

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

June 1, 2023

Megan Rheingans Shields Comfort Care Assisted Living 9140 Gratiot Saginaw, MI 48609

> RE: Application #: AH730412298 Shields Comfort Care Assisted Living 9140 Gratiot Saginaw, MI 48609

Dear Ms. Rheingans:

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 65 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 (517) 284-9730.

Sincerely,

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Andrea Krausmann, Licensing Staff Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (586) 256-1632

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH730412298
Applicant Name:	Shields Comfort Care Assisted Living and Memory Care LLC
Applicant Address:	4180 Tittabawassee Saginaw, MI 48604
Applicant Telephone #:	(989) 607-0001
Authorized Representative:	Megan Rheingans
Name of Facility:	Shields Comfort Care Assisted Living
Facility Address:	9140 Gratiot Saginaw, MI 48609
Facility Telephone #:	(989) 607-0003
Application Date:	04/12/2022
Capacity:	65
Program Type:	ALZHEIMERS AGED

II. METHODOLOGY

04/12/2022	Enrollment
04/14/2022	Application Incomplete Letter Sent 1326/Fingerprints/RI 030 for Authorized Rep Diane Vondette
04/18/2022	Inspection Completed-Fire Safety : C Bureau of Fire Services (BFS) annual inspection report for current licensee at this address AH730395008 by Dan Stasa - Temporary approval until 5/23/22
05/11/2022	Contact - Document Received Application (original) revised to include more information but now signed and dated 5/11/22
05/26/2022	Inspection Completed-Fire Safety : A Follow-up by BFS for current licensee at this addiress AH730395008 by Dan Stasa
07/22/2022	Contact - Document Received BCAL1603 changing AR from Diane Vondette to Jeanette "Jenny" Sanders
07/22/2022	Contact - Document Received Application rec'd to replace original as it now contains all relevant information.
07/25/2022	Application Incomplete Letter Sent Sent to AR J. Sanders via email
08/24/2022	Contact - Document Received Attestation letter from licensee authorized representative J. Sanders that no resident funds and no refundable deposits will be held, therefore, no surety bond is required.
10/11/2022	Contact - Document Received AR J. Sanders submitted a letter attesting that the facility's generator meets compliance with MCL333.21335
01/12/2023	Contact - Document Received Attestation letter (dated 1/12/22 typo on year) from licensee authorized representative J. Sanders that no food will be served to non-residents i.e. resident family members, employees, vendors, visitors, etc. unless/until a food services establishment license from Saginaw Co Health Dept. is attained, at which time a copy of the license will be submitted to licensing.
02/28/2023	Inspection Completed On-site

Met with administrator Cassandra Mannor.

Findings include:

R325.1961(1) Floor plans submitted do not accurately reflect the room numbers that are presently displayed in the home; R325.1961(5) A hallway door was installed between rooms

410/411 and 412/413, sometime after 2016 to reduce the memory care area from 16 rooms to 8 rooms, but no approvals from HFES, BFS & licensing were attained;

R325.70(7) The hot water at the hand sink faucet in hair salon only reached 95.5°F;

R325.1964(9) Exhaust ventilation was not functioning in operations office restroom and the common area restroom outside of this office;

R325.1979(1) The following items were not in good repair:

- A cabinet drawer front is missing in the dining room;
- A door knob is missing from a nurse station door that contains a medication cart;

• The memory care dining room window has no screens; MCL333.20178(1)(e) Contrary to the home's program statement, not all windows in the memory care unit contain stops to prevent the windows from opening more than 3-4 inches. For examples, see windows in rooms 401 & 409;

R325.1954 Kitchen manager Scott Beyer did not maintain a meal census of the number of residents served at each meal; R325.1953(1) The home did not post weekly regular and therapeutic menus. Note: the home serves regular, diabetic, mechanical soft, and finger food diets;

R325.1917(2) Possible violations of fire safety regulations were noted and forwarded to the Bureau of Fire Services:

