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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 8, 2022

Rochelle Greenberg
Medical Alternatives Inc
#120
24301 Catherine Ind. Dr
Novi, MI 48375

RE: Application #: AS820409376
Belleville Manor
9812 Barkley
Van Buren, MI 48111

Dear Mrs. Greenberg:

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 5 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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink, appearing to read "Edith Richardson".

Edith Richardson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 919-1934

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS820409376
Applicant Name:	Medical Alternatives Inc
Applicant Address:	24301 Catherine Ind. Dr #120 Novi, MI 48375
Applicant Telephone #:	(248) 473-1139
Administrator/Licensee Designee:	Danial Eaton, Administrator Rochelle Greenberg, Designee
Name of Facility:	Belleville Manor
Facility Address:	9812 Barkley Van Buren, MI 48111
Facility Telephone #:	(248) 473-1139 07/06/2021
Application Date:	
Capacity:	5
Program Type:	TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

07/06/2021	Enrollment Online App Download failure
07/07/2021	Application Incomplete Letter Sent 1326 & RI030 for Rochelle, Signed AFC100 for Dan
07/07/2021	Contact - Document Sent 1326, RI030, AFC100
07/19/2021	Contact - Document Received 1326 & RI030 for Rochelle, AFC100 for Dan
07/21/2021	Comment Need FP
09/16/2021	Application Incomplete Letter Sent
11/10/2021	Contact - Document Received
12/03/2021	Contact - Document Received
12/03/2021	Application Complete/On-site Needed
01/21/2022	Inspection Completed-BCAL Sub. Compliance
02/27/2022	Contact - Document Received

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

Belleville Manor is in a residential area in Van Buren. The home is a single-story structure with an attached garage. The home consists of four bedrooms, 2 full bathrooms, a laundry room, 2 storage rooms, a living room, dining/television area, and a kitchen.

The heat plant and hot water heater are located in the basement. They are enclosed in a room that is constructed of material which has a 1-hour-fire-resistance rating, and the door also has a 1-hour- fire resistance rating. The door is hung in a fully stopped wood or steel frame and is equipped with an automatic self-closing device and positive-latching hardware. The enclosure also has a permanent outside vent that cannot be closed to assure adequate air for proper combustion. 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.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	8 X 10	80	1
2	9 X 10	90	1
3	10 X 11	110	1
4	12 X 15	180	2

The living room measure a total of 208 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 five (5) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

This facility cannot accommodate wheelchairs.

A. 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 five (5) male or female ambulatory adults whose diagnosis is traumatic brain injured in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and

behavioral developmental needs. Residents will be referred from: Private pay and Michigan Auto No Fault.

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 all transportation for program and medical needs. 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

The applicant is Medical Alternative INC., which is a "Profit Company" established in Michigan, on 01/27/1988. 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 Medical Alternative INC., has submitted documentation appointing Rochelle Greenberg as Licensee Designee and Danial Eaton Administrator for this facility.

A licensing record clearance request was completed with no lien convictions recorded for the licensee designee and administrator. The licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee and administrator have 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 5-bed facility is adequate and includes a minimum of 1 staff – to - 5 residents per shift. However, based upon the needs of the population served the licensee designee acknowledges an understanding that sufficient direct care staff shall be on duty at all times for the supervision, personal care, protection and evacuation of the residents. 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 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), L-1 Identity Solutions™ (formerly Identix ®), 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 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

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 small group home (capacity 1-5).



03/04/2022

Edith Richardson
Licensing Consultant

Date

Approved By:



03/08/2022

Ardra Hunter
Area Manager

Date