



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 11, 2021

Karen LaFave
Adult Learning Systems - UP, Inc
290 Rublien St, Suite F
Marquette, MI 49855

RE: Application #: AS220405666
Riverview
1336 Riverview Drive
Kingsford, MI 49802

Dear Ms. LaFave:

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. 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,

A handwritten signature in black ink that reads "Theresa Norton".

Theresa Norton, Licensing Consultant
Bureau of Community and Health Systems
234 West Baraga
Marquette, MI 49855
(906) 280-2519

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS220405666
Applicant Name:	Adult Learning Systems - UP, Inc
Applicant Address:	290 Rublien St, Suite F Marquette, MI 49855
Applicant Telephone #:	(906) 228-7370
Administrator/Licensee Designee:	Karen LaFave
Name of Facility:	Riverview
Facility Address:	1336 Riverview Drive Kingsford, MI 49802
Facility Telephone #:	(906) 220-7370
Application Date:	09/01/2020
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

09/01/2020	Enrollment
09/04/2020	Application Incomplete Letter Sent needs fingerprints
09/04/2020	Application Complete/On-site Needed
09/22/2020	Inspection Completed-Env. Health : A 1030908
12/22/2020	Contact - Document Received Furnace, electrical, deed, policies received.
12/22/2020	Inspection Completed On-site
12/22/2020	Inspection Completed-BCAL Full Compliance
12/22/2020	SC-Application Received – Original
01/11/2021	Recommend License issuance
01/11/2021	SC – Recommend MI and DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The home is a large, single-story home, on a cement slab, built in the 1970's. It is located within the city of Kingsford. The home was formerly licensed as an AFC Home (License # AS220343514) by Northpointe Behavioral Healthcare Systems (NBHS) from 08/27/2013 through 05/31/2019. Adult Learning Systems U.P. has done extensive remodeling and updating of this facility within the last year.

The property sits in a residential setting and is in close proximity to schools, parks, service provider organizations, medical resources, and shopping areas. The

home is owned by Adult Learning Systems U.P. and a copy of the warranty deed is maintained in the file.

The single-story home has 2822 square feet and is totally handicapped accessible. There are 6 approved bedrooms. The home has an open concept with a large kitchen and counter area. There is a large living room/recreational room and an attached dining area available for resident use. In addition, there is a large fenced-in, landscaped backyard for the residents' enjoyment. There are 2 full resident bathrooms all which have shower/tub facilities. The home is very neat, clean, and comfortably furnished.

The bedrooms have the following dimensions:

Bedroom #1	139 sq. ft.	Approved capacity 1
Bedroom #2	96 sq. ft.	Approved capacity 1
Bedroom #3	134 sq. ft.	Approved capacity 1
Bedroom #4	173 sq. ft.	Approved capacity 1
Bedroom #5	169 sq. ft.	Approved capacity 1
Bedroom #6	151 sq. ft.	Approved capacity 1

The home has the square footage necessary to accommodate up to 6 residents as requested on the application. The facility is fully equipped with the required furnishings, linens and dishware. It is the licensee's responsibility not to exceed their licensed resident capacity.

The home has a private septic tank and utilizes municipal water. A final environmental inspection was completed on the septic system by the Dickinson-Iron District Health Department on 09/22/2020 resulting in an "A" rating.

The facility has an interconnected smoke detection system that was serviced and verified by Superiorland Electronics on 12/18/2020. The plumbing and heating units were inspected by Blodgett Plumbing and Heating on 12/22/2020 and found to be in good working order and in full compliance. The electrical inspection was conducted by G. Brooks Electric on 12/22/2020 and was found to meet all code requirements.

B. Program Description

The facility proposes to serve both male and female adults (18 years and older) that are Developmentally Disabled, Physically Handicapped, and Mentally Ill. The home will also serve adults with Traumatic Brain Injuries. The admission policy, program statements, discharge policy, refund policy, house rules, personnel policies, and job descriptions were reviewed and accepted as written.

The program statements identify the care and services available in the home, designed to provide assistance to adults and to promote each individual in maintaining an active and enjoyable life.

The program statement specifies the home will offer residents a normalized home environment and integrations with various community resources. Strong emphasis will be placed on coordination and cooperation between the in-house residence program and community agencies. Adult Learning Systems U.P. Inc., intends to work closely with Northpointe Behavioral Healthcare Systems (NBHS) to develop and implement a comprehensive individual program plan for each resident. The goal is to help each resident to realize their full potential for self-sufficiency and become an accepted and productive part of the community.

Transportation to local medical appointments will be arranged / provided by the home as needed. Transportation to out-of-area appointment will be arranged / provided.

C. Licensee and Administrator Qualifications

A licensing record clearance request was completed with no LEIN convictions recorded for Ms. Karen LaFave, the licensee/administrator. Ms. LaFave submitted a medical clearance request with a statement from a physician documenting good health and current TB-tine negative results.

Ms. LaFave has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for this 6-bed facility is adequate and includes a minimum of 3 staff per 6 residents on the awake-shift and 2 staff to 6 residents during the sleep shift.

The licensee acknowledged 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 staff to resident ratio.

The licensee acknowledged an understanding of their responsibility to assess the good moral character of each volunteer and employee of the facility. The licensee stated they will use the FBI fingerprinting system to process and identify criminal history when assessing good moral character.

The licensee acknowledged 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 medications to residents. In addition, the licensee has indicated that resident medications will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The licensee acknowledged 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 licensee acknowledged 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 the documents contained within each employee's file.

The licensee acknowledged an understanding of the administrative rules regarding informing each resident of their rights and providing them with a copy of those rights. The licensee indicated that it is their intent to achieve and maintain compliance with these requirements.

The licensee acknowledged 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 licensee has indicated the intention to achieve and maintain compliance with reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The licensee acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and does intend to comply with the stated rules.

The licensee acknowledged that their written facility menus shall reflect three well-balanced meals and nutritious meals daily. The licensee is aware and intends to comply with the provision of special diets that may be required for any resident.

The licensee acknowledged their responsibility to obtain all 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 licensee acknowledges the responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all documents contained within each resident file.

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 and special certification to this AFC adult small group home (capacity 6).




01/11/2021

Theresa Norton
Licensing Consultant

Date

Approved By:



01/11/2021

Mary E Holton
Area Manager

Date