- The use of aluminum foil-type exhaust vent tubing on the laundry dryers rather than firm metal;
- No fire rated caulking around the dryer exhaust tubing where it penetrates the walls;
- An exterior wall door labeled "exit" located across from room 409 does not open without key fob;
- Assisted living area exit doors are locked and not releasing on 15 second delays.
- 03/01/2023 Contact Document Received Revised room sheets from Health Facilities Engineering Section interim supervisor Pier-George Zanoni, added in previously omitted suite square footage for some rooms in 200 hall, and identified memory care area day/dining/activity space.
- 03/01/2023 Referral- Office of Fire Safety

Notified Bureau of Fire Services supervisor Brent Connell of possible violations of fire safety regulations.

- 03/02/2023 Contact Document Sent Violations noted during 02/28/2023 on-site inspection were listed and sent to authorized representative Jeannette Sanders, administrator Cassandra Mannor and copied to owner Hamza Sikander.
- 03/07/2023 Contact Document Received BCAL1606 changing administrator from Cassandra Mannor to Jeanette Sanders.
- 03/07/2023 Inspection Completed-Fire Safety: C BFS annual inspection report for current licensee at this address AH730395008 by M. Dan Stasa - Temporary approval until 4/10/2023.
- 04/07/2023 Contact Document Received BCAL1606 changing administrator from Jeanette Sanders to Shannon Moriarity.
- 04/12/2023 Contact Document Received Videos, photos, and documentation to confirm compliance achieved re: an updated floor plan, revision of room numbers, cabinet drawer repair, memory care dining room screen, memory care (MC) room window lock (room 409 to represent all mc windows), regular & therapeutic menus, door handle replaced, aluminum dryer vent tubing replaced with hard metal and fire caulked at wall penetrations.
- 04/13/2023 Contact Document Received BFS inspector M. Dan Stasia emailed and confirmed that the home's EXIT sign over a memory care exterior door that is secured unless opened w/key fob, fire suppression system, or door release button is acceptable by BFS standards.
- 04/18/2023 Contact Document Received Videos, photos, and documentation to confirm compliance achieved re: Meal census form and exhaust ventilation functioning in operations office restroom and the common area restroom outside of this office. J. Sanders wrote that she attached a video of water temperature in the hair salon but there was no such attachment.
- 04/18/2023 Contact Document Sent Emailed a reply to AR J. Sanders that confirmation of water temperature between 105°F and 120°F in hair salon is still needed.

- 04/24/2023 Inspection Completed-Fire Safety: A Re-check annual inspection by M. Dan Stasa for licensee AH730395008 at this same address. Approval may be used for this applicant.
- 05/01/2023 Contact Document Sent Reminder email to AR J. Sanders that confirmation of water temperature between 105°F and 120°F in hair salon is still needed.
- 05/01/2023 Contact Document Received Video of water temperature at hair salon meeting compliance submitted by J. Sanders.
- 05/02/2023 Contact Document Received Brad LaFave, the facility's finance director submitted photos of resident rights posted; pass-thru kitchen window now enclosed in drywall; menus; meal census; repair of cabinet doors in resident room 20 west and the adjoining bathroom; 3 handwash lavatory kitchen sinks with wrist control faucets in place; ice scoop stored outside ice machine; sanitization instructions for operation of dishwasher and three-part sink; kitchen chemicals stored in beauty shop, which is a ventilated room. Also, Mr. LaFave sent an attestation letter that the home has sufficient funds to build janitor closet and soiled linen room; and sent an attestation letter from owner M. Hinkson that no food will be served to non-residents unless/until a food service establishment license is attained.
- 05/22/2023 Contact Document Received BCAL1603 Appointment of Authorized Representative form received changing authorized representative from Jeannette Sanders to Megan Rheingans - signed by owner Hamza Sikander.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility at 9140 Gratiot Saginaw, MI is a single-story building that was built in two sections in 2015 and 2016, and it also has a partial basement. It has been licensed as a home for the aged since May 2015. It is located in the north-central area of Saginaw County. The building is free standing on the north side of Gratiot Road, a divided parkway zoned 55 mph. The residential facility is within a country like setting with a golf

course next door and single-family homes across the street. There is a drainage area to the west of the building. The driveway and parking lot are on the front and east side of the building.

