



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

June 28, 2017

Sanford Martin
Hampton Manor of Davison, LLC
3901 Fortune Blvd
Saginaw, MI 48603

RE: Application #: AL250384760
Hampton Manor Of Davison III
10222 Lapeer Road
Davison, MI 48423

Dear Mr. Martin:

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 (810) 787-7031.

Sincerely,

A handwritten signature in cursive script that reads "Crecendra Brown".

Crecendra Brown, Licensing Consultant
Bureau of Community and Health Systems
4809 Clio Road
Flint, MI 48504
(810) 931-0965

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

I. IDENTIFYING INFORMATION

License #: AL250384760

Licensee Name: Hampton Manor of Davison, LLC

Licensee Address: 3901 Fortune Blvd
Saginaw, MI 48603

Licensee Telephone #: (989) 714-5007

Administrator/Licensee Designee: Sanford Martin

Name of Facility: Hampton Manor Of Davison III

Facility Address: 10222 Lapeer Road
Davison, MI 48423

Facility Telephone #: (810) 247-8442

Application Date: 09/09/2016

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED
AGED
ALZHEIMERS

II. METHODOLOGY

09/09/2016	On-Line Enrollment
09/09/2016	Contact - Telephone call received
09/12/2016	Comment BCAL-569-c LLC application received via e-mail
09/12/2016	Contact - Document Sent rules and act sent
09/12/2016	Application Incomplete Letter Sent need 1326 for S. Martin as Licensee Designee and Adm.
09/12/2016	Inspection Report Requested - Fire
09/12/2016	Contact - Document Sent fire safety string
10/27/2016	Contact - Telephone call made Returned a call from S. Martin. Had to leave him a voice message to call me back.
10/27/2016	Contact - Telephone call received Mr. Martin called me back about the BCAL-1326 clearance. I e-mailed him one in an attachment and requested it to be returned with a copy of his IRS federal ID number letter.
10/27/2016	Contact - Document Received BCAL-1326A for S. Martin and copy of IRS employer ID number letter.
10/27/2016	File Transferred To Field Office Flint/Genesee
11/01/2016	Application Incomplete Letter Sent
11/17/2016	Comment - BCAL-3704-AFC medical clearance req. for Sanford Martin received and forwarded to Flint and consultant.
06/14/2017	Inspection Completed-Fire Safety : A
06/14/2017	Application Complete/On-site Needed
06/15/2017	Inspection Completed On-site
06/15/2017	Inspection Completed-Environmental Health : A

06/27/2017 Inspection Completed-BCAL Full Compliance

06/28/2017 Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Hampton Manor of Davison III is located at 10222 Lapeer Road, Davison in Genesee County. The physical plant is a one-level vinyl and brick-sided structure with no basement. It consists of a living room, dining room, kitchen, office, locked medication room, laundry room, 8 single-occupancy resident bedrooms and 6 double-occupancy resident bedrooms. There is one separate public restrooms and each resident's bedroom has their own private bathroom with a walk-in shower and a closet. The driveway has adequate parking for staff and visitors.

The furnace and hot water heater are located on the main floor in a 1-hour protected enclosure with a 1 $\frac{3}{4}$ inch solid core door equipped with an automatic self-closing device. The laundry room is located in the back of the facility. 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 public water and sewer system. The facility is also connected to the municipal water supply. The facility was determined to be in substantial compliance with all applicable licensing rules pertaining to environmental health.

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

Bedroom #	Total Square Footage	Total Resident Beds
Bedroom 1	260	1
Bedroom 2	260	1
Bedroom 3	260	2
Bedroom 4	260	2
Bedroom 5	260	1
Bedroom 6	260	1
Bedroom 7	260	2
Bedroom 8	260	2
Bedroom 9	260	1
Bedroom 10	260	1
Bedroom 11	260	1
Bedroom 12	260	1
Bedroom 13	309	2
Bedroom 14	309	2

The living, dining, and sitting room areas measure a total of 1710 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

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. 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. This home is wheelchair accessible.

The bedrooms have the proper means of egress as required by R 400.15508. The interior of the home is of standard lath and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.15401, R 400.15402, R 400.15403, R 400.15405, R 400.15406 and R 400.15407.

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, Hampton Manor of Davison LLC, submitted a copy of the required documentation. 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 twenty (20) male or female adults whose diagnosis is aged, Alzheimer's and/or physically handicapped 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.

Hampton Manor of Davison LLC will ensure that the resident's transportation and medical needs are met. Hampton Manor of Davison LLC has transportation 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 09/09/2016, Hampton Manor of Davison LLC submitted an application to provide foster care services to twenty adults at 10222 Lapeer Road, Davison, Michigan.

The applicant, Hampton Manor of Davison LLC, which is a “Michigan Domestic Limited Liability Company”, was established in Michigan, on 04/04/2016. The company is an experienced adult foster care provider, currently operating several licensed adult foster care facilities in the State of Michigan. 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 applicant has a board of directors that oversee the company.

Hampton Manor of Davison LLC submitted a written statement naming Sanford T. Martin as the licensee designee and as the facility administrator. Sanford T. Martin submitted a licensing record clearance request that was completed with no LEIN convictions recorded. He also submitted a medical clearance request with statements from a physician documenting his good health and current TB-test negative results. Sanford T. Martin has 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 20-bed facility is adequate and includes a minimum of 1 staff to 15 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 1 to 15 resident ratios.

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), L-1 Identity Solutions™ (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 administrative rules related to the physical plant. 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 AFC adult large group home (capacity 13-20).

Crecendra Brown June 28, 2017

Crecendra Brown Date
Licensing Consultant

Approved By:

Mary Holton June 28, 2017

Mary E Holton Date
Area Manager