



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

February 22, 2024

Christine Bertram
Montclair Specialized Residential LLC
2101 Montclair Avenue
Flint, MI 48503

RE: Application #:	AS250416797 Montclair Specialized Residential 2101 Montclair Avenue Flint, MI 48503
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Dear Christine Bertram:

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 (517) 643-7960.

Sincerely,

Susan Hutchinson, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(989) 293-5222

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250416797
Licensee Name:	Montclair Specialized Residential LLC
Licensee Address:	2101 Montclair Avenue Flint, MI 48503
Licensee Telephone #:	(833) 478-9464
Administrator/Licensee Designee:	Katrina Bailey, Administrator Christine Bertram, Designee
Name of Facility:	Montclair Specialized Residential
Facility Address:	2101 Montclair Avenue Flint, MI 48503
Facility Telephone #:	(833) 478-9464
Application Date:	06/16/2023
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

06/16/2023	On-Line Enrollment
07/03/2023	Application Incomplete Letter Sent 1326a and RI-030
07/17/2023	Contact - Telephone call received Owner called about status-sitll waiting on 1326a and LD needs to get new prints
08/18/2023	PSOR on Address Completed
08/18/2023	Inspection Report Requested - Health
08/18/2023	File Transferred To Field Office
08/23/2023	Application Incomplete Letter Sent
10/04/2023	Contact - Document Received AFC documents received
10/04/2023	SC-Application Received - Original
10/30/2023	Application Incomplete Letter Sent 2nd application incomplete letter sent
01/03/2024	Contact - Document Received Additional documentation received
01/18/2024	Contact - Document Received All AFC original documents now received
01/23/2024	Application Complete/On-site Needed
02/06/2024	Inspection Completed On-site
02/06/2024	Inspection Completed-BCAL Sub. Compliance
02/22/2024	Inspection Completed-BCAL Full Compliance
02/22/2024	SC-Inspection Full Compliance
02/22/2024	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Montclair Specialized Residential is located at 2101 Montclair Avenue in the township of Flint and was built in 1945. This facility was previously licensed as a small group home under license number AS250339005 but was voluntarily closed on 02/16/2022. The home is owned by Timothy Bertram, who submitted a copy of the purchase agreement dated 03/18/23. Timothy Bertram also submitted a letter dated 11/13/23 giving Montclair Specialized Residential LLC the right to occupy this facility and permission for AFC licensing to inspect this property. The facility is connected to a public water and sewer system through Flint Township.

This facility is a large, ranch style home on a concrete slab. It does not have a basement or a crawl space. The home has 6 bedrooms and 2 ½ bathrooms and has a total of 2,297 square feet. There is a medication room/office which is not intended for resident use. The home has a brick exterior and is in the College Cultural/Woodlawn Park neighborhood. The house is on a corner lot and the driveway is located off Commonwealth Avenue. The home has a fully fenced in back yard and alarms on all doors. There are three independent means of egress, each of which is identified as an emergency exit. One exit is through the front door and leads to the front yard, the second exit is off the dining room and leads to the backyard, and the third exit leads to the driveway. All exits are barrier free, and this facility is wheelchair accessible.

The interior of the facility was remodeled and has all new stainless-steel appliances, new laminate floors, new paint, and new bathroom fixtures. The roof was replaced in 2022. The full bathrooms have walk-in showers as well as safety bars in the showers and near the toilets. The half bathroom has safety bars near the toilet. The washer and dryer are in the kitchen and the dryer has a solid metal vent which vents directly through the attic and then outside. The facility is connected to a public water and sewer system.

The furnace and hot water heater are located on the main floor, off the hallway between bedroom #1 and bedroom #2. On 12/13/23, they were inspected by Blue Flame Heating & Cooling and deemed to be in safe operating condition. The furnace room is constructed of materials that provide a 1-hour-fire-resistance rating. It is equipped with a 1 ¾ -inch solid core door and has an automatic self-closing device and positive latching hardware. The facility is equipped with an interconnected hard wired smoke detection system with battery back-up and is fully operational. Smoke detectors are located throughout the facility as required by R 400.14505. A carbon monoxide detector has been installed in the hallway by the furnace room. The facility has several fire extinguishers that are located at each end of the house, including the garage.

The bedrooms were measured during my onsite inspection, and they have the following dimensions:

Bedroom	Room Dimensions	Total Square Footage	Total Resident Beds
#1	14'3" x 9'	128	1
#2	11'8" x 9'10"	115	1
#3	8'11" x 11'6"	103	1
#4	10'7" x 11'5"	121	1
#5	13'3" x 10'	133	1
#6	14'4" x 14'5"	207	1

The living room measures 23'9" x 15'2" and the dining room measures 14'11" x 11'4". This is a total of 529 square feet of living space which exceeds the minimum of 35 square feet per occupant requirement. Based on the above information, it is concluded that this facility can accommodate **six (6)** residents. Each bedroom is a private room, designed for one resident.

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 or female ambulatory adults whose diagnosis is developmentally disabled, mentally ill, physically handicapped, aged, and/or traumatically brain injured 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. The applicant intends to accept residents from contracted Community Mental Health agencies as a referral source.

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.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is Montclair Specialized Residential LLC, which is a "Domestic Limited Liability Company", and was established in Michigan on 04/19/2023. 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 members of Montclair Specialized Residential LLC have submitted documentation appointing Christine Bertram as Licensee Designee for this facility and Katrina Bailey as the Administrator of the facility.

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee designee and the administrator. The licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 2-staff-to-6-residents during waking hours and 1-staff-to-6 residents during sleeping hours. The licensee designee 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 that direct care staff will be awake during sleeping hours.

The licensee designee acknowledged 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 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) 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, can 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.

The applicant acknowledges their 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, the applicant acknowledges their responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

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, 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 the resident's 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.

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.

VI. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care small group home with a capacity of 6.
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Susan Hutchinson

February 22, 2024

Susan Hutchinson Licensing Consultant	Date
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Approved By:

Mary Holton

February 22, 2024

Mary E. Holton Area Manager	Date
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