



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

December 12, 2023

Charles Baroi
3979 140th Ave.
Holland, MI 49424

RE: Application #: AS700417921
Mayabe Care
3993 140th Ave
Holland, MI 49424

Dear Mr. Baroi:

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 (616) 356-0100.

Sincerely,

A handwritten signature in black ink, appearing to read "Ian Tschirhart".

Ian Tschirhart, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 644-9526

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS700417921
Licensee Name:	Charles Baroi
Licensee Address:	3979 140th Ave. Holland, MI 49424
Licensee Telephone #:	(616) 377-8187
Licensee Designee:	Charles Baroi
Administrator:	Juliet Troast
Name of Facility:	Mayabe Care
Facility Address:	3993 140th Ave Holland, MI 49424
Facility Telephone #:	(616) 377-8197
Application Date:	10/04/2023
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

10/04/2023	On-Line Enrollment
10/05/2023	PSOR on Address Completed
10/17/2023	Contact - Document Received Medical Clearance & 1326/RI 030 for Charles Baroi (Sent to C Coburn for review)
10/17/2023	Application Incomplete Letter Sent AFC 100 for Maya Baroi & Juliet Troast
10/30/2023	Contact - Document Received AFC 100's for Juliet Troast & Maya Baroi
10/30/2023	File Transferred To Field Office GR via SharePoint
11/06/2023	Contact - Document Sent I received an email from Charles Baroi with documents attached
11/22/2023	Contact - Telephone call received Charles Baroi wanted to know when I could come inspect the house
11/27/2023	Contact - Telephone call received I informed Mr. Baroi of what documents still needed to be submitted
11/27/2023	Inspection Completed On-site Initial inspection
12/05/2023	Inspection Completed On-site
12/05/2023	Contact - Telephone call received I spoke with Mr. Baroi, arranged to come inspect house
12/05/2023	Inspection Completed On-site Final inspection
12/08/2023	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Mayabe Care is located at 3993 140th Avenue, Holland, Michigan 49424, which is in Ottawa County. The applicant, Charles Baroi, is purchasing this home and has submitted a copy of the mortgage statement showing so. Mr. Baroi also owns and operates an Adult Foster Care Family Home (Troast Care, AF700406163). Mayabe Care is located directly next to Troast Care.

This house is a two-story colonial-style dwelling with an attached two-car garage. There are two bedrooms, a utility room, a full-bath, and a dining area in the lower level. There are two bedrooms, a full-bath, kitchen, dining area, and a living room on the upper level. The bedrooms on the lower level, and one bedroom on the upper level will be used for residents; the second bedroom on the upper level will be used by staff only. This house is not wheelchair accessible.

The house utilizes public water and sewerage services.

The furnace and hot water heater are in a separate room on the lower level, which is fitted with a self-closing and latching fire-safety door. The washer and dryer are located in the utility room on that floor as well. This room has a 1-3/4 inch solid core door, which is equipped with an automatic self-closing device and positive latching hardware.

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, which was tested upon the final inspection on 12/05/2023 and worked properly. There is at least one operable A-B-C fire extinguisher attached to the wall on each level of the building and is easily accessible. Evacuation routes are placed on the walls in conspicuous places, and emergency telephone numbers are posted next to the home's telephone, which residents will have reasonable access to.

Resident bedrooms were measured have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	14'6" X 11'2"	161	2
2	13'4" X 10'9"	143	2
3	13'0" X 11'6"	149	2

Total Capacity: 6

The living and dining room areas measure a total of 444 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The kitchen has all the necessary cooking utensils, thermometers in the freezer and refrigerator, and a garbage can with a tightly fitting lid.

A telephone is available for residents to use. Telephone numbers for emergency services is posted near the telephone.

There are handrails in the bathrooms near the bathtub and shower, and there are handrails upon each set of stairs.

All of the furniture, appliances, equipment, etc. are clean and in good condition. The overall maintenance and cleanliness of the home is good. The landscaping, driveway, and walkway are all in good condition.

B. 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 **six (6)** male and/or female adults aged 20 to 75 years old. 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. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

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 members, and only with the prior approval of the resident, guardian, and the responsible agency.

Mayabe Care will not provide transportation to residents, and any charges for such will be stated in the Resident Care Agreement. Emergency transportation needs will be fulfilled through ambulance services; all other transportation will be arranged by family members, or other service providers who offer it to the resident who live there.

C. Applicant and Administrator Qualifications

Charles Baroi is the Licensee Designee and Juliet Troast is the Administrator of this AFC home. Medical and Record Clearances were submitted for both and neither have any restrictions. Both of their TB test results were negative.

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), Identogo, and the related documents required to be maintained in each employee's 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 Charles Baroj, can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a cabinet with a lock 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 themselves and direct care staff or volunteers and the retention schedule for all of the documents contained within their and 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.

