



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 16, 2023

Brooke Bosman
Armada Village MI Wellness LLC
2260 West Main St
Armada, MI 48005

RE: Application #: AL500410361
The Orchards at Armada Village 2
22580 Main St
Armada, MI 48005

Dear Ms. Bosman:

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 (248) 975-5053.

Sincerely,

A handwritten signature in blue ink, appearing to be "EJ".

Eric Johnson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W Grand Blvd, Suite 9-100
Detroit, MI 48202

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

I. IDENTIFYING INFORMATION

License #:	AL500410361
Applicant Name:	Armada Village MI Wellness LLC
Applicant Address:	2260 West Main St Armada, MI 48005
Applicant Telephone #:	(586) 784-5322
Administrator/Licensee Designee:	Brooke Bosman, Designee
Name of Facility:	The Orchards at Armada Village 2
Facility Address:	22580 Main St Armada, MI 48005
Facility Telephone #:	(586) 784-5322
Application Date:	09/21/2021
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODOLOGY

09/21/2021	Enrollment
09/22/2021	Application Incomplete Letter Sent 1326 & RI030 for Jacob, AFC100 for Rebecca, Tax ID Letter
09/22/2021	Inspection Report Requested - Fire
09/22/2021	Contact - Document Sent 1326, RI030, AFC100, Fire Safety String
08/31/2022	Comment Received communication would like to move forward
09/14/2022	Contact - Document Received 1326, app
09/16/2022	Contact - Document Sent Sent email requesting FPS from LD Robert and the completed AFC-100 for Rebecca
09/16/2022	PSOR on Address Completed
10/17/2022	Application Incomplete Letter Sent
03/02/2023	Inspection Completed-Fire Safety: A
05/11/2023	Application Complete/On-site Needed
05/17/2023	Inspection Completed On-site
05/17/2023	Inspection Completed-BCAL Full Compliance
05/22/2023	Inspection Completed-Env. Health: A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This 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 licensure of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1994.

A. Physical Description of Facility

The Orchards at Armada Village 2 is located at 22580 Main Street in Armada, Michigan. The facility is a ranch style building with vinyl/brick siding. The facility has sixteen single bed resident bedrooms with a bedroom/sleeping area, a living area, a full bathroom, and a small refrigerator. Meals will be prepared in a commercial kitchen located between this facility and The Orchards at Armada Village 3, which is a licensed facility located on the same campus and will be brought to The Orchards at Armada Village 2 to be served to their residents. The facility has a spacious dining room/kitchenette, a gathering room, lounge/living area, and beauty shop for all of the residents. There are also several storage rooms, furnace room, a laundry room, a medication room, and a staff office. The facility can accommodate fully and non- ambulatory residents. Facility has wheelchair accessibility.

The furnace and hot water heater are located on the first-floor a with solid core door which has a two-hour-fire-resistance rating equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. There is also a fire suppression sprinkler system installed and fire extinguishers placed throughout the home that was inspected and approved by the Bureau of Fire Services on 03/02/23.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	4'9 x 8'3+ 12'11 x 10'1	169	1
2	4'9 x 8'3+ 12'11 x 10'1	169	1
3	4'9 x 8'3+ 12'11 x 10'1	169	1
4	4'9 x 8'3+ 12'11 x 10'1	169	1
5	4'9 x 8'3+ 12'11 x 10'1	169	1
6	18'3 x 12'10 + 10'1 x 6'6	299	2
7	18'3 x 12'10 + 10'1 x 6'6	299	2
8	4'9 x 8'3+ 12'11 x 10'1	169	1
9	4'9 x 8'3+ 12'11 x 10'1	169	1

10	4'9 x 8'3+ 12'11 x 10'1	169	1
11	4'9 x 8'3+ 12'11 x 10'1	169	1
12	18'3 x 12'10 + 10'1 x 6'6	299	2
13	18'3 x 12'10 + 10'1 x 6'6	299	2
14	4'9 x 8'3+ 12'11 x 10'1	169	1
15	4'9 x 8'3+ 12'11 x 10'1	169	1
16	4'9 x 8'3+ 12'11 x 10'1	169	1

Total capacity: 20

The living, dining, and sitting room areas measure a total of 1,635 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 twenty (20) residents per the AFC the rule requirement R400.14405 (1) and R400.14409 (2)(3). It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The Orchards at Armada 2 is designed to provide a residential program for individuals who require 24-hour supervision, protection and personal care. The center can accept up to twenty (20) adults both male and female with varying functional levels who have experienced life altering changes, primarily aged, Alzheimer's, and physically handicap. The center is structured to create the least restrictive environment possible and to promote independence in daily living skills. The program services provided include assistance and skills training in basic and advanced activities of daily living. Group and individual leisure activities and community integrations. Transportation and assistance as needed with community activities, services, and therapeutic programs. The services will be provided by trained professionals who are capable of meeting the physical, emotional, intellectual, and social needs of each resident. The rehabilitation team will develop and implement a treatment plan, which will be individual to each resident's needs and goals.

Admission and discharge policies, program statement, refund policy, personnel policies, standard procedures, as well as floor plans, organizational chart, permission to inspect, proof of ownership, staff training, fire evacuation plan, and staff pattern for the facility were reviewed and accepted as written as outlined in Rule(s) 400.14103, 400.14207, 400.14209, and 400.14302.

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.

C. Applicant and Licensee Designee/Administrator Qualifications

The applicant is Armada Village MI Wellness LLC, which is a "For Profit Corporation" and was established in Michigan on 7/19/21. 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 Armada Village MI Wellness LLC, have submitted documentation appointing Brooke Bosman as Licensee Designee for this facility. Ms. Bosman has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Brooke Bosman will act as both the licensee designee and administrator.

The licensee designee/administrator, Brooke Bosman, has associate degree from St. Clair Community College. She has over two years of experience as a direct in-home caregiver for the aged, and handicapped population.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 1 staff to 15 residents per shift. All staff shall be awake during sleeping hours.

Brooke Bosman, the licensee designee and administrator 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.

Licensing record clearance requests were completed for Ms. Bosman. Ms. Bosman submitted current medical clearances with a statement from a physician documenting good health and tuberculosis negative results.

Ms. Bosman 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. Bosman acknowledged an understanding of the responsibility to assess the good moral character of employees and acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care

Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

Ms. Bosman acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff who have received medication training and have been determined competent by the licensee or licensee designee will 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.

Ms. Bosman acknowledged the 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 directly with residents. In addition, Ms. Bosman acknowledged the responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteers and to follow the retention schedule for all of the documents contained within the employee file.

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

Ms. Bosman acknowledged the 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 as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Ms. Bosman acknowledged the 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. Bosman acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Bosman acknowledged that a separate Resident Funds Part II BCAL-2319 form will be completed 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 residents' personal money transactions that have been agreed to be managed by Armada Village MI Wellness LLC.

Ms. Bosman acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights and indicated the intent to respect and safeguard these resident rights.

Ms. Bosman acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

Ms. Bosman acknowledged the 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 facility has been determined to be in full compliance with the applicable administrative rules and the licensing statute based upon the onsite inspections conducted and the licensee's intent to comply with all administrative rules for a large group home (13-20) as well as the licensing act, Public Act 218 of 1979, as amended.

IV. RECOMMENDATION

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



06/14/23

Eric Johnson
Licensing Consultant

Date

Approved By:



06/16/2023

Denise Y. Nunn
Area Manager

Date