



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

December 29, 2016

Rebecka Goodrow
From The Heart Adult Foster Care, LLC
2880 South 2 Mile Road
Bay City, MI 48706

RE: Application #: AS090385244
From The Heart AFC-Kasemeyer
5395 Kasemeyer Road
Bay City, MI 48706

Dear Ms. Goodrow:

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,

A handwritten signature in cursive script that reads "Anthony Humphrey".

Anthony Humphrey, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48605
(810) 280-7718

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS090385244

Applicant Name: From The Heart Adult Foster Care, LLC

Applicant Address: 2880 South 2 Mile Road
Bay City, MI 48706

Applicant Telephone #: (989) 316-1487

Administrator/Licensee Designee: Rebecka Goodrow

Name of Facility: From The Heart AFC-Kasemeyer

Facility Address: 5395 Kasemeyer Road
Bay City, MI 48706

Facility Telephone #: (989) 295-4168
10/06/2016

Application Date:

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
AGED
ALZHEIMERS
PHYSICALLY HANDICAPPED
TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

| | |
|------------|---|
| 10/06/2016 | Enrollment |
| 10/11/2016 | Application Incomplete Letter Sent 1326As/Rebecka,Suzanne,Nicole. |
| 10/11/2016 | Contact - Document Sent Act&Rules. |
| 11/03/2016 | Lic. Unit file referred for background check review CH&SC/Rebecka. |
| 11/04/2016 | File Transferred To Field Office Saginaw. |
| 11/04/2016 | Application Complete/On-site Needed |
| 11/30/2016 | Inspection Completed On-site |
| 11/30/2016 | Application Incomplete Letter Sent |
| 12/08/2016 | Comment Received documents needed to complete enrollment. |
| 12/08/2016 | Inspection Completed-BCAL Full Compliance |
| 12/15/2016 | Comment Received approval of boiler inspection. |
| 12/15/2016 | Recommend License Issuance |

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This ranch style brick home is located at 5395 Kasemeyer Road in Bay City, MI. The home currently has four bedrooms, kitchen, living room, dining room, two bathrooms and a laundry room on the first floor. The home has a 2 ½ car attached garage as well as a full basement. The basement also has a full bathroom and two means of egress. The home is located within the city limits of Bay City and is close to shopping, medical services, public services and public transportation if needed.

The boiler, which is also the hot water heater, is located in a closet on the main floor, family room. The boiler closet is equipped with a self-closing device, has a 1-3/4 inch solid core door and is in a room that is constructed of material that has a 1-hour-fireresistance rating. On 12/15/2016, the boiler was inspected and approved by a licensed boiler inspector. The facility is equipped with interconnected, hardwire smoke

detection system, with battery backup, which was installed by a licensed electrician and is fully operational.

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

| Bedroom # | Room Dimensions | Total Square Footage | Total Resident Beds |
|-----------|-----------------|----------------------|---------------------|
| 1 (SE) | 8' 10" x 12' | 141.6 | Double Occupancy |
| 2 (NE) | 12' x 10' 6" | 127.2 | Single Occupancy |
| 3 (W) | 11' 2' X 11' 9" | 133.3 | Single Occupancy |
| 4 (S) | 22' 4" x 16' 4" | 347.2 | Double Occupancy |
| | | | |

The living, dining, and sitting room areas measure a total of 676 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement. The home has over 2,000 square feet of living space.

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

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 or non-ambulatory adults whose diagnosis is developmentally disabled, traumatic brain injured, Alzheimer's, Aged or physically impaired, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from: Hospitals and Nursing Home facilities, as well as local social service agencies.

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.

The licensee will provide all transportation for program and medical needs unless specified in the Resident Care Agreement and fee policy. 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. Licensee and Administrator Qualifications

The applicant is From the Heart, L.L.C., which is a “Domestic Limited Liability Company”, was established in Michigan, on 9/17/2012. 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 Board of Directors of From the Heart, L.L.C. has submitted documentation appointing Rebecka Goodrow, as Licensee Designee and as the Administrator of the facility.

A licensing record clearance request was completed with no lien convictions recorded for the licensee designee and administrator. The licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee and administrator 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 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 –to- resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “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 (www.miltcpartnership.org), IdentoGo, and the related documents required to be maintained in each employee’s 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 related to the physical plant at the time of licensure. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small group home (capacity 1 - 6).

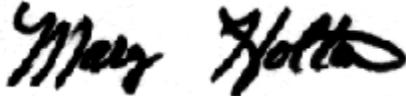


12/29/2016

Anthony Humphrey
Licensing Consultant

Date

Approved By:



12/29/2016

Mary E Holton
Area Manager

Date