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GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

March 11, 2024

James Ruoff Ryder Specialized Care, LLC 24049 M78 Hwy Battle Creek, MI 49017

RE: Application #: AS130418240

Ryder 1 34 Byron St

Battle Creek, MI 49017

Dear Mr. Ruoff:

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 (517) 284-9730.

Sincerely,

Kevin L. Sellers

Kevin Sellers, Licensing Consultant
Department of Licensing and Regulatory Affairs
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 230-3704
SellersK1@michigan.gov

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS130418240

Applicant Name: Ryder Specialized Care, LLC

Applicant Address: 24049 M78 Hwy

Battle Creek, MI 49017

Applicant Telephone #: (269) 425-6288

Administrator: Carson Dyer

Licensee Designee: James Ruoff

Name of Facility: Ryder 1

Facility Address: 34 Byron St

Battle Creek, MI 49017

Facility Telephone #: (269) 966-7459

02/08/2024

Application Date:

Capacity: 5

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODOLOGY

02/08/2024	Enrollment
02/08/2024	Application Incomplete Letter Sent
02/08/2024	PSOR on Address Completed
02/08/2024	Lic. Unit file referred for background check review PSOR Hit
02/23/2024	File Transferred To Field Office
02/23/2024	Application Incomplete Letter Sent emailed to licensee, James Ruoff.
03/05/2024	Contact - Document Received
03/05/2024	SC-Application Received - Original
03/06/2024	Contact - Document Received
03/06/2024	Application Complete/On-site Needed
03/07/2024	Inspection Completed On-site
03/07/2024	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Ryder 1 is a large two-story ranch home constructed on a full basement located at 34 Byron Street Battle Creek, Michigan in Calhoun County. There are multiple restaurants and convenience stores, Verona Elementary School and St. Phillip Catholic Central High School located less than a 1 mile of the home. Direct care staff and visitor parking is located in the driveway and street in front of the home with ample amount of space.

The main level of the home consists of resident bedroom # 1, full bathroom # 1, large living room and dining room, office, kitchen, laundry room and full bathroom # 2. The second-floor stairs are located at the front entrance, resident bedroom # 2, resident bedroom # 3, resident bedroom # 4, resident bedroom # 5, along with full bathroom # 3, full bathroom # 4 along with a common area/activity sitting room is located on the second floor of the home.

There are two separate approved means of egress with one located at the driveway entrance and the second exiting the laundry room area onto a small deck down a concrete sidewalk towards the front entrance of the home. However, neither exit is wheelchair accessible so the home is not wheelchair accessible and cannot accept residents who require the regular use of a wheelchair to assist with mobility.

The home utilizes public water supply and public sewage disposal systems. The basement is separated from the main level of the facility by a 1 3/4-inch fire rated solid core door with a 1 hour-fire-resistance rating and equipped with an automatic self-closing device and positive latching hardware creating a floor separation from the main floor of the facility to the basement.

The furnace and hot water heater were observed located in the basement. The furnace and hot water heater use natural gas, were inspected by a licensed professional on 02/27/2024 and found to be in fully operational order.

The home is equipped with a hardwired interconnected blue tooth smoke and carbon monoxide detection system with battery back-up installed by a licensed electrician and is fully operational. There are smoke detectors in sleeping areas, near heating equipment and on each level of the home. The home is equipped with fire extinguishers located in the kitchen on the main floor, hallway on the second floor and in the basement. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square	Total Resident
		Footage	Beds
1	11' 5" X 12' 0"	132 sq. ft.	1
2	10' 0" X 10' 5"	100 sq. ft.	1
3	11' 0" X 10' 0"	110 sq. ft.	1
4	10' 0" X 10' 0"	100 sq. ft.	1
5	13' 0" X 9' 0"	117 sq. ft.	1

The living, dining, and sitting room areas measure a total of 517 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement. Based on the above information, this home can accommodate five (5) residents. It is the licensee's responsibility not to exceed the home's licensed capacity.

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 five (5) male ambulatory adults whose diagnosis is developmentally disabled and mentally ill 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, if needed. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency. The applicant intends to accept residents from North County Community Mental Health and/or private pay individuals as a referral source.

In addition, the licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment and in-house activities

The program will utilize resources to provide an environment to enhance the quality of life of residents and will offer outings, shopping, and dining in the community. Community outings are scheduled with consideration to requested destination, availability of transportation, level of resident interest, availability of staff and weather. Residents are responsible for their own purchases on outings. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Rule/Statutory Violations

The applicant is Ryder 1 under the name Ryder Specialized Care LLC, which is a "For Profit Corporation", established in Michigan, on 02/09/2023. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate financial capability to operate this adult foster care facility.

Ryder Specialized Care LLC has submitted documentation appointing James Ruoff as Licensee Designee and Carson Dyer as the Administrator of the home. A licensing record clearance request was completed with no convictions recorded for James Ruoff or Carson Dyer. The licensee designee James Ruoff and administrator Carson Dyer submitted medical clearance requests with statements from a physician documenting their good health and current negative TB results.

Mr. James Ruoff has provided documentation to satisfy the qualifications and training requirements as licensee designee identified in the group home rules. Mr. Ruoff began his employment with Bedford Specialized Care II from 2021 to present as a direct care worker, with the role of human resource director working directly with newly hired staff and residents diagnosed with developmental disabilities and mental illness. Mr. Ruoff has completed required trainings in accordance with AFC requirements for over 3 years.

Mr. Carson Dyer has provided documentation to satisfy the qualifications and training requirements as administrator identified in the group home rules. Mr. Dyer began his employment with Bedford Specialized Care II from 2021 to present as a direct care worker, with the role of office personnel. Mr. Dyer worked directly with employee payroll and monthly purchase orders for the home. Mr. Dyer has provided direct care for

residents diagnosed with developmental disabilities and mental illness and has completed required trainings in accordance with AFC requirements.

The staffing pattern for the original license of this five-bed facility is adequate and includes a minimum of one staff-to-five residents per shift. The applicant acknowledges that the staff-to- resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. The applicant has indicated direct care staff will not be awake during sleeping hours.

The applicant acknowledges that at no time will this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facility's staff-to-resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledges 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.

The applicant acknowledges 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) 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 the licensee designee can administer medication to residents. In addition, the applicant has indicated resident medication will be stored in a locked cabinet and daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care. The applicant acknowledges their 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.

The applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all the documents that are required to be maintained within each resident's file.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges that a separate Resident Funds Part II BCAL-2319 form will be created for each resident to document the date and amount of the adult foster care service fee paid each month and all resident personal money transactions that have been agreed to be managed by the applicant.

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 their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested. The applicant acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult medium group home with a capacity of five (5) residents.

Kevin L. Sellers	3/8/24
Kevin Sellers Licensing Consultant	Date
Approved By:	3/11/24
Russell B. Misiak Area Manager	Date

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