



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

January 30, 2025

Frida Boyd
Tender Living Home LLC
Po Box #1
Oshtemo, MI 49077

RE: Application #: AS390418687
Tender Living Home
2108 East Cork St
Kalamazoo, MI 49001

Dear Frida Boyd:

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) 284-9730.

Sincerely,

A handwritten signature in black ink that reads "Cathy Cushman".

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 615-5190

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS390418687
Licensee Name:	Tender Living Home LLC
Licensee Address:	2108 East Cork St Kalamazoo, MI 49001
Licensee Telephone #:	(269) 207-5965
Administrator:	Frida Boyd
Licensee Designee:	Frida Boyd
Name of Facility:	Tender Living Home
Facility Address:	2108 East Cork St Kalamazoo, MI 49001
Facility Telephone #:	(269)550- 6631
Application Date:	07/24/2024
Capacity:	6
Program Type:	AGED PHYSICALLY HANDICAPPED

II. METHODOLOGY

07/24/2024	On-Line Enrollment
07/25/2024	PSOR on Address Completed
07/25/2024	Contact - Document Sent - forms sent
08/06/2024	Contact - Document Received - 1326/RI030 and EIN
08/06/2024	File Transferred To Field Office
08/06/2024	Application Incomplete Letter Sent
11/29/2024	Contact - Document Received - Received the following: Program statement, required policies, Emergency preparedness, Admission policy, Refund policy, Job descriptions, Smoke detector inspection, Water heater inspection, Furnace/AC inspection, Layout, Org chart, Budget, Staffing pattern, HS diploma for LD/Admin, CPR for LD/Admin Required trainings for LD/Admin, and initial medical/TB for LD/Admin.
12/02/2024	Contact - Document Received - copy of lease
12/02/2024	Contact - Document Sent - Sent app incomplete letter based on my review of the documentation sent last week.
01/17/2025	Inspection Completed On-site
01/17/2025	Inspection Completed-BCAL Sub. Compliance
01/17/2025	Inspection Completed-Env. Health : A EH inspection completed by BCHS staff due to facility being on public water/sewer
01/18/2025	Contact - Document Received - Received basement layout.
01/29/2025	Contact – Document Received – Letter to appoint licensee designee/administrator
01/29/2025	Inspection Completed – BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a completely remodeled home located on approximately 0.35 acres in the Milwood neighborhood of Kalamazoo. Originally built in the early 1920's, the facility was purchased and completely remodeled to a larger home. It has an unfinished basement where the old home was located, a crawlspace under the added-on space, and a finished attic over a portion of the home. The facility is approximately a five minute drive to local restaurants, fast food, supermarkets, churches, banks/credit unions, and gas stations. It is also an approximate 5 minute drive to local attractions such as Milham Park, Airway Fun Center and the Wings Event Center. It is an approximate 5 minute drive to I-94 highway and 15 minute drive to 131 highway. It is also an approximate 10 - 15 minute drive to larger stores like Costco and Trader Joes in Kalamazoo or to Portage where additional big box stores, shops and restaurants are located.

The facility is owned by H Living Properties LLC with proof of ownership and permission to inspect on file. The applicant, Tender Living Home LLC, submitted a lease agreement between H Living Properties LLC, Tender Living Home LLC and Frida Boyd, the facility's identified licensee designee and administrator.

The facility does not have a garage, but there is ample parking on the facility's lot. There is no immediate street parking as the facility is located on a busy Kalamazoo street. The facility also does not have a fenced in yard. The facility is wheelchair accessible with a ramp on the front and side doors of the facility. The ramps are located on the primary and secondary means of egress, which are the only two doors in and out of the facility. Due to the facility's location, it utilizes both the Kalamazoo public water supply and sewage disposal system.

The facility's front door opens to an enclosed porch/seating area, which then opens to a 24'8" x 13' seating and dining area. There is a living room to the right immediately upon entering the facility measuring 13'6" x 19'2". Immediately to the left upon entering the facility is a staff office where the stairs are located to the facility's finished attic. Residents will not utilize this staff office or the attic. The attic will be used for storage and files.

