

RICK SNYDER GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF HEALTH CARE SERVICES

MIKE ZIMMER

June 1, 2015

Connie Clauson Baruch SLS Inc Suite 200 3196 Kraft Avenue SE Grand Rapids, MI 49512

RE: Application #: AL490369294

Cedar Cove Manor

266 South Mary L Street Cedarville, MI 49719

Dear Mrs. Clauson:

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 (906) 226-4171.

Sincerely,

Laura Dupras, Licensing Consultant Bureau of Children and Adult Licensing

234 W. Baraga Ave. Marquette, MI 49855 (906) 290-3428

enclosure

# MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

#### I. IDENTIFYING INFORMATION

**License #**: AL490369294

Applicant Name: Baruch SLS Inc

Applicant Address: Suite 200

3196 Kraft Avenue SE Grand Rapids, MI 49512

**Applicant Telephone #:** (616) 464-1564

Administrator/Licensee Designee: Connie Clauson, Designee

Name of Facility: Cedar Cove Manor

Facility Address: 266 South Mary L Street

Cedarville, MI 49719

**Facility Telephone #:** (906) 484-1001

11/17/2014

**Application Date:** 

Capacity: 20

Program Type: AGED

**ALZHEIMERS** 

### II. METHODOLOGY

11/17/2014	Enrollment
11/24/2014	Application Incomplete Letter Sent needs fingerprint for Ellie Barr and an updated 1326 for Connie Clauson
01/08/2015	Application Incomplete Letter Sent
01/15/2015	Inspection Completed-Fire Safety : A
01/20/2015	Contact - Telephone call made Phone health department to check on inspection request. Stated they had not received it so I faxed it to them.
01/22/2015	Inspection Completed-Env. Health : A
03/23/2015	Inspection Completed On-site
03/23/2015	Inspection Completed-BCAL Sub. Compliance
03/23/2015	Contact - Document Received Received zoning approval, proof of ownership, organizational chart, and floor plan
05/05/2015	Contact - Document Received Received a copy of plumbing invoice for adjusting water temperatures. Received a copy of Ms. Barr's current medical clearance and TB results
05/19/2015	Contact - Document Received Received current medical clearance and TB results for Ms. Clauson
05/26/2015	Inspection Completed-BCAL Full Compliance
05/28/2015	Inspection Completed On-site Verified compliance with water temperatures.

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

This facility is a 20 unit facility in Cedarville Michigan just off M-134 in the Eastern Upper Peninsula. Cedarville is a small quiet community on the northern shores of Lake Huron. The facility is owned by Baruch SLS Inc. who has owned the business since the facility opened in 2005, but recently purchased the property from Cedarville Commons Inc., a private non-profit organization. The purchase of the property required a new license.

The facility is a single story building with barrier free units that are all handicap accessible. There is a large commercial kitchen located in this facility. The kitchen also provides meals for the 8 bed facility that is attached to this facility. The 8 bed facility is separated by a hall way and a fire door.

The facility is fully equipped with the required furnishings, linens and dishware. The facility has a full service beauty salon on site.

The building is constructed with a complete automatic fire sprinkling system which has been approved by the fire inspector. There is a municipal sewer that services the facility and a private well which has received approval by the Mackinac Co. Health Department.

There is a large dining room and sitting area at the entrance of the facility which measures 1564 square feet. The office is also located near the entrance and has windows that allow the staff to see in the common areas.

There are 2 residential wings, one is located on the north end of the facility, and the second wing is located on the west of the facility. There are three types of units in the facility including: studio, 1-bedroom and 1 bedroom deluxe. All of the units have a full bathroom. The 1 bedroom units and deluxe 1 bedroom units have a small kitchenette area equipped with a sink and small refrigerator.

#### Hessel Hall/ (North Wing)

Unit #1:	Studio 277 sq. ft.	Approved capacity 1
Unit #2:	Studio 277 sq. ft.	Approved capacity 1
Unit #3:	1 Bedroom deluxe 576 sq. ft.	Approved capacity 1
Unit #4:	1 Bedroom 516 sq. ft.	Approved capacity 1
Unit #5:	1 Bedroom 516 sq. ft.	Approved capacity 1
Unit #6:	1 Bedroom 516 sq. ft.	Approved capacity 1
Unit #7:	1 Bedroom 516 sq. ft.	Approved capacity 1
Unit #8:	1 Bedroom deluxe 576 sq. ft.	Approved capacity 1
Unit #9:	Studio 277 sq. ft.	Approved capacity 1
Unit #10:	Studio 277 sq. ft.	Approved capacity 1

#### Cedarville Hall (West Wing)

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Unit #11: Studio 277 sq. ft. Approved capacity 1
Unit #12: 1 Bedroom deluxe 576 sq. ft. Approved capacity 1
Unit #13: 1 Bedroom deluxe 576 sq. ft. Approved capacity 1
Unit #14: 1 Bedroom 516 sq. ft. Approved capacity 1
Unit #16: 1 Bedroom 516 sq. ft. Approved capacity 1
Unit #17: 1 Bedroom 516 sq. ft. Approved capacity 1
Unit #18: 1 Bedroom deluxe 576 sq. ft. Approved capacity 1
Unit #19: 1 Bedroom deluxe 576 sq. ft. Approved capacity 1
Unit #20: Studio 277 sq. ft. Approved capacity 1
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The Mackinac Co. Health Department conducted an environmental health inspection on 01/22/2015. The facility was found to be in complete compliance with applicable environmental health rules. The Office of Fire Safety conducted a fire safety inspection on 01/15/2015. The facility was found to be in compliance with applicable fire safety rules.

#### **B. Program Description**

The facility provides 24-hour supervision, protection and personal care for up to 20 residents over the age of 18 who are aged, physically handicapped or have dementia or Alzheimer's.

The program statement emphasizes and encourages involvement in meaningful, purposeful activities of life at any care level and/or needs of the residents. The program will also promote dignity for all residents and focus on the importance of maintaining as much independence as possible, while offering quality care that is personalized for each individual's needs. The residents have access to the community and are encouraged as much independence as they are capable.

The facility has been found in full compliance with fire safety on 01/15/2015 and environmental health 01/22/2015.

A licensing record clearance was completed on Ms. Clauson (Licensee designee) and Ms. Barr (administrator) with no LEIN convictions. The facility has submitted medical clearance request documents which include current negative TB results and that there is no physical or mental health conditions existing that would limit their ability to work with or around vulnerable adults.

The applicant acknowledges an understanding of the requirements to maintain this large group home license. They also acknowledge an understanding of the required

documentation to be completed and signed for each resident prior to admission and for each employee prior to starting work in the facility. The applicant has provided documentation to satisfy the qualifications and training requirements identified in the large group home administrative rules.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, the resident information or both.

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 the licensee can administer medication to residents. In addition, the applicants has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will

The applicant acknowledges 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 file in the home for the licensee, administrator and direct care staff or volunteers and the retention schedule for all of the documents contained within the employee's file.

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 investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident an accident involving resident, employee, and/or visitor.

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.

#### C. Rule/Statutory Violations

The facility is in full compliance.

#### IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home (capacity 20).

06/01/15

Laura Dupras Date

Licensing Consultant

Approved By:

06/01/15

Mary E Holton Date
Area Manager