



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS

MIKE ZIMMER
DIRECTOR

January 19, 2016

Patrice Weber
Portland Assisted Living & Memory Center, LLC
11920 W. Cutler Road
Eagle, MI 48822

RE: Application #: AL340365433
Portland Assisted Living & Memory Center
223 Charlotte Highway
Portland, MI 48875

Dear Ms. Weber:

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 (517) 284-9720.

Sincerely,

A handwritten signature in dark ink that reads "Dawn Timm".

Dawn N. Timm, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 899-5675

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL340365433
Applicant Name:	Portland Assisted Living & Memory Center, LLC
Applicant Address:	223 Charlotte Highway Portland, MI 48875
Applicant Telephone #:	(517) 643-2073
Administrator	Patrice Weber
Licensee Designee:	Patrice Weber
Name of Facility:	Portland Assisted Living & Memory Center
Facility Address:	223 Charlotte Highway Portland, MI 48875
Facility Telephone #:	(517) 643-2073
Application Date:	08/28/2014
Capacity:	20
Program Type:	AGED ALZHEIMERS DEVELOPMENTALLY DISABLED

II. METHODOLOGY

08/28/2014	Enrollment
09/04/2014	Inspection Report Requested - Health
09/04/2014	Inspection Report Requested - Fire
09/04/2014	Contact - Document Sent Fires Safety String
09/04/2014	Contact - Document Sent Rules & Act booklets
09/04/2014	Lic. Unit file referred for criminal history review 1326 for Patrice Jasmine Weber
09/10/2014	Application Incomplete Letter Sent
12/18/2015	Inspection Completed On-site
12/29/2015	Inspection Completed- Env. Health: A
12/29/2015	Contact Document Received- Email from Environmental Health Department Report received
12/30/2015	Inspection Completed On-site
01/04/2016	Contact - Telephone call received from BFS Fire Marshall Phil Scheer. Inspection completed full compliance. Will send report as soon as possible.
01/06/2016	Contact - Document Received refund agreement received. budget received
01/07/2016	Inspection Completed-BCAL Full Compliance
01/14/2016	Contact- Document Recent BFS inspection
01/12/2016	Inspection Completed- Fire Safety: A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Portland Assisted Living Center and Memory Center is a single story brick-built renovated facility located in the small city of Portland, Michigan. The facility was a former credit union and has been tastefully renovated and with an additional wing added

to the original building. There are north and south wings with resident bedrooms located in each wing along with small sitting areas in each wing. There are 16 resident bedrooms total with three double rooms, 11 single bedrooms and two single deluxe bedrooms with their own half-bathrooms. In addition, there are three full bathrooms, which are wheelchair accessible with walk-in showers, and one additional half-bathroom all for resident use. Upon entering the facility, there is a large living area and dining area for the resident use and just beyond the dining area is a large kitchen. Although the kitchen is not accessible to residents, there is a large window opening where residents can enjoy coffee or tea while watching meals being prepared. The dining area, which is lined with windows, is located directly across from the kitchen and can be used throughout the day for activities as well. The facility also has two large basement areas, one of which is finished and one is not. Neither basement area is approved for use by residents, but houses the laundry facilities as well as the staff breakroom and the licensee designee/administrator's main office. The licensee designee also has a small office in the north wing of the facility. The facility is wheelchair accessible and has multiple exits that are either at grade or are equipped with ramps. The doorways and hallways are also of sufficient width to easily allow walkers and wheelchairs through those spaces. There is a large parking lot easily able to accommodate many visitors and staff members. Each exit/entrance door is alarmed and Mrs. Weber stated that the WanderGuard system will be available for resident use if necessary but will not be used in place of staff members to assist with residents who have the tendency to wander.

The facility utilizes a public water supply and sewage disposal system. The Mid-Michigan Health Department completed an inspection on 12/17/2015 and the facility was found to be in substantial compliance with all applicable rules.

