



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
LANSING

DAVID C. HOLLISTER
DIRECTOR

June 5, 2003

Byron Center Manor Inc
2115 - 84th Street SW
Byron Center, MI 49315

RE: Application #: AL410246443
Byron Center Manor IV
2115 84th St. SW
Byron Center, MI 49315

Dear Byron Center Manor Inc:

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 recommended.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available, please feel free to contact Yolanda Sims, Area Manager, at (616) 356-0120.

Sincerely,

Grant Sutton, Licensing Consultant
Bureau of Family Services
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 356-0117

enclosure

**MICHIGAN DEPT. OF CONSUMER & INDUSTRY SERVICES
BUREAU OF FAMILY SERVICES
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #: AL410246443

Applicant Name: Byron Center Manor Inc

Applicant Address: 2115 - 84th Street SW
Byron Center, MI 49315

Applicant Telephone #: (616) 878-3300

Administrator/Licensee Designee: N/A

Name of Facility: Byron Center Manor IV

Facility Address: 2115 84th St. SW
Byron Center, MI 49315

Facility Telephone #: (616) 878-3300
(616) 878-3364 - FAX

Application Date: 02/28/2002

Capacity: 20

Program Type: AGED
ALZHEIMERS

II. METHODOLOGY

12/03/2001	Inquiry
02/28/2002	Enrollment
02/28/2002	Inspection Report Requested - Fire
02/28/2002	Inspection Report Requested - Health
07/26/2002	Contact - Document Received Plan review from the Health Dept.
09/09/2002	Inspection Completed-Fire Safety : D
05/20/2003	Inspection Completed-Env. Health : A
05/22/2003	Inspection Completed On-site
05/22/2003	Inspection Completed-BFS Full Compliance
05/27/2003	Corrective Action Plan Received Fire safety
05/27/2003	Corrective Action Plan Approved Fire safety
05/27/2003	Inspection Completed-Fire Safety : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single level, 20-bed facility that is part of a twin 20 design. Each of the 20 residents will have a private room with adjoining bathroom (commode and sink). There are 3 additional bathrooms, 2 with handicap accessible showers and 1 with a whirlpool bath. There is a large common area, dining area, and separate sitting area for visitors, if they desire more privacy. There is a small kitchen area off of the living area and a separate, restaurant-equipped kitchen for preparing meals. There is a fenced in courtyard at the rear of the facility.

B. Program Description

The stated mission of the facility is to, "...provide quality, resident-centered care and activities, in a warm, family-like atmosphere, to adults with memory deficits." The program will serve the elderly with staff specially trained in dementia and related issues. The program will provide recreational activities geared toward each resident individually, offering choices and flexible scheduling.

C. Rule/Statutory Violations

The facility is in full compliance with adult foster care licensing rules and statutes.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).

Grant Sutton Date
Licensing Consultant

Approved By:

Yolanda Sims Date
Area Manager