



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

December 7, 2017

Cynthia Johnson
P.O. Box 118
Ortonville, MI 48462

RE: Application #: AM630382427
Regenia's AFC Home
210 South Street
Ortonville, MI 48462

Dear Mrs. Johnson:

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 12 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 blue ink that reads "John P. Pochas".

John Pochas, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 860-3822

enclosure

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

I. IDENTIFYING INFORMATION

License Application #:	AM630382427
Applicant Name:	Cynthia Johnson
Applicant Address:	210 South Street Ortonville, MI 48462
Applicant Telephone #:	(248) 627-2995
Administrator/Licensee Designee:	N/A
Name of Facility:	Regenia's AFC Home
Facility Address:	210 South Street Ortonville, MI 48462
Facility Telephone #:	(248) 627-2995
Application Date:	04/13/2016
Capacity:	12
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED AGED

II. METHODOLOGY

04/13/2016	Enrollment
04/18/2016	Contact - Document Received Medical Clearance and TB/Cynthia, TB/Jeffrey, Thomas.
04/19/2016	Application Incomplete Letter Sent FP, 1326, RI030/Cynthia, 1326/Jeffrey.
04/19/2016	Contact - Document Sent Act & Rules.
04/19/2016	Inspection Report Requested - Health 1025623.
04/19/2016	Comment John Pochas consultant: Request EHI (over 1 yr), No/fire safety.
04/19/2016	Application Incomplete Letter Sent EHI.
05/11/2016	Licensing Unit file referred for background check review CH & SC-Yes/Jason.
05/19/2016	Contact - Document Received Licensing file received from Central office
06/14/2016	Contact - Telephone call received Confirm household member Jason is cleared, in BITS is cleared as of 5/11/2016.
07/13/2016	Inspection Completed-Env. Health: A
10/04/2016	Inspection Report Requested – Fire
10/04/2016	Contact - Document Sent Fire Safety String.
10/10/2016	Application Complete/On-site Needed
12/19/2016	Contact - Telephone call made Applicant stated that Office of Fire Safety (OFS) said they did not need sprinklers because it was a continuing operation and they were going to "tear up the paperwork"
02/03/2017	Contact - Telephone call made OFS, Brian Williams; message left

04/22/2017	Inspection Completed- Fire Safety: A
05/05/2017	Inspection Completed On-site
05/05/2017	Inspection Completed-BCAL Sub. Compliance
07/21/2017	Inspection Completed On-site
07/21/2017	Inspection Completed-BCAL Full Compliance
08/07/2017	Recommend License Issuance
08/22/2017	Revised policy documents; verification and electrical inspection documents.
08/24/2017	Original LSR generated
09/27/2017	Inspection Completed-Env. Health: B
11/16/2017	Inspection Completed-Env. Health: A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules governing operation of small group adult foster care facilities with an approved capacity of 1-12 residents, licensed or proposed to be licensed after 5/24/94.

B. Program Description

1) Program Statement

The applicant submitted a copy of the program statement to the Department for review and inclusion in the licensing record. The document is acceptable as written. The facility will offer a program and services for female adults with mental illness. According to the program statement, the goal of the program is to maximize the functioning of each resident's capability and condition. Supervision, protection and personal care will be provided according to the program statement. Transportation will not be provided by the home. Assistance in arranging other transportation if necessary will be provided.

2) Required Information

On 04/13/16, the Department received a license application and application fee from Mrs. Cynthia Johnson, to operate a medium group AFC facility at the above referenced address in Ortonville, Michigan. The applicant is seeking to operate a program for Adult Foster Care homes and elder care facility.

As part of the application process the applicant submitted admission, discharge policies for Regenia's AFC home. The documents are acceptable as written. Also included in the Department files are a proposed staffing pattern, a current organizational chart, a proposed budget, a floor plan with room use and size specifications, and current financial documents. As part of the licensing process, the applicant presented personnel policies, routine procedures, and job descriptions for review during the final inspection. The documents are kept in the home and are available for review.

A Records Clearance Request has been processed for Mrs. Cynthia Johnson. Based upon the information from the Record Clearance Report, I find that she is of good moral character, sound judgment, and is suitable to provide care to dependent adults. A current Licensing Medical Clearance form for Mrs. Johnson is contained in the record. The form indicates that she is in good physical and emotional health, and there is no reason why she should not be involved in the operation of this facility, and the provision of adult foster care. A current negative TB test is also on file with the Department.