To the right of the staff office and off the left side of the dining room is a bedroom, which will not be utilized by residents. The applicant intends to utilize this bedroom either for direct care staff or for a resident's family in the event of an emergency. The facility's galley style kitchen is located just beyond the dining room. The kitchen consists of a dishwasher, stove, oven, microwave, sink, and refrigerator/freezer. Just beyond the kitchen is a 13'6"x 21'3" common area the applicant intends to use for additional seating and eating area. There is also a hallway to the right of the facility's kitchen leading to the back of the facility. The facility's six individual resident bedrooms are located off the dining room and this large common area. Each resident bedroom has its own en-suite bathroom. Each bathroom consists of a toilet, sink and wheelchair accessible showers.

Each bathroom has a mechanical fan for ventilation. The facility's laundry room, which consists of an electric washer and dryer, is also located off the large common area. An additional bathroom, consisting of a stand-up shower, sink and toilet, is also located off this common area. Staff, residents, and visitors will utilize this bathroom. The facility's secondary means of egress is just passed this bathroom on the left-hand side.

The facility's basement is unfinished; however, it has an egress window in the event it is completed. The only means of egress out of the basement is via the basement stairs. The facility's utilities are all located in the unfinished basement. Access to the crawlspace is also located within the unfinished basement. Residents will not utilize the facility's basement.

The facility's basement stairs are also located off the common area in the back of the facility near the kitchen and bathroom. The gas furnace and two hot water heaters are located in the basement with a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware located at the top of the facility's basement stairs. Fire extinguishers are located on the main level of the facility and the basement. The furnace was inspected on 11/19/2024 and determined to be in good working condition and functioning properly.

The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. Smoke detectors are located in each bedroom, in the sitting, living, and dining rooms, basement and attic. The smoke detection system was inspected by a licensed contractor on 10/09/2024 and determined to be in good working condition, fully functioning, and interconnected. Additionally, the electrical system was inspected on 10/09/2024 and determined to be in good condition and functioning properly. The applicant received final approval for the facility's renovations from the City of Kalamazoo Community Planning and Development Code Administration Division, dated 01/03/2025.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	9'11" x 12'	119 sq ft	1
2	10'11" x 12'	131 sq ft	1
3	8'5" x 15'1"	126 sq ft	1
4	10'6" x 12'5"	130 sq ft	1
5	10'6" x 12'5"	130 sq ft	1
6	8'5" x 14'1"	118 sq ft	1

The living, dining, and sitting room areas measure a total of 864 square feet of living space. This 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. It is the licensee's responsibility not to exceed the facility'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 four (6) male or female ambulatory or non-ambulatory adults whose diagnosis is aged in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, and personal adjustment skills as needed. 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 with private pay sources for payment or from local elderly care programs or Area Agency on Aging.

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. Emergency transportation will be available by dialing 911. Other transportation services will be specified in individual resident care agreements.

In addition to the above program elements, it is the intent of the applicant to make provisions for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources for recreational activities including local churches, local grocery stores, local restaurants, and local parks. These resources provide an environment to enhance the quality of life and increase the independence of residents

C. Applicant and Administrator Qualifications

The applicant is Tender Living Home LLC, which is a "Domestic Limited Liability Company", was established in Michigan, on 07/16/2024. 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.

Phi Nguyen is the resident agent and owner of Tender Living Home LLC and has appointed Frida Boyd as both the licensee designee and administrator of the facility. A licensing record clearance request was completed with no LEIN convictions recorded for Frida Boyd. Frida Boyd submitted a medical clearance with a statement from her physician, dated 08/07/2024, documenting her good health and current negative TB test.

Frida Boyd, the licensee designee and administrator, provided documentation to satisfy the qualifications and training requirements identified in the administrative group home

rules. Frida Boyd owns and operates over six adult foster care facilities in several counties for the last six years providing care to the mentally ill, developmentally disabled, physically handicapped, and aged populations. She also has over 14 years of experience as a nurse.

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

The applicant 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 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.

The applicant acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home with a capacity of six residents.



01/29/2025

Cathy Cushman
Licensing Consultant

Date

Approved By:



01/30/2025

Dawn N. Timm
Area Manager

Date