



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 10, 2021

Larry Podsaid
CP Traverse Bay Leaseco LLC
1480 Clark Lake Rd.
Brighton, MI 48114

RE: Application #: AL280335945
Boardman Lake Glens: Highlander
800 Centre Place
Traverse City, MI 49686

Dear Mr. Podsaid:

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 (616) 356-0183.

Sincerely,

A handwritten signature in red ink that reads "Bruce A. Messer".

Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL280335945
Applicant Name:	CP Traverse Bay Leaseco LLC
Applicant Address:	1480 Clark Lake Rd. Brighton MI, 48114
Applicant Telephone #:	(232) 941-1919
Administrator:	Larry Podsaid
Licensee Designee:	Larry Podsaid
Name of Facility:	Boardman Lake Glens: Highlander
Facility Address:	800 Centre Place Traverse City, MI 49686
Facility Telephone #:	(231) 947-9472
Application Date:	07/26/2012
Capacity:	20
Program Type:	AGED

II. METHODOLOGY

07/26/2012	Enrollment
08/15/2012	Application Incomplete Letter Sent
05/08/2013	Inspection Completed On-site
07/23/2021	Inspection Completed-Fire Safety: A
07/30/2021	Application Complete/On-site Needed
07/30/2021	Inspection Completed On-site
07/30/2021	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Boardman Lake Glens: Highlander Adult Foster Care home is a large single-story structure located scenic private road overlooking Boardman Lake in the city of Traverse City, Michigan. The home has 20 private resident suites/bedrooms, each with its own private full bathroom. A central kitchen, dining room and large living room are complimented by two large “sun” rooms which offer spectacular views of scenic Boardman Lake. The home is wheelchair accessible and has 2 approved means of egress that are equipped with ramps from the first floor or are at grade.

The furnace and hot water heater are in a room that is constructed of material that has a 1-hour-fire-resistance rating. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. The facility is equipped with an approved pull station alarm system and a sprinkler system installed throughout.

On July 23, 2021, the home was inspected by the Bureau of Fire Services. An “Approved” fire safety certification was recommended.

This facility has public water and sewer systems.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	Two room suite 12’X8’ 12’X12’6” irregular	246	1

2	Three room suite 16'X12' 12'6"X10'9" 15'X12'6"	513	1
3	Two room suite 12'X8'6" 14'6"X12 irr	234	1
4	Two room suite 12'X11' 15'X12'6"	319.5	1
5	Two room suite 12'X11' 15'X12'6"	319.5	1
6	Two room suite 12'X11' 15'X12'6"	319.5	1
7	Two room suite 12'X11' 15'X12'6"	319.5	1
8	Two room suite 12'X11' 15'X12'6"	319.5	1
9	Two room suite 12'X11' 15'X12'6"	319.5	1
10	Two room suite 12'X11' 15'X12'6"	319.5	1
11	Two room suite 12'X8' 12'X12'6" irr	246	1
12	Three room suite 16'X12' 12'6"X10'9" 15'X12'6"	513	1

13	Two room suite 12'X8'6" 14'6"X12 irr	234	1
14	Two room suite 12'X11' 15'X12'6"	319.5	1
15	Two room suite 12'X11' 15'X12'6"	319.5	1
16	Two room suite 12'X11' 15'X12'6"	319.5	1
17	Two room suite 12'X11' 15'X12'6"	319.5	1
18	Two room suite 12'X11' 15'X12'6"	319.5	1
19	Two room suite 12'X11' 15'X12'6"	319.5	1
20	Two room suite 12'X11' 15'X12'6"	319.5	1

- Note: All bedrooms are large enough to accommodate 2 residents if desired. Total facility resident occupancy cannot exceed 20 residents.

The living, dining, and sitting room areas measure a total of 1225 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate **20** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

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 **20** male or female ambulatory or nonambulatory adults who are aged in the least restrictive environment possible.

Programs for the aged residents will include recreational activities, community interaction, health and fitness.

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.

The licensee will provide for or arrange for transportation for program and medical needs as outlined in each residents Resident Care Agreement. 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 libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is CP Traverse Bay Leaseco LLC, which is a “Domestic Limited Liability Company”, was established in Delaware, on June 7, 2007. 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 Board of Directors of CP Traverse Bay Leaseco LLC, has submitted documentation appointing Larry Podsaid as Licensee Designee and Administrator for this facility.

A criminal history background check was conducted for the applicant (Licensee Designee) and administrator. They have been determined to be of good moral character. The applicant (Licensee Designee) and administrator submitted a statement from a physician documenting their good health and current negative TB-tine results.

The applicant 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 **20** bed facility is adequate and includes a minimum of **2** staff –to- **20** residents per shift during awake hours and **2** staff –to-**20** residents during sleeping hours. All staff shall be awake during sleeping hours.

The applicant acknowledged that at no time will this facility rely on “roaming” staff or other staff that are on duty and working at another facility to be considered part of this

facilities staff-to-resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledges an understanding of the training suitability 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 staff –to- resident ratio.

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), and the related documents required to be maintained in each employees 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 good moral character, medical and training 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 the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges their responsibility to obtain the required written assessment, 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 the required forms and signatures to be completed for each resident on an annual basis.

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 an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-Day discharge written

notice to a resident as well as when a resident can be discharged before the issuance of a 30-Day written discharge notice.

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 accidents and incidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with 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 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 acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

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



August 9, 2021

Bruce A. Messer, Licensing Consultant Date

Approved By:



August 10, 2021

Jerry Hendrick, Area Manager Date