The home has 55 residential units with a total approved capacity of 65 resident beds. There are two separate entrances, one on each side of the building. Both entrances lead into the assisted living area of the facility. This area is designed for residents that require assistance with activities of daily living. The assisted living area includes the lobby, administrative offices, conference room, the main kitchen, dining room, hair salon, spa room, staff break room, staff offices/desk areas, various activity spaces, and two laundry service rooms. Over the years, there have been some changes to the floor plans including the change of location of hallway fire doors that impacted the identification of assisted living and memory care areas. An updated floor plan has been submitted.

Presently, there are 44 residential units in the assisted living area with 9 units requested and confirmed to meet requirements for double occupancy: Rooms 105, 112, 113, 115, 116, 124, 203, 305, and 415. This results in 53 assisted living area beds. Various unit configurations are available in this assisted living area including studios, one-bedroom units, and 2-bedroom units.

The facility's memory care area is a designated hallway, located along the front of the building. It is a secured unit designed for individuals who have been diagnosed with Alzheimer's disease or a related condition. In 2016, the previous licensee designated 16 resident rooms (#401-416) and two day/dining/activity space rooms to be the memory care unit. However, since that time, a hallway door was installed without knowledge and approval from Health Facilities Engineering Section, Bureau of Fire Services, and Home for the Aged licensing, in the hallway in between rooms 410/411 and rooms 412/418.

Consequently, the memory care unit now consists of only 11 residential units (Rooms #401-411) with one unit requested and confirmed to meet requirements for double occupancy: Room 410. This results in 12 memory care area beds. Also, there is now only one day/dining/activity space in the memory care unit. According to the original room sheets completed on 4/21/15 by engineer Andrea Humphrey (Wiggins), this room is 471 square feet and meets compliance to support 12 beds in the unit. Most memory care area rooms are studio units with only Room 410 being a two-bedroom unit.

The memory care area can be entered via the assisted living area. For resident safety, main exit doors in the memory care area are secured with numbered keypads/key fob devices to be opened with staff assistance. Windows in this area are equipped with stop devices so that they can only be opened a few inches, also for resident safety.

The memory care unit has its own day/dining/activity room with a meal service area. Meals are prepared in the main kitchen and then transported into the memory care unit for serving. Each residential unit has its own attached bathroom with shower and individualized heat/AC thermostat. Emergency pull cords are present in all resident bedrooms and bedrooms to summon assistance from staff. Personal emergency pendants are also available to summon staff assistance.

A bed and bedside table along with towels, washcloths, and bedding are available to all residents, although residents are encouraged to bring their own furniture and personal belongings for their own comfort.

The home is equipped with video monitoring cameras in hallways, communal areas, and the exterior of the building. Staff utilize I-phone devices to communicate with one another and tablets to receive alerts from the emergency pull cord/pendant system.

This facility has city water and sewer. The facility is equipped with a whole home fire suppression system. According to the Bureau of Fire Services, residents of a home for the aged licensed under Chapter 19 are expected to "shelter-in-place" in case of fire. If smoke and/or fire are present within the residents' immediate area, then those residents move to the adjacent unaffected smoke compartment/safe area of refuge. Residents evacuate the building if/when the building is deemed to be uninhabitable by the fire department/first responders/administration.

On 10/11/2022, Shields Comfort Care Assisted Living and Memory Care LLC's authorized representative at that time, Jeannette Sanders, submitted a letter attesting that the facility's emergency generator meets compliance with MCL333.21335, such that during an interruption of the normal electrical supply, it provides no less than four hours of service and generates enough power to provide lighting at all entrances and exits and to operate equipment to maintain fire detection, alarm, and extinguishing systems, telephone switchboards, heating plant controls, and other critical mechanical equipment essential to the safety and welfare of the residents, personnel, and visitors.

