



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

October 5, 2017

Solema Ogoy
4Gems Adult Foster Care LLC
48440 Montelepre Dr.
Shelby Township, MI 48315

RE: Application #: AS500388052
4Gems Adult Foster Care
8138 Hedgeway Dr.
Shelby Township, MI 48317

Dear Ms. Ogoy:

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 "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

| | |
|---|---|
| License Application #: | AS500388052 |
| Licensee Name: | 4Gems Adult Foster Care LLC |
| Licensee Address: | 48440 Montelepre Dr. Shelby Township, MI 48315 |
| Licensee Telephone #: | (586) 819-7573 |
| Administrator/Licensee Designee: | Solema Ogoy, Designee |
| Name of Facility: | 4Gems Adult Foster Care |
| Facility Address: | 8138 Hedgeway Dr. Shelby Township, MI 48317 |
| Facility Telephone #: | (586) 819-7573 |
| Application Date: | 04/24/2017 |
| Capacity: | 6 |
| Program Type: | PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS |

II. METHODOLOGY

| | |
|------------|---|
| 04/24/2017 | On-Line Enrollment |
| 04/25/2017 | Contact - Document Sent Rule & Act booklets |
| 04/25/2017 | Application Incomplete Letter Sent App; valid corp; rec cl, FP's, Livescan request for Solema (LD & Admin) |
| 05/01/2017 | Contact - Document Received Rec cl & Livescan for Solema |
| 05/11/2017 | Contact - Document Received Valid corp |
| 05/15/2017 | Contact - Document Received Licensing file received from Central office |
| 06/06/2017 | Application Incomplete Letter Sent |
| 06/21/2017 | Contact - Document Received Received copy of warranty deed for home by mail |
| 09/01/2017 | Inspection Completed On-site Received two binders with policies and procedures and administrator/licensee designee records |
| 09/12/2017 | Contact - Document Received Received additional initial documents by email |
| 09/12/2017 | Contact - Document Received Email to and from Solema Ogoy |
| 09/13/2017 | Contact - Document Received Email to and from Solema Ogoy |
| 09/15/2017 | Contact - Document Received Email from Solema Ogoy |
| 09/18/2017 | Contact - Document Sent Email to and from Solema Ogoy |
| 09/19/2017 | Contact - Document Received Email from Solema Ogoy |

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|------------|--|
| 09/20/2017 | Contact - Document Received Email to and from Solema Ogoy |
| 09/21/2017 | Contact - Document Received Received letter from employer and training certificates by fax from Solema Ogoy |
| 09/21/2017 | Contact - Document Sent Email to and from Solema Ogoy |
| 09/22/2017 | Contact- Document Sent Email to and from Solema Ogoy re: program statement |

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the license of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1924.

A. Physical Description of Facility

The 4Gems Adult Foster Care home is a one story home located in Shelby Township, MI. The home has a proposed licensed capacity of six residents. The licensee for the home is 4 Gems Adult Foster Care LLC. The licensee designee for the home is Solema Ogoy. Ms. Ogoy owns the home and provided a copy of the warranty deed. The home has city water and sewer. Emergency services are available through the Shelby Township Police Department and Shelby Township Fire department.

The 4Gems Adult Foster Care home has a foyer, receiving area, family room, dining room, kitchen, four resident bedrooms, two resident bathrooms and staff area with laundry, bathroom and storage area. The receiving area, family room and dining room offer a total of 680 square feet of living space which meets the required 35 square feet of living space for 6 residents.

The four bedrooms in the home are sized as follows:

| Bedroom # | Room Dimensions | Total Square Footage | Total Resident Beds |
|-----------|-----------------|----------------------|---------------------|
| 1 | 17'10" x 10'11" | 194 | 2 |
| 2 | 11'7" x 9'7" | 111 | 1 |
| 3 | 13'4" x 11'7" | 154 | 2 |
| 4 | 10' x 9'9" | 96 | 1 |

Total capacity: 6

All three bedrooms have adequate space, bedding and storage. All of the bedrooms have a chair and a mirror. The furnace is located in the hallway and has a self-closing fire door. There is a thermometer in the refrigerator and freezer. The home has hard wired smoke detectors with battery backup and a fire extinguisher. The home does not have a basement. Medications will be kept in a locked closet. Emergency procedures are posted in the home. Emergency phone numbers are posted near the telephone. The bedroom and bathroom doors are equipped with non-locking against egress hardware. The home has a fireplace that will not be utilized. During the onsite inspection, I observed that the home was found to be in substantial compliance with rules pertaining to maintenance and sanitation.

B. Program Description

The 4Gems Adult Foster Care Home is equipped to serve six residents. The home is wheel chair assessable. The home's program statement indicates that they are able to serve aged residents with Alzheimer's disease, mental illness, developmental disability, traumatic brain injury (TBI) and physically handicapped. The home is also able to accept residents who are medically fragile, however, that do not require continuous nursing care.

The home will provide 24 hour care and supervision for residents. Ms. Ogoy plans to schedule one staff per shift. Additional staff may be needed depending on needs of residents. The home will arrange transportation for residents utilizing outside vendors

The staff will assist residents with food preparation, eating and feeding, toileting, bathing, grooming, dressing, transferring, and ambulation assistance. Recreational activities will be provided on a daily basis and include board games, group discussions, card playing, horse shoes and picnic activities in home's spacious exterior yard.

Solema Ogoy is designated as the licensee designee and administrator for the home. Ms. Ogoy has been fingerprinted and provided a copy of medical statement dated 07/17/2017 which indicates that she has no physical or mental conditions or health problems that would limit her ability to work with or around dependent adults. Ms. Ogoy had a negative TB test on 05/17/2017.

Ms. Ogoy is a licensed physical therapist. She has worked as a licensed physical therapist since 2009 at the Shelby Nursing Center. Ms. Ogoy provided a letter dated 09/19/2017 from the Director of Therapy which states, "Solema Ogoy, PT has been working in this facility for almost eight years since August 2009 and has experience in handling, providing care and treatment to various cases which includes but not limited to neurological patients such as brain injuries-TBI and non-traumatic brain injuries, CVA and dementia patients".

She received her Bachelor of Science degree in Physical Therapy from Pines City College in Baguio City, Philippines in 2000. She completed First Aid, CPR and AED training on 08/19/2017. Ms. Ogoy also completed Pre-Licensing Preparedness Training

for Licensees and Administrators through Direct Care Training in 2017. Training topics included Prevention and Containment of Communicable Diseases, Adult Foster Care Definition, Fire and Safety, Resident Rights, Proper Nutrition, Adult CPR/AED, First Aid, Medication Administration and Person Centered Planning. In addition, Ms. Ogoy has experience caring for an 87 year old male relative with dementia.

Ms. Ogoy's husband, Ferdie Ogoy, will act as the designated person for the home in Ms. Ogoy's absence. Mr. Ogoy also completed Pre-Licensing Preparedness Training in 2017. He completed First Aid, CPR and AED training on 08/19/2017. Mr. Ogoy has been fingerprinted and provided a copy of medical statement dated 08/18/2017 which indicates that he has no physical or mental conditions or health problems that would limit his ability to work with or around dependent adults. Mr. Ogoy had a negative TB test on 08/18/2017.

C. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend that the department issue a temporary license to this small group adult foster care home, 4Gems, with a capacity of six (6) residents.

The temporary license shall be in effect for a six month period. Another licensing renewal will be conducted after six months.




09/22/2017

Kristine Cilluffo
Licensing Consultant

Date

Approved By:



10/05/2017

Denise Y. Nunn
Area Manager

Date