As referenced above, Mrs. Johnson submitted financial information as part of the new application process. The applicant submitted a current balance sheet as well as a projected budget. Based on the information presented, I have determined that the applicant corporation has demonstrated a stable financial position and possesses the financial capability to operate an adult foster care facility at the above referenced location.

3) Qualifications and Competencies

The applicant, Mrs. Cynthia Johnson, has been involved in providing Adult Foster Care and related services and care to the elderly for over 15 years. Mrs. Johnson has been directly involved with the management and operation of a facility providing AFC services for the past two years. Based on such previous experience, Mrs. Johnson has demonstrated that she has the administrative and management expertise to run the Adult Foster Care facility. Based on personal contact and materials submitted I conclude that Mrs. Johnson has demonstrated her competency as required by the rule R 400.14201.

At the time of the final inspection, Mrs. Johnson indicated that there were no changes to report in information previously submitted in this application for a license. The applicant was advised of Departmental requirements relating to changes in information, as outlined under administrative rule R400.14103 (5), and has indicated that it is her intent

to assure continued compliance with this rule. The applicant was also reminded of Departmental requirements pertaining to posting of the license as outlined under rule R400.14103 (4), and has indicated that it is her intent to maintain compliance with this requirement.

Based on the above information, I have determined that Mrs. Johnson is in substantial compliance with rule R400.14103 regarding required information and reporting changes, and rules R400.14201, R400.14202, and R400.14205 regarding qualifications and health of the Applicant.

As required by the rule R400.14202, the home has a designated administrator. Mrs. Cynthia Johnson will act as administrator for Regenia's AFC home. Based on the information submitted and information reviewed in the home at the time of the final inspection, she meets the requirements of the rules and is qualified based on her background and training to act as administrator for Regenia's AFC home.

Ms. Johnson understands that in accordance with rules R 400.14307, R 400.14308, and R 400.14309 regarding behavior intervention and crisis intervention, individual intervention programs will only be used at the least restrictive level necessary as defined in the individual plan of service. Only trained staff shall implement such programs. Facility staff will not utilize seclusion or restraints. Documentation of the implementation of any behavior management program will be maintained in the facility and will be available at all times for Departmental review.

As mentioned above, Ms. Johnson submitted copies of the proposed admission and discharge policies to the Department for review, and inclusion in the licensing record. I have reviewed the documents and determine that they do not conflict in content or intent with current rules and are therefore acceptable as written. A copy of the proposed staffing pattern is contained in the licensing file. The proposed staffing pattern appears to meet the care requirements of the proposed population described in the home's program statement and the minimum requirements of rule R 400.14206.

Individuals who are interested in placement into Regenia's AFC home, should contact Mrs. Johnson at the facility. The applicant also understands that the facility will conduct its own evaluation and written assessment of any individual who is referred for placement. The purpose of this assessment is to judge whether the individual fits the criteria established in the home's program statement and is compatible with the current residents. A resident care agreement and a current health appraisal are also required at the time of admission. Based upon the above information, the facility is found to be in substantial compliance with requirements of rule R400.14302 pertaining to admission and discharge.

4) Environmental Conditions

Regenia's AFC home is located at 210 South Street, Ortonville, Michigan 48462. The home is situated east of M-15(Ortonville Rd.) on South Street in Ortonville, Oakland

County, Michigan. According to written memo dated 9/18/16 by Mr. Jeffry Arnold Johnson, Personal Representative of the Estate, ownership designation is in Probate at current time.

Regenia's AFC home is a wood sided colonial with basement. The home is in a semi-rural area of similarly constructed homes. The home is landscaped. The interior of the home is comfortable, clean, and contains a number of upstairs recent updates.

The main entrance opens into a larger living room and a dining family room straight ahead. The kitchen is located to the right of the dining room. One full bath is located off the hallway adjacent to the kitchen. A gas-fired furnace is located in the basement. Floor separation to furnace is provided with a fire rated metal door with self-closing device.

