



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 14, 2019

Novella Lanzanas  
Legacy Senior Care, LLC  
4214 Gatesford Circle Dr  
Troy, MI 48085

RE: Application #: AS500396808  
**Legacy Senior Living of Clinton Township**  
**38342 James Drive**  
**Clinton Township, MI 48036**

Dear Mrs. Lanzanas:

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 "L. Reed".

LaShonda Reed, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(586) 676-2877

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS500396808
<b>Licensee Name:</b>	Legacy Senior Care, LLC
<b>Licensee Address:</b>	4214 Gatesford Circle Dr. Troy, MI 48085
<b>Licensee Telephone #:</b>	(586) 306-8779
<b>Administrator/Licensee Designee:</b>	Novella Lanzanas
<b>Name of Facility:</b>	Legacy Senior Living Of Clinton Township
<b>Facility Address:</b>	38342 James Drive Clinton Township, MI 48036
<b>Facility Telephone #:</b>	(586) 306-8779
<b>Application Date:</b>	10/16/2018
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. METHODOLOGY

10/16/2018	On-Line Enrollment
10/17/2018	Contact - Document Sent Rule & Act booklets
10/23/2018	Contact - Document Received Novella Lanzanas, licensee designee/administrator submitted an application, IRS letter and clearances.
10/26/2018	Contact - Document Received Licensing file received from Central office
11/16/2018	Application Incomplete Letter Sent Sent via email to: legacyseniorcare@gmail.com
12/04/2018	Application Complete/On-site Needed
01/16/2019	Inspection Completed-BCAL Full Compliance
01/16/2019	Inspection Completed On-site

## 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 (12 or less), licensed or proposed to be licensed after 05/24/1924

### A. Physical Description of Facility

Legacy Senior Living of Clinton Township home is located in Macomb County. This residential property is a one-story brick ranch style home built on a slab foundation with a two-car attached garage. The home features two full bathrooms, kitchen, living room, dining room, and five bedrooms. The property has a shed and has central cooling, gas heating, public water and sewer. The home has positive-latching doors installed and approved fire safety equipment. There are sliding doors leading to the backyard.

The gas furnace and hot water heater are located on the main level of the home. There is a 1 $\frac{3}{4}$ " furnace room door and is stoppable and is equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwired smoke detection system, with battery backup, which was installed by a licensed electrician and is operational.

Legacy Senior Living of Clinton Township home is nearby to several schools, restaurants and libraries. The township has parks and a Recreation Department. The

home is in Chippewa Valley school district. The city offers special education programs, Macomb College and University Center, senior citizen classes, programs, support, and outreach referral are available to meet the educational, cultural, athletic, creative and emotional needs of the older adult. McLaren Macomb Hospital is the nearest hospital.

Resident bedrooms were measured during the onsite inspection and have the following dimensions:

<b>Bedroom #</b>	<b>Room Dimensions</b>	<b>Total Square Footage</b>	<b>Total Resident Beds</b>
1	11'9" x 13	152.75	1
2	10'11" x 15'4"	167.39	1
3	10'6" x 14' 7"	153.13	1
4	15'6" x 14'4"	222.17	2
5	20'6" x 12' 9"	261.38	1
<b>Total Capacity:</b>			<b>6</b>

A total of 826.39 square feet calculated for the kitchen, dining room and living room. The living space exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, it is concluded that this facility can accommodate six (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

### **B. Program Description**

Legacy Senior Living of Clinton Township provides care, assistance and supervision to the aged, physically handicapped, Alzheimer's Dementia and other related Dementia conditions. It is an alternative to the typically larger, less personal assisted living facilities and specializes in providing a very high level of care in a smaller, more personalized environment. Legacy Senior Living of Clinton Township provides 24 hours, seven days a week personal care, protection and assistance. The services include assistance in their activities of daily living, medication administration, meals, personal grooming, ambulation, laundry and recreation.

Legacy Senior Living of Clinton Township has direct care staff that is at least 18 years of age who are able to meet the physical, emotional, intellectual and social needs of the each resident and are capable of handling emergency situations, The direct care staff will be trained and equipped in the areas of First Aid, CPR, medication administration, personal care, supervision and protection, resident rights, safety and fire prevention, prevention and containment of communicable diseases, as well reporting. Legacy Senior Living of Clinton Township works with Visiting Physicians on an as needed basis.

Legacy Senior Living of Clinton Township will provide services to the Alzheimer and related dementia conditions. Legacy Senior Living of Clinton Township will provide individual care to residents in a home-like environment to assist with their basic needs

and to maximize their quality of life, reduce agitation and promote safety. Legacy Senior Living of Clinton Township will provide a thorough assessment of resident current level of dementia within 45 days of admission. A plan of care will be utilized such as therapeutic activities to improve behavior and reduce restlessness and anxiety. To improve eating and sleeping patterns and socialization. Therapeutic activities will involve gross motor activities, self-care activities, social activities, crafts and sensory enhancement activities.

