



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 8, 2020

Nicole Sabo
Aldrich Assisted Care LLC
12282 N Lewis Rd
Clio, MI 48420

RE: Application #: AM250399708
Living Waters Buell Lake
13515 N. Genesee Rd
Clio, MI 48420

Dear Mrs. Sabo:

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 12 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 (810) 787-7031.

Sincerely,

A handwritten signature in cursive script that reads "Crecendra Brown".

Crecendra Brown, Licensing Consultant
Bureau of Community and Health Systems
4809 Clio Road
Flint, MI 48504
(810) 931-0965

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM250399708
Applicant Name:	Aldrich Assisted Care LLC
Applicant Address:	12282 N Lewis Rd Clio, MI 48420
Applicant Telephone #:	(810) 687-4072
Administrator/Licensee Designee:	Nicole Sabo
Name of Facility:	Living Waters Buell Lake
Facility Address:	13515 N. Genesee Rd Clio, MI 48420
Facility Telephone #:	(810) 625-6745
Application Date:	05/09/2019
Capacity:	12
Program Type:	AGED

II. METHODOLOGY

05/09/2019	Enrollment
05/14/2019	Inspection Report Requested - Fire
05/14/2019	Inspection Report Requested - Health
05/14/2019	Application Incomplete Letter Sent 1326, RI-030, and FP for Carl. 100 for Nicole.
05/14/2019	Contact - Document Sent Fire Safety String
06/17/2019	Contact - Document Received 1326, RI-030, and FP for Carl Aldrich. 100 for Nicole Sabo.
06/19/2019	File Transferred to Field Office Flint
06/26/2019	Contact - Telephone call received PC from Licensee Designee Carl Aldrich.
07/03/2019	Application Incomplete Letter Sent
11/25/2019	Plan Review Received 2019-004021, New, Install new fire alarm system
03/17/2020	Contact - Document Received Zoning Approval.
06/04/2020	Inspection Completed-Env. Health: A
07/20/2020	Inspection Completed-Fire Safety: A
08/11/2020	Application Complete/On-site Needed
08/12/2020	Inspection Completed On-site
08/12/2020	Exit Conference
08/25/2020	Inspection Completed-BCAL Full Compliance
08/25/2020	Recommend License Issuance.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Living Waters Buell Lake is located at 13515 N. Genesee Road, Clio in Genesee County. The physical plant is a one-level vinyl and brick-sided structure with no basement. It consists of a living room, dining room, kitchen, laundry room, salon, supply room, office and 12 single-occupancy resident bedrooms. There is one separate public restroom and a mechanical room. Two resident bedrooms have a private bathroom with a toilet, sink and shower. Ten resident bedrooms share a bathroom that is situated in the middle of the bedrooms that consist of a toilet, sink and shower. The driveway has adequate parking for staff and visitors. The facility is wheelchair accessible.

The furnace and air conditioner systems are located on the main floor of the facility. The hot water heater and sprinkler tanks are located in the mechanical room in a 1-hour protected enclosure with a 1¾ inch solid core door equipped with an automatic self-closing device. The laundry room is located in the middle of the facility. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational.

The facility has a private water and private sewer system. The facility was inspected by the Genesee County Health Department on June 4, 2020. The facility was determined to be in substantial compliance with all applicable licensing rules pertaining to environmental health.

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

Bedroom #	Total Square Footage	Total Resident Beds
Bedroom 1	266 ft.	1
Bedroom 2	195 ft.	1
Bedroom 3	195 ft.	1
Bedroom 4	195 ft.	1
Bedroom 5	195 ft.	1
Bedroom 6	204 ft.	1
Bedroom 7	204 ft.	1
Bedroom 8	204 ft.	1
Bedroom 9	204 ft.	1
Bedroom 10	225 ft.	1
Bedroom 11	209 ft.	1
Bedroom 12	151 ft.	1

The living, dining, and sitting room areas measure a total of 810 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The home has two separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30-inch minimum width requirement. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

The bedrooms have the proper means of egress as required by R 400.15508. The interior of the home is of standard lath and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.15401, R 400.15402, R 400.15403, R 400.15405, R 400.15406, and R 400.15407.

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

B. Program Description

The applicant, Aldrich Assisted Care LLC, submitted a copy of the required documentation. 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 twelve male or female ambulatory adults, 55-99 years of age and older, whose diagnosis is Aged in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs.

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

Aldrich Assisted Care LLC will ensure that the residents' transportation and medical needs are met. Aldrich Assisted Care LLC has transportation available for residents to access community-based resources and services. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

On May 9, 2019, Aldrich Assisted Care LLC submitted an application to provide foster care services to twelve adults at 13515 N. Genesee Road, Clio, Michigan.

The applicant, Aldrich Assisted Care LLC, which is a “Michigan Domestic Limited Liability Company”, was established in Michigan, on May 3, 2019. The company is a new adult foster care provider in the State of Michigan. 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 applicant has a board of directors that oversee the company.

Aldrich Assisted Care LLC submitted a written statement naming Nicole Sabo as the licensee designee and as the facility administrator. Nicole Sabo submitted a licensing record clearance request that was completed with no LEIN convictions recorded. Ms. Sabo also submitted a medical clearance request with statements from a physician documenting her good health and current TB-test negative results. Nicole Sabo has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 12-bed facility is adequate and includes a minimum of 2 staff to 12 residents per shift. All staff shall be awake during sleeping hours.

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 2 staff to 12 resident ratios.

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), L-1 Identity Solutions™ (formerly Identix ®), and the related documents required to be maintained in each employee 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 the licensee, can 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 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 file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within 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.

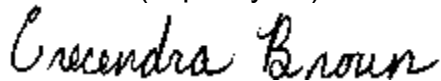
The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

D. Rule/Statutory Violations

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 medium group home (capacity 12).



September 8, 2020

Crecendra Brown, Licensing Consultant Date

Approved By:



September 8, 2020

Jerry Hendrick, Area Manager Date