Resident bedrooms were measured at the time of inspection and were found to be of the following dimensions and accommodation capability:

<u>BEDROOM</u>	<u>DIMENSIONS</u>	<u>SQ. FOOTAGE</u>	<u>OCCUPANCY</u>
Bedroom # 1 (1 st floor/North)	12' x 12'	144	2
Bedroom # 2 (1 st floor/East)	11.5' x 15'	172	2
Bedroom #1 (Upstairs/West)	12' x 10'6	127	1
Bedroom # 2 (Upstairs/South)	14' x 16'	224	2
Bedroom #3 (East)	13' x 12'	156	2
Bedroom #4 (North)	13'5" x 13'5"	182	3
Total Occupancy:			12

Compliance with rule R400.14409 (6) was demonstrated at the time of final inspection.

Based upon the above information, this facility has the square footage necessary to accommodate up to 12 adults as requested in the application.

The living space for the home was measured and is listed below:

The home has a large living room that measures 20' x 14' a dining area that measures 13' x 14', a sitting room which measures 17' x 14' ,a therapy room which measures 13' x 15' and a kitchen that measures 24' x 8'. The proposed capacity for the home is twelve (12). Based upon the above measurements, there will be more than the required 35 square feet per resident minimal living space available for twelve (12) residents of the home.

The bedrooms were properly furnished, clean, and neat. Each bedroom has an easily operable window with screen, a mirror for grooming and a chair. The bedrooms all have

adequate closet space for the storage of clothing and personal belongings. The bedrooms also have adequate lighting to provide for the needs of the staff and residents. The shower and bathtub area is equipped with required non-skid surfacing and handrails, to assure resident safety in the maintenance of personal hygiene. The bathrooms were equipped with soap and paper towels for hand washing. I also observed that the facility was equipped with all required furnishings, linens, cooking and eating utensils.

Regenia's AFC has private water and sewage services. Garbage disposal is supplied through City of Ortonville. The kitchen and bathroom areas were evaluated, and were found to be adequately equipped and in clean condition. All necessary appliances were present at the time of final inspection. Poisons and caustics will be stored in a secured area not used for food storage or preparation. The home has adequate food storage capacity. The refrigerator was equipped with thermometers to monitor the temperature of food storage. Water temperature was tested at the time of final inspection and found to be within the acceptable range as defined by rule R400.14401 (2). The home also met the minimum requirements regarding food service (R400.14402) and maintenance of premises (R 400.14403). Laundry facilities are located in a separate room off kitchen area. The washer and dryer were properly installed and the dryer vent was made of acceptable non-combustible material.

Based on the above information and observations, I found the facility to be in substantial compliance with Departmental requirements regarding environmental conditions.

Fire Safety

Note: Mr. Brian Williams, Plan Review Services, Bureau of Fire Services, informed me on 2/6/17 that a plan review and subsequent fire safety requirements was not required for "change of ownership" and application is not considered "new".

A fully integrated hard wired smoke detection system installed meets the requirements of R 400.14505. The smoke heads are placed as required by the rule. The home has smoke detectors in the furnace and kitchen areas. The home also has fire extinguishers located on the main floor and basement, which meet the requirements of R400.14506. The home has more than two means of egress from the main floor and the exit doors all meet the requirements of rules R400.14507 and R400.14509. The means of egress were measured at the time of final inspection and meet the 30-inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom doors have conforming hardware. The bedrooms of the home also have the proper means of egress as required by R400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R400.14502, R400.14503, and R400.14504.

A gas forced air system heats the facility. The furnace was recently inspected and the licensee supplied a copy of the report for review at the time of the final inspection. The

licensee was advised that water temperature should be monitored on a regular basis. The water temperature was tested at the final inspection and found to be in compliance with the rule R 400.14401(2). I also found the electrical service (circuit breaker panel) to be adequate and in safe condition at the time of final inspection. The home was found to be in compliance with rules relating to interior finish, smoke detection equipment, fire extinguishers, means of egress, both generally and for bedrooms, heating equipment, flame producing equipment; enclosures, and electrical service.

I reviewed the facility's emergency procedures, which contain written instructions to be followed in case of fire, and medical emergency. Evacuation routes were also posted in the facility, with emergency telephone numbers posted in proximity to the telephone. The home had its emergency preparedness plans posted as required. The home has emergency medical services available through the City of Ortonville. The licensee understands the Departmental requirements relating to the maintenance of fire drill records with the licensee. The licensee has indicated that it is the licensee's intent to conduct fire drills at least on a monthly basis, one per shift per quarter, as well as to maintain a record of these fire drills, and resident performance during such drills.

Based upon the above observations and information, I found this facility to be in substantial compliance with administrative rules pertaining to emergency preparedness and fire safety.

