

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

November 18, 2019

Melissa Suco & Angel Suco PO Box 603 3680 Churchill Road Leslie, MI 49251

RE: Application #: AS330397180

Carolyn's Care Home 3680 Churchill Road Leslie, MI 49251

Dear Melissa Suco & Angel Suco:

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. If I am not available, and you need to speak to someone immediately, please contact the local office at (517) 284-9720.

Sincerely,

Derrick Britton, Licensing Consultant

Jenie Z. Britten

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909 (517) 284-9721

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS330397180

Licensee Name: Melissa & Angel Suco

Licensee Address: PO Box 603

3680 Churchill Road Leslie, MI 49251

Licensee Telephone #: (646) 808-7393

Administrator: Melissa Suco

Licensee Designee: Melissa Suco

Name of Facility: Carolyn's Care Home

Facility Address: 3680 Churchill Road

Leslie, MI 49251

Facility Telephone #: (517) 589-9118

11/12/2018

Application Date:

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

II. METHODOLOGY

11/12/2018	On-Line Enrollment
11/14/2018	Contact - Document Sent Rule & Act booklets
11/29/2018	Contact - Document Received App; IR Itr
01/09/2019	Contact - Document Received Cl's for Melissa & Angel; RI-030 for Angel
02/05/2019	Application Incomplete Letter Sent
02/21/2019	Contact - Document Received Progress with Application Incomplete Letter
04/23/2019	Contact - Document Received From Melissa Suco, outstanding licensing documents
06/21/2019	Contact - Document Sent To Melissa Suco regarding additional documents required.
08/14/2019	Application Complete/On-site Needed
09/03/2019	Inspection Completed On-site
09/03/2019	Inspection Completed-BCAL Sub. Compliance
09/03/2019	Inspection Completed On-site
09/05/2019	Application Incomplete Letter Sent Wheelchair ramp addition required
09/05/2019	Contact - Telephone call made To Melissa Suco regarding wheelchair ramp
09/05/2019	Contact - Telephone call made To Melissa Suco, re: wheelchair ramp, egress.
09/26/2019	Contact - Telephone call made To Melissa Suco re: progress with wheelchair ramp. Requested to proceed with being licensed as a facility that is not wheelchair accessible at this time.
09/26/2019	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Carolyn's Care Home is in a rural neighborhood located in Leslie, Michigan. The facility was previously licensed as an adult foster care family home since 07/03/2017. The home is a ranch style home with a partially finished basement that will not be accessible to residents. The main floor of the facility consists of six resident bedrooms, a living room, dining room, kitchen, two full bathrooms, one half bathroom, and a laundry room. The home has two exits to the front and two exits in the back. The home utilizes private water supply and private sewage disposal system. An environmental health inspection was completed on 09/19/2019, which found the facility to be in full compliance.

The gas furnace and water heater are in the basement of the home and is equipped with a 1-3/4-inch solid core door with an automatic self-closing device and positive latching hardware. The water heater has a relief valve, and the gas furnace was inspected and approved on 01/08/2019 by CLD Mechanical.

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. Smoke detectors are installed near sleeping areas, in the basement, and near all flame-or heat-producing equipment.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11'6" x 7'6"	86.25 square feet	1
2	12'0" x 12'0"	144 square feet	1
3	9'0" x 10'7"	95.25 square feet	1
4	14'0" x 10'13"	155.17 square feet	2
5	14'8" x 10'6"	154 square feet	2
6	10'6" x 9'8"	101.5 square feet	1
Living	12'0" x 14'0"	168 square feet	
Room			
Dining	13'0" x 22'6"	292.5 square feet	
Room			

The indoor living and dining areas measure a total of 460.5 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Bedrooms #1 and #2 are currently occupied by the Licensees and their minor child. Based on the above information, this facility can accommodate six residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Melissa and Angel Suco intend to provide 24-hour supervision, protection and personal care to six male and/or female residents between the ages of 18 to 100 years who are developmentally disabled. The program will include social interaction, training to develop personal hygiene, personal adjustment, public safety and independent living skills; opportunity for involvement in educational or day programs or employment and transportation. The applicant intends to accept referrals from Community Mental Health Authority of Clinton, Eaton and Ingham Counties. If needed by residents, behavioral management programs will be identified in the assessment plans. These programs shall be implemented only by trained staff and only with the prior approval of the resident, guardian, designated representative or the responsible agency.

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, local museums, shopping centers, churches, and any other personal interests expressed by residents and available within the community. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Administrator Qualifications

The applicants are Melissa Suco and Angel Suco, who are a married couple. Melissa Suco will serve as the administrator. Mr. and Mrs. Suco have sufficient financial resources to provide for the adequate care of residents as evidenced by documented income from their previously licensed AFC family home. A criminal history clearance was completed on 11/30/2018 for both Mr. and Mrs. Suco, and no criminal convictions were found. Mr. and Mrs. Suco submitted medical clearance documentation showing no physical or mental health conditions that would limit their ability to work with dependent adults. Current negative TB tests were also obtained for Mr. and Mrs. Suco. Mr. and Mrs. Suco satisfy the qualifications and training requirements identified in the group home administrative rules, and previously operated a licensed family home that was in good standing in the community. There are residents currently in care at the facility, which is in good standing with licensing.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of 1 staff for 6 residents per shift. The applicants acknowledged that the staff to resident ratio may need to be increased 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 applicants have indicated that direct care staff will be awake during sleeping hours, if necessary.

The applicants 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 applicants acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicants acknowledge 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 applicants 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 licensees will administer medication to residents. In addition, the applicants have 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 applicants 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 applicants acknowledge 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 applicants 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 applicants acknowledged 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 applicants 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 applicants acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicants 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 applicants 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 applicants indicated the intent to respect and safeguard these resident rights.

The applicants 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 applicants 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. Rules or 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 with a capacity of six residents.

Derick Z. B	ntler	10/22/19
Derrick Britton		Date
Licensing Consultant		
Approved By:		
Dawn Jimm		
Cuure Omm	11/18/2019	
Dawn N. Timm Area Manager		Date
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