Legacy Senior Living of Clinton Township home is designed to house six residents. There are four private rooms and one shared room. Laundry serviced are included and performed twice a week. Staff members will clean residents' rooms unless they choose otherwise. Three nutritious meals and snacks in between will be served daily. Diet for each resident will be as recommend by the resident's physician as stated in the health care appraisal. Menus will be provided to the residents. Every resident has access to a telephone and may use at any time at a reasonable time limit. Long distance calls are charged to the residents' bill. Family and members and friends are encouraged to visit during non-sleeping hours.

Legacy Senior Living of Clinton Township home licensee designee submitted the following documents to licensing as outlined in Rule(s) 400.14103, 400.14207, 400.14209, and 400.14302: Program Statement; Admission Policy, Discharge Policy; Personnel Policies; Refund Agreement; Articles of Incorporation; Board of Directors List; Designated Person; Budget; Floor Plans; Organizational Chart; Permission to Inspect; Proof of Ownership; Standard/Routine Procedures; Staff Training; Fire Evacuation Plan; and Staffing Pattern.

Legacy Senior Living of Clinton Township licensees are the owners of Legacy Senior Care, LLC are Rene Lanzanas and Novella Lanzanas. Legacy Senior Care, LLC is a domestic Limited Liability Company that was established 10/27/2013. Legacy Senior Care does not have any funding contracts or agreements with any person, agency, company, organization or any other entity. Legacy Senior Care is contracting services through placement agencies for resident referrals.

### **C. Applicant and Administrator qualifications**

Ms. Novella Lanzanas has been appointed the licensee designee and administrator for the facility. Ms. Lanzanas is a registered nurse who has 20 years of experience in the care of the elderly adults in both the hospital and home settings with mild to moderate dementia, physically handicapped and traumatic brain injured. Ms. Lanzanas has a current license from the Michigan Board of Nursing.

Ms. Lanzanas has submitted all the training and educational requirements as outlined in Rule 400.14201 (3)(a) through (i). Ms. Lanzanas has numerous years of experience working with the elderly population and has been a licensee and administrator at two other licensed facility that is currently in operation.

Ms. Lanzas completed her medical exam on 11/19/2018 and was found to be in good physical and mental health. Ms. Lanzas completed a TB symptom assessment on 07/24/2018 and does not have symptoms of Tuberculosis. Ms. Lanzas also submitted her fingerprint to the licensing unit and there is currently no criminal history.

Ms. Lanzas was informed during the onsite inspection on 01/16/2019 that she will need to maintain in each resident record the required items that are consistent with Rule 400.14316(1)(a) through (2). Ms. Lanzas was also informed that she will need to maintain in each employee file the required items that are consistent with Rules 400.14204 and 400.14208 for staff qualifications and training: completed and signed employment application that includes a hire date; educational information and experiences; two references; copy of the person's driver's license; a signed job description and personnel policies; initial physical signed by a physician and then annual health care reviews thereafter; tuberculosis testing with results; copy of fingerprinting results; and training requirements for direct caregivers. Both the staff and resident files will be reviewed prior to the expiration of the temporary license during the next onsite inspection.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of minimum of staff to four residents per shift. Ms. Lanzas acknowledges that the staff to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. Ms. William has indicated that direct care staff will be awake during sleeping hours.

Ms. Lanzas acknowledged that at no time would this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facility's staff to resident ration or expectation to assist in providing supervision, protection, or personal care to the resident population.

Ms. Lanzas acknowledges an understanding of the qualification, suitability, and training requirement for direct care staff prior to each person working in the facility tin that capacity or being considered as part of the staff to resident ratio.

Ms. Lanzas acknowledges an understanding of the responsibility to access the good moral character of employees and contractors who have 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](http://www.miltcpartnership.org)) and the related documents required to be maintained in each employee's record to demonstrate compliance.

Ms. Lanzas 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, Ms. Lanzas 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.

Ms. Lanzanas acknowledges her responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, Ms. Lanzanas acknowledges their responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. Lanzanas acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Ms. Lanzanas acknowledges the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal 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 updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Ms. Lanzanas acknowledges her responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

Ms. Lanzanas acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Lanzanas acknowledges that a separate *Resident Funds Part II BCAL-2319* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

Ms. Lanzanas acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Ms. Lanzanas indicated that it is their intent to achieve and maintain compliance with these requirements.

Ms. Lanzanas acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents, accidents, and the responsibility to conduct an immediate investigation of the cause. Ms. Lanzanas has indicated her intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Ms. Lanzanas 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.

Ms. Lanzanas acknowledges that residents with mobility impairments may only reside on the main floor of the facility

**D. Rule/Statutory Violations**

Compliance with the licensing act and administrative rules related to the physical plant has been determined. 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 small group home (capacity 1-6).



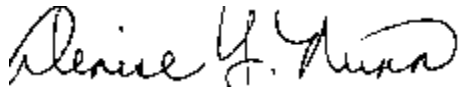
02/28/2019

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LaShonda Reed  
Licensing Consultant

Date

Approved By:



03/14/2019

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Denise Y. Nunn  
Area Manager

Date