5) Facility and Employee Records

I have reviewed Regenia's AFC home personnel policies and determined that they do not conflict with statutory or administrative rule requirements. The job descriptions for Regenia's AFC home were reviewed and submitted to the department. They are acceptable as written. I have also discussed with the applicant the good moral character requirements as related to the hiring of staff. Particular attention was placed upon the new rule related to the determination of good moral character by the applicant (R 400.14734b). I have reviewed the process that the home will follow and find it meets the intent of the administrative rules. The applicant is well aware of the requirements for employee records based on previous experience in Adult Foster Care.

a) Facility Records in General (Rule R400.14209)

The resident care agreement proposed for use in this facility is the current Department resident care agreement. Departmental requirements pertaining to maintaining a resident register, as required under rule R400.14210 have been discussed with the applicant and the applicant indicates that it is her intent to comply with this requirement. The applicant indicated that she understands the Department requirements for record keeping.

Home menus have been discussed and the applicant understands the requirements set forth in rule R400.14313 and has indicated that the home will meet the requirement with respect to nutrition and menus as stated in the rule. Mrs. Johnson has been advised

that all working menus are to be dated, prepared in advance, and that any changes or substitutions may be reflected on the working menus. Menu records are to be maintained in the facility for a period of one year. The applicant was also advised that a licensed physician must order any special diets implemented in the home.

b) Employee Records (rules R400.14204 and R400.14208)

The applicant is well aware of the requirements for staff qualifications and training and intends to comply with the rules based upon previous contacts. The applicant understands that all employees must submit to a pre-employment physical, which includes a TB tine test. The results of the test are obtained before employment begins. The applicant will also verify age and check references before a person is offered employment. The applicant provides an orientation and training of its own relating to reporting requirements, emergency procedures, prohibited practices, resident rights, and personal care, protection, and supervision required in adult foster care. Each employee must complete certified training in First Aid and CPR. Evidence of staff training will be maintained in the employee records for future Departmental review. Based upon our conversation at the time of inspection, the administrator/ applicant understand and intend to comply with the requirements of rules R400.14204 and R400.14208.

6) Resident Care, Services, and Records

Departmental requirements pertaining to resident records as specified in rule R400.14316 were discussed with the Applicant. The Applicant has indicated that it is the home's intent to comply with these requirements. During the course of the pre-licensing investigation, I advised the applicant of Departmental requirements pertaining to resident rights and prohibited practices as outlined under rules R400.14304 and R400.14308. The applicant attests that it is the intent of the home to achieve and maintain compliance with these requirements.

Also discussed were Departmental requirements pertaining to incident and accident reports, as outlined under rule R400.14311 and the requirements for safeguarding and distributing of prescription medication as outlined in rule R400.14312. The applicant has again indicated that it is their intent to achieve and maintain compliance with these requirements. I determined that the facility was in substantial compliance with Departmental requirements pertaining to investigating and reporting as stipulated in rule R400.14311, resident medication as stipulated in rule R400.14312, and resident rights as outlined in rule R400.14304.

I discussed the rules pertaining to the handling of resident funds with the administrator/ applicant at the time of the final inspection. The applicant is aware that these are required forms and an alternate form cannot be used unless the Department approves the form. Compliance will be evaluated at the time of renewal.

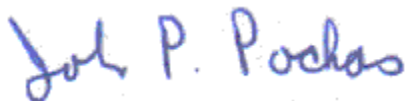
The applicant stated that they have an understanding of the rule R400.14317 relating to resident recreation and intends to comply through an activity schedule for the home which will expose the residents to a variety of community based recreation and leisure time activities.

The applicant is aware of the requirements of rules R400.14318 and R400.14319, and assures me that the applicant will comply with the requirements of the rules regarding emergency and regular transportation.

In conclusion, the facility, by virtue of observation, interview, and review of program documentation, is found to be in substantial compliance with Departmental requirements relating to resident care, services, and records. A more complete evaluation of resident services will be made at the time of license renewal.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult medium group home (capacity 7-12).

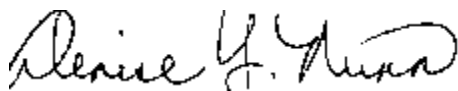


12/07/2017

John Pochas
Licensing Consultant

Date

Approved By:



12/07/2017

Denise Y. Nunn
Area Manager

Date