The facility uses natural gas as the heating source and there are four furnaces total, two furnaces located in each of the basements. There are two water heaters as well and one is located in each basement furnace room. Each furnace room is equipped with a fire-rated metal door with an automatic self-closing device and positive latching hardware. The doors leading to each basement is also a metal fire-rated door equipped with automatic self-closing devices and positive latching hardware.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. The facility has been determined by the Bureau of Fire Services on 01/04/2016 to be in compliance with the applicable fire safety administrative rules with full approval granted on 01/12/2016.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
South Wing			

Room #1	11'4" x 11'0"	124.63 square feet	One resident
Room #2	11'5" x 10'10"	123.68 square feet	One resident
Room #3	13'0" x 15'6"	201.5 square feet	Two residents
Room #4	16'4" x 9'3"	151.05 square feet	Two residents
Room #5	12'0" x 9'9"	117 square feet	One resident
Room #6	12'0" x 9'9"	117 square feet	One resident
Room #7	12'0" x 10'0" + 5'0" x 1'6"	127.5 square feet	One resident
Sitting room #1	16'0" x 9'0"	144 square feet	
North Wing			
Room #8	15'10" x 13'7"	215 square feet	Two residents
Room #9	12'0" x 11'0"	132 square feet	Two residents
Room #10	11'0" x 11'7"	127.38 square feet	One resident
Room #11	11'0" x 11'0"	121 square feet	One resident
Room #12	11'0" x 10'0"	110 square feet	One resident
Room #13	10'10" x 10'8"	115.45 square feet	One resident
Room #14	7'0" x 11'0" + 8'0" x 4'0"	109 square feet	One resident
Room #15	9'8" x 12'10"	124 square feet	One resident
Room #16	14'10" x 10'0"	148.3 square feet	One resident
Sitting room #2	18'0" x 12'8"	227.88 square feet	
Living area	24'8" x 28'10"	711 square feet	
Dining area	12'0" x 42'9"	513 square feet	

The indoor living and dining areas measure a total of 1595.88 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate twenty (20) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to twenty (20) male and/or female residents who are aged or who have Alzheimer's Disease or related conditions. These residents may also have developmental disabilities. Mrs. Weber stated that direct care staff members will receive additional training to understand and work with residents diagnosed with Alzheimer's disease and/or dementia related conditions. The program will include social interaction, music, games, arts or other activities of interest to the residents. Residents will also be encouraged to remain as independent as possible in all tasks of daily living including personal hygiene, dressing, and toileting, but will receive assistance as requested and as needed. Transportation may be available for a fee. The applicant intends to accept residents with private sources for payment and may also work with the local Office on Aging/My Choice Waiver program.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, shopping centers, churches, community events, parades etc.. These resources provide an environment to enhance the quality of life of residents.

C. Applicant and Administrator Qualifications

The applicant is Portland Assisted Living and Memory Center L.L.C., a "Domestic Limited Liability Company", established in Michigan on 05/05/2014. 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 members of Portland Assisted Living and Memory Center L.L.C. have submitted documentation appointing Patrice Weber as licensee designee and administrator for this facility.

Criminal history background checks of Patrice Weber were completed on 09/04/2014 and she was determined to be of good moral character to provide licensed adult foster

care. Patrice Weber submitted statements from a physician documenting their good health and current negative tuberculosis test results.

The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents. Mrs. Weber currently owns and manages a successful small group AFC facility located in Lansing, Michigan, which is in good standing.

The applicant and administrator have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Patrice Weber is the current licensee and administrator for a small AFC group home which she has been successfully operating for the past five years. During that time, Mrs. Weber has cared for individuals who were aged, diagnosed with Alzheimer's Disease or related conditions, and individuals who were aged with developmental disabilities. Mrs. Weber is certified as a Dementia Practitioner and provided documentation of completion of other dementia care workshops as well. She has also provided care to individuals with diabetes/brittle diabetes. Previously, Mrs. Weber worked in the medical field running a large internal medical facility.

The staffing pattern for the original license of this 20 bed facility is adequate and includes a minimum of three staff for twenty residents per day and afternoon shift and at least two staff members during the midnight shift. The applicant acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The applicant has indicated that direct care staff members will be awake during sleeping hours.

The applicant acknowledged an understanding of the qualifications, suitability, and training 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. The applicant acknowledge(s) the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee designee will 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 acknowledged the 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, the applicant acknowledged the 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.

The applicant acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

The applicant acknowledge 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.

The applicant acknowledged the 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.

The applicant acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged 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.

The applicant acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

The applicant acknowledged the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

The applicant acknowledged 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.

III. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care large group home with a capacity of twenty (20) residents.



01/19/2016

Dawn N. Timm
Licensing Consultant

Date

Approved By:



1/19/16

Betsy Montgomery
Area Manager

Date