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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 24, 2019

Dorothy Thornton
Falco Corporation
Suite 101
5228 Lovers Lane
Portage, MI 49002

RE: Application #: AS030392651
Allegan Enrichment Center II
312 Trowbridge Street
Allegan, MI 49010

Dear Ms. Thornton:

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 (616) 356-0183.

Sincerely,

A handwritten signature in black ink, appearing to read "Ian Tschirhart".

Ian Tschirhart, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 644-9526

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS030392651
Applicant Name:	Falco Corporation
Applicant Address:	Suite 101 5228 Lovers Lane Portage, MI 49002
Applicant Telephone #:	(269) 342-8766
Licensee Designee:	Dorothy Thornton
Administrator:	Dorothy Thornton
Name of Facility:	Allegan Enrichment Center II
Facility Address:	312 Trowbridge Street Allegan, MI 49010
Facility Telephone #:	(269) 673-5511
Application Date:	02/14/2018
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

02/14/2018	Enrollment
02/15/2018	Contact - Document Sent Rule & Act booklets
02/15/2018	Contact - Document Received App; rec cl for Dorothy (LD & Admin)
02/27/2018	Application Incomplete Letter Sent
12/13/2018	Application Complete/On-site Needed
01/11/2019	Inspection Completed On-site
01/11/2019	Inspection Completed-BCAL Full Compliance
01/11/2019	SC-Inspection Completed On-Site
01/11/2019	SC-Inspection Full Compliance
01/11/2019	SC-Certification issued MI and DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Allegan Enrichment Center II is located at 312 Trowbridge Street, Allegan, (Allegan County), Michigan, and is owned and operated by Falco Corporation, which is based in Portage, Michigan. Falco Corporation also owns and operates two licensed Adult Foster Care medium group homes in Michigan (AM030014749 and AM800015739). A document from the City of Allegan Assessor's Office shows that Falco Corporation owns this home on Trowbridge.

Allegan Enrichment Center II, hereafter referred to as AEC II, is a two-story dwelling; the outside lower story of the home is yellow brick and the second level has siding.

The main floor has a manager's office, breakroom, conference room, game room, medication room with a walk-in medication closet, one full bath, laundry room with washer machine and dryer, and living room. Some ceiling tiles were recently installed in the breakroom and conference room on the first floor. The applicant provided me with a document, which is kept in the field file, showing that these tiles are made of Class A materials.

The second floor has four bedrooms, two full baths, a kitchen, a dining room, and a staff office. The home is not wheelchair accessible. This home utilizes public water and sewage services. There is a two-car attached garage.

There are handrails where required, but the home is not wheelchair accessible. This facility utilizes public sewer and water services.

The hot water heater and furnace are located in the basement that is separated from the first floor of the home by a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware. Heat is provided throughout the home with radiators, which all have protective shields. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational, which was tested upon the final inspection on 01/11/2019 and worked properly. There is at least one operable A-B-C fire extinguisher attached to the wall and are easily accessible. Evacuation routes are placed on the walls in conspicuous places, and emergency telephone numbers are posted next to the home's telephone, which residents will have reasonable access to.

Resident bedrooms were measured have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	13'9" X 14'	192	2
2	11'6" X 11'6"	132	1
3	12' X 15'2"	182	1
4	14'6" X 15'3"	221	2

Total Capacity: 6

The common living areas measure for a total of 1,016 square feet. This greatly exceeds the minimum of 35 square feet per resident requirement.

The kitchen has all the necessary cooking utensils, built-in thermometer for the freezer and refrigerator, and a garbage can with a tightly closed lid.

All of the furniture, appliances, equipment, etc. are clean and in good condition. The overall maintenance and cleanliness of the home is good.

The dwelling, surrounding pavement, and landscaping are all in good condition and are well-maintained.

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 and/or female adults aged 18-70 years, who may be diagnosed with a mental illness and/or developmental disability. 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. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

An application for Special Certification for Mental Illness and Developmental Disability programs was submitted concurrently with this application.

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 members, and only with the prior approval of the resident, guardian, and the responsible agency.

AEC II will provide transportation to residents and will keep a first aid kit in the vehicle. The vehicle used to transport residents will be maintained in a safe condition.

The staffing pattern for the original license of this six-bed facility is first shift (6 a.m. to 2 p.m.) and second shift (2 p.m. to 10 p.m.) 2-staff-to-6 residents; and third shift (10 p.m. to 6 a.m.) 1-staff-to-6 residents.

C. Applicant and Administrator Qualifications

Dorothy Thornton is the Licensee Designee and Administrator for this home. Medical and Record Clearance requests for Mrs. Thornton were completed with no restrictions noted on either. Her TB-tine results were negative.

Mrs. Thornton has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

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 Mrs. Thornton, can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked medication cart 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 themselves and direct care staff or volunteers and the retention schedule for all of the documents contained within their and 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 at the time of licensure.

VI. RECOMMENDATION

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



01/22/2019

Ian Tschirhart
Licensing Consultant

Date

Approved By:

Jerry Hendrick

01/24/2019

Jerry Hendrick
Area Manager

Date