS500381557
Genesis Senior Living - Warren
2430 East 13 Mile Rd
Warren, MI 48092

Dear Mr. Policarpio:

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Williams".

Stephanie A. Williams, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(586) 256-2097

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500381557
Licensee Name:	Genesis Senior Care, LLC
Licensee Address:	4111 Renee Drive Troy, MI 48085
Licensee Telephone #:	(248) 250-6575
Administrator/Licensee Designee:	Ferdinand Policarpio
Name of Facility:	Genesis Senior Living - Warren
Facility Address:	2430 East 13 Mile Rd Warren, MI 48092
Facility Telephone #:	(248) 250-6575
Application Date:	02/26/2016
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODOLOGY

02/26/2016	On-Line Enrollment
02/26/2016	Contact - Document Sent Rules and Act booklets
02/26/2016	Application Incomplete Letter Sent Received clearance for Ferdinand & Admin
03/10/2016	Contact - Document Received Received License Clearance Record for Ferdinand Policarpio.
03/15/2016	Contact - Document Received Licensing file received from Central office
03/22/2016	Application Incomplete Letter Sent Sent by email in PDF format to Mr. Policarpio.
04/29/2016	Contact - Document Received Supportive documents received.
05/11/2016	Contact - Document Sent Confirming letter given to Mr. Policarpio at the facility in regards to documents submitted licensure.
05/11/2016	Inspection Completed On-site
05/11/2016	Inspection Completed-BCAL Sub. Compliance
05/12/2016	Contact - Document Received Supportive documents received from Mr. Policarpio.
05/12/2016	Contact - Telephone call received Spoke with Mr. Policarpio in regards to floor plan.
05/12/2016	Contact - Document Received Picture of repairs made to the home.
05/13/2016	Contact - Document Received Revised floor plan received.
05/16/2016	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single family brick ranch-style home with an attached, two-car garage with a small wooden deck built in 1969. The home is not wheelchair accessible. The property is fully landscaped, sits on approximately an acre of land and the rear yard is enclosed with a fence. The home is located in a residential neighborhood in the city of Warren, a suburb north of the City of Detroit. The home and surrounding community are serviced by public water and sewage systems. Medical, educational, and social resources are located within close proximity to the home in the surrounding community. The facility also has close access to I-696, I-75, and I-94 freeways.

Genesis Senior Living-Warren features an interconnected smoke detection system which has been inspected and certified as being in good operating condition by a qualified inspection service and is audible throughout the home. The egress doors also have alarms. Fire extinguishers have been installed and mounted as required in the home and in the basement. The home is heated by gas, forced-air furnace located in the basement. Both the hot water tank and furnace were newly installed in 2016 and complete with a 90 minutes steel fire rated door, equipped with an automatic self-closing device and positive-latching hardware meeting the requirement of R 400.511(1). The heat plant has been inspected and certified as being in good operating condition by a qualified inspection service. The home also features central air conditioning. The home also has sliding doors leading to the rear deck and backyard.

The family room is located off of the front entrance and television room in the rear. The residents' dining room is between the family and television room; located right off the kitchen. The home features a wheelchair accessible bath in the residents' bedroom area of the home and another bathroom by the kitchen and laundry room which will only be used by staff and visiting relatives. Bedrooms #3 and #4 are located directly off of the television room. I measured all community living space and bedrooms within the home to determine occupancy limits.

The measurements, square footage, and capacity limits are as follow:

Dining room	10'7" x 9"	124.32 square feet
Family room	15'5" x 19'7"	302 square feet
Television room	31.5 x 14.66	462 square feet

Total square footage of community space: 888.32 square feet.

Bedroom #1 Northeast	12'5" x 11'9"	146 square feet	capacity 1
Bedroom #2 Southeast	12'10' x 12'11"	166 square feet	capacity 2
Bedroom #3 South	13'8" x 16'10"	230 square feet	capacity 2
Plus	2'8" x 4'		
Bedroom#4	13'8 x 9'6	129 square feet	capacity 1

The square footage of community space is adequate for the facility to accommodate up to 6 AFC. Although the home has the bedroom capacity to accommodate 7 residents, this would exceed the number of residents allowed in a small group home. Therefore, Bedroom #1 and Bedroom #4 will only accommodate 1 resident in each room. All bedrooms are fully furnished and meet the requirement of Rule 400.14410(1)(2)(3) and (4).

B. Program Description

The admission policy, discharge policy, program statement and refund agreement have been submitted and do not conflict with the licensing requirements. Genesis Senior Living-Warren is a small group adult foster care facility with the capacity to provide services for six ambulatory residents. The facility offers a program of services designed to provide personal care in a supervised environment where personal dignity of each individual is preserved by encouraging independence in functioning. The facility will provide residential and personal support for aged, Alzheimer, and physically handicapped. Genesis Senior Living- Warren's philosophy of care is directly tied to the necessity of family respite. Their objective is to service fragile populations who have increased need for protection, supervision and direction.

Genesis Senior Living-Warren will personal care services which includes feeding, toileting, bathing, grooming, dressing, transferring and assistance, as well as management of administration of medication. Recreational activities encourage socialization and stimulation to the senses are incorporated on a regular bases. Staff will be trained and competent.

Genesis Senior Care, LLC is a corporation formed on 01/10/2011, in good standing and approved to conduct business in the State of Michigan. A letter from the members has been received designating Mr. Policarpio as the licensee designee/administrator. The applicant has submitted financial documentation assuring the financial capability and stability of this corporation. Mr. Policarpio has submitted the appropriate educational, training, employment documentation and resume to establish that he has the required

experience and education to provide and deliver adult foster care services to the Aged, Alzheimer's/Dementia adults in the State of Michigan.

Mr. Policarpio has several years of experience of working with the identified population through his work as a licensed practical nurse through various nursing and rehabilitation centers since 2010. Mr. Policarpio is also the licensee designee and administrator of four licensed adult foster care facilities in Oakland and Macomb County since 2012.

An Adult Foster Care Licensing Record Clearance has been completed for Mr. Ferdinand Policarpio attesting to his good moral character. Mr. Policarpio also submitted a medical clearance with proof of tuberculosis testing as required.

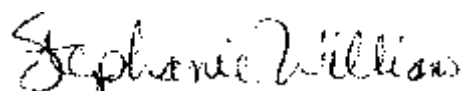
Technical assistance has been provided to Mr. Policarpio to assist her with complying with statutory and rule requirements for the maintenance of the facility, resident records and employee records. This technical assistance included a review of requirements pertaining to the handling and accounting of resident funds and for compliance with statutory requirements (Section 400.734b of Public Act 218) pertaining to the hiring or contracting of persons who provide direct service to residents.

B. Rule/Statutory Violations

The applicant was found to be in substantial compliance with the licensing act and applicable licensing rules.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home capacity six.

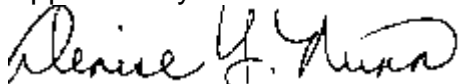


05/17/2016

Stephanie A. Williams
Licensing Consultant

Date

Approved By:



05/18/2016

Denise Y. Nunn
Area Manager

Date