



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 24, 2023

Sarah Mapili
New Genesis Senior Living LLC
856 Majestic Drive
Rochester Hills, MI 48306

RE: Application #: AS500414006
New Genesis Senior Living-Warren
2430 E. 13 Mile Rd
Warren, MI 48092

Dear Ms. Mapili:

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 West Grand Blvd Ste 9-100
Detroit, MI 48202
(248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500414006
Applicant Name:	New Genesis Senior Living LLC
Applicant Address:	856 Majestic Drive Rochester Hills, MI 48306
Applicant Telephone #:	(248) 495-0493
Administrator/Licensee Designee:	Sarah Mapili
Name of Facility:	New Genesis Senior Living-Warren
Facility Address:	2430 E. 13 Mile Rd Warren, MI 48092
Facility Telephone #:	(248) 495-0493
Application Date:	08/23/2022
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. METHODOLOGY

08/23/2022	Enrollment
09/01/2022	PSOR on Address Completed
09/01/2022	Application Incomplete Letter Sent 1326, FPs / Ri030, AFC 100
09/01/2022	Contact - Document Sent Forms sent
10/19/2022	Contact - Document Received 1326, AFC100, FPs, ri030
10/24/2022	File Transferred To Field Office
10/25/2022	Application Incomplete Letter Sent
10/25/2022	Contact - Document Received Email from Sarah Jean Mapili
10/26/2022	Contact - Document Received Email to and from Sarah Mapili. Received copy of management agreement letter.
10/27/2022	Contact - Document Received Email to and from Sarah Jean Mapili. Received licensing documents by email.
10/31/2022	Contact - Document Received Received evacuation plan from Ms. Mapili by email. Sent return email.
11/02/2022	Contact - Document Received Received licensing documents from Sarah Jean Mapili by email.
11/15/2022	Inspection Completed On-site
11/22/2022	Contact- Document Received Email from Sarah Mapili with pictures of corrections. Sent return email.
01/10/2023	Contact- Document Sent Email to Sarah Mapili. Received return email.
01/11/2023	Contact- Document Sent Email to Sarah Mapili

01/11/2023	Contact- Document Received Received email from Sarah Mapili with updated staffing pattern, organizational chart, and projected budget. Advised that overnight staff cannot sleep during shift.
------------	---

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the license of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1974.

A. Physical Description of Facility

New Genesis Senior Living-Warren a one-story small adult foster care home located in Warren, MI. The licensee for the home is New Genesis Senior Living LLC. Ms. Sarah Mapili will act as the licensee designee and administrator for the home. The home is owned by Ferdinand Policarpio. A copy of the lease agreement was provided. Mr. Policarpio provided a signed letter dated 10/25/2022 giving permission to inspect the property. The home is currently licensed as Genesis Senior Living- Warren (AS500381557) and Mr. Policarpio is the licensee designee. The original license was opened on 05/18/2016. There is a management agreement in place between Ms. Mapili and Mr. Policarpio. The home has city water and sewer.

New Genesis Senior Living- Warren has a living room, family room, kitchen, dining room, five bedrooms, one resident bathroom, laundry room and basement. The living room and dining area offer a total of 898 square feet which meets the required 35 square feet per person for six residents.

The five bedrooms in the home are sized as follows:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	16'11" X 13'8"	231	2
2	13'8" X 9'6"	129	1
3	11'10" X 12'6"	147	1
4	8'1" X 11'5"	92	1
5	12'3" X 13'0"	159	1

Total capacity: 6

All five bedrooms have adequate space, bedding and storage. All of the bedrooms have a chair, mirror and window that opens. During the onsite inspection, I observed that the home was found to be in substantial compliance with rules pertaining to maintenance and sanitation.

The home has interconnected smoke detectors. There is a fire extinguisher on each floor of the home. The dryer has a metal vent. A furnace inspection was completed by Mastercraft Heating and Cooling on 11/07/2022. The furnace is in the basement and there is a fire door for furnace room. The bathroom and bedrooms doors have non-locking against egress hardware. The water temperature was found to be between 105-120 degrees Fahrenheit. There is a locked cabinet in kitchen area for medications to be stored. The home has two ramps located at exits.

B. Program Description

New Genesis Senior Living- Warren will provide 24-hour care and supervision for up to six residents. The home will provide care for adults aged 60 and above and residents with dementia and Alzheimer's. The home can accept both ambulatory and non-ambulatory residents. The home will provide personal care for residents that includes assistance with grooming, dressing, feeding, toilet hygiene, medication administration, blood glucose checks, wound management, oxygen and blood pressure monitoring. New Genesis Senior Living will provide activities for residents that include arts and crafts, board and card games, music and entertainment, ice cream socials, mobile parlor, fashion nails and birthday and holiday celebrations with family members.

A copy of the staffing pattern was provided for the facility. The home will have two shifts from 7:00 am- 7:00 pm and 7:00 pm-7:00 am, with one staff per shift. Additional staff will be assigned if needed to accommodate resident needs.

Sarah Mapili will act as the licensee designee and administrator for the facility. She has been previously approved as a licensee designee and administrator. Ms. Mapili has been fingerprinted. Ms. Mapili provided a medical statement completed on 10/26/2022 which indicates she has no physical/mental condition or health problems that would limit her ability to work with or around dependent adults. Ms. Mapili had a chest x-ray for TB test on 01/11/2022. Ms. Mapili has a Bachelor of Science degree in Physical Therapy from Emilio Aguinaldo College. She received her certification as a Certified Dementia Practitioner on 01/22/2022. She currently operates two additional adult foster care homes; Touch of Care Senior Living LLC – Chadbourne (AS500389833) and Touch of Care, LLC (AS630370904).

Sarah Mapili 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.

Ms. Mapili has acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, or 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 employee's record to demonstrate compliance.

Ms. Mapili 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 designee can administer medication to residents. In addition, Ms. Mapili acknowledged that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Ms. Mapili acknowledged her responsibility to obtain all required 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, Ms. Mapili acknowledged her responsibility to maintain all required documentation in each employee's record for each licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. Mapili acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Ms. Mapili acknowledged her 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. Ms. Mapili will update and complete those forms and obtain new signatures for each resident on an annual basis.

Ms. Mapili acknowledged her 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.

Ms. Mapili acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. 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 licensee designee.

Ms. Mapili acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights.

Ms. Mapili 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.

Ms. Mapili acknowledged her responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Ms. Mapili acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

Ms. Mapili acknowledged she has a copy of the licensing rule book for AFC small group homes.

C. 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 that the department issue a temporary license to this small group adult foster care home, New Genesis Senior Living-Warren, with a capacity of six (6) residents.



01/11/2023

Kristine Cilluffo
Licensing Consultant

Date

Approved By:



01/24/2023

Denise Y. Nunn
Area Manager

Date