B. Program Description

In preparation of a change of ownership, on 04/12/2022 Shields Comfort Care Assisted Living and Memory Care LLC submitted application a home for the aged license under building fire safety type Chapter 19 Existing Health Facility.

A bill of sale dated 05/26/2022 was submitted to the department, which changed ownership of the operation and necessitated application for a new license.

The facility, to be named Shields Comfort Care Assisted Living, is operated by Shields Comfort Care Assisted Living and Memory Care LLC. A business entity search of the State of Michigan Department of Licensing and Regulatory Affairs revealed Shields Comfort Care Assisted Living and Memory Care LLC is a domestic limited liability company with an organization date of 04/11/2022.

As a licensed home for the aged, Shields Comfort Care Assisted Living and Memory Care LLC proposes to provide room, board, and supervised personal care to individuals aged 55 and older, along with the provision of services to individuals with Alzheimer's disease or related conditions in the memory care unit. Initial and ongoing training will be provided to all staff including specialized training for those individuals working with residents that have memory care needs.

On 08/24/2022, the applicant's authorized representative at that time, Jeanette Sanders, submitted a letter attesting the facility will not hold resident funds nor refundable deposits. Therefore, no surety bond is necessary.

On 01/12/2023, Ms. Sanders submitted a letter attesting no food will be served to nonresidents i.e. resident family members, employees, vendors, visitors, etc. unless and until food service establishment license from Saginaw Co. Health Dept. is attained.

C. Rule/Statutory Violations

When this facility was initially licensed as a home for the aged, in 2015, the Dept. of LARA Health Facilities Engineering Section (HFES) engineer Andrea Humphrey (Wiggins) submitted an Opening Survey Report with occupancy approval, room sheets, and floor plan approving 30 residential units, 22 rooms in the assisted living area and 8 rooms in the memory care area.

When an addition was built in 2016, HFES engineer Riyadh Almuktar submitted an Opening Survey Report with occupancy approval, room sheets, and floor plan approving 25 residential units, 17 rooms in the assisted living area and 8 rooms in the memory care area.

Upon review of these documents, it was revealed that the 2015 HFES room sheets omitted some square footage of rooms in the 200 hall, and the 2016 HFES room sheets did not specify which day/dining/activity space pertained to the memory care area. On 03/01/2023, HFES interim supervisor Pier-George Zanoni corrected the room sheets.

Also, during the on-site inspection, I observed that the floor plan no longer reflected the facility's current layout. Sometime after the 2016 addition to the building, the previous licensee installed a hallway door to reduce the size of the memory care unit. Instead of the total 16 residential units and two day/dining/activity spaces in memory care, the home now has a hallway containing only eleven residential units and one day/dining/activity space in memory care. The remaining five residential units and the second day/dining/activity space are now counted as part of the assisted living area of the facility.

On 04/24/2023, the Dept. of LARA Bureau of Fire Services (BFS) state fire inspector

Milan Dan Stasa issued fire safety certification approval for the current licensee at this address. This approval may be utilized for this applicant.

On 02/28/2023, I conducted an on-site inspection of the building with the applicant's administrator at that time, Cassandra Mannor. A number of items were identified to be out of compliance. On 04/12, 04/18, and 05/01/2023, the applicant's authorized representative at that time, Jeannette Sanders, submitted documentation, photos, and videos to demonstrate the items have been brought into compliance.

Therefore, the study has determined substantial compliance with Public Health Code Act 368 of 1978, as amended, and the administrative rule requirements related to a licensed home for the aged.

IV. RECOMMENDATION

It is recommended that a temporary 6-month home for the aged license/permit for this facility be issued. The terms of the license will enable the licensee to operate a home for the aged with a total capacity of 65 licensed beds and programs for aged and Alzheimer's disease or related condition care.

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05/01/2023

Andrea Krausmann Licensing Staff

Date

Approved By:

06/01/2023

Andrea L. Moore, Manager Long-Term-Care State Licensing Section Date