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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

July 18, 2025

Brad Heinze 4551 E. Kinsel Hwy CHARLOTTE, MI 48813

RE: Application #: AM230418785

Creative Living One, LLC 4551 E. Kinsel Hwy Charlotte, MI 48813

Dear Mr. Heinze:

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 12 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) 335-5985.

Sincerely,

Ondrea Johnson, Licensing Consultant

Bureau of Community and Health Systems

enclosure

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

#### I. IDENTIFYING INFORMATION

**License #:** AM230418785

Applicant Name: Brad Heinze

**Applicant Address:** 4551 E. Kinsel Hwy

CHARLOTTE, MI 48813

**Applicant Telephone #:** (517) 652-9232

**Licensee:** Brad Heinze

Administrator: Brad Heinze

Name of Facility: Creative Living One, LLC

**Facility Address:** 4551 E. Kinsel Hwy

Charlotte, MI 48813

**Facility Telephone #:** (517) 652-9232

Application Date: 09/03/2024

Capacity: 12

Program Type: AGED

### II. METHODOLOGY

09/03/2024	Enrollment
09/03/2024	Application Incomplete Letter Sent-requested updated 1326/RI030
09/03/2024	Contact - Document Sent-forms sent
09/03/2024	Contact - Document Sent-BFS letter sent via email to Licensee
09/04/2024	PSOR on Address Completed
12/11/2024	Contact - Telephone call received-requested forms again
12/11/2024	Contact - Document Sent-resent the APPINC letter
12/16/2024	File Transferred To Field Office
12/16/2024	Inspection Report Requested – Health Inv 1034801
12/19/2024	Application Incomplete Letter Sent
01/08/2025	Inspection Completed-Env. Health : A
06/20/2025	Inspection Completed-Fire Safety : A
06/24/2025	Contact - Document Received-Facility/Licensee Designee documents
06/25/2025	Contact - Document Received-Facility/Licensee Designee documents
07/03/2025	Contact - Document Received-Facility documents
07/05/2025	Contact - Document Received-Facility/Licensee Designee documents
07/17/2025	Application Complete/On-site Needed
07/17/2025	Inspection Completed On-site
07/18/2025	Inspection Completed-BCAL Full Compliance

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

This facility has been licensed as a family adult foster care home since 2023 and is now undergoing a change in capacity and type from 6 to 9 residents and to a medium group adult foster care home.

This is a spacious ranch style home located in a rural setting that sits on over two acres of land bordered by farmland with incredible country views from all bedrooms of the home. The home is less than five miles from a hospital, restaurants, schools, and parks. The north side of the home includes a living room, dining room, kitchen, laundry room, a full complete resident bathroom equipped with a walk-in shower, one bedroom with a private full bath equipped with a tub and shower, and four bedrooms with a private half bath. The south side of the home includes a living room, dining room, kitchen, laundry room, a half bath for resident use, one resident bedroom with a private full bath equipped with a shower and tub and two resident bedrooms. The home includes an unfinished basement on each side of the home that will be used for storage only and not occupied by residents. The home is wheelchair accessible throughout and has two approved means of egress that each lead to a full deck, which is equipped with a wheelchair ramp that leads to the driveway. The home utilizes a private well and septic. An environmental health inspection was completed on 1/8/2025 and the facility's well and septic systems were determined to be in substantial compliance with the applicable environmental health licensing rules.

The home is equipped with a propane furnace and water heater located in both basements of the home and equipped with a 1-3/4 inch solid core door with an automatic self-closing device and positive latching hardware at the top of the stairs. The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational and is fully sprinkled. On 6/20/2025, the facility was determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules. Fire extinguishers are installed on each floor of the home.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	10'7 x 14'10	157 sq ft	1
2	14'10 x 11'2	166 sq ft	1
3	11'6 x 14'10	171 sq ft	2
4	10'1 x 14'10	150 sq ft	1
5	13'1 x 14'10	194 sq ft	2
6	10' x 14'10	148 sq ft	1
7	16'5 x 13'1	215 sq ft	2
8	12'3 x 11'11	147 sq ft	1

9	12'3 x 11'11	147 sq ft	1
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The indoor living and dining areas measure a total of \_\_1537\_\_ square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 12 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

#### **B.** Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to 12 male and/or female residents whose diagnosis is aged. The program will include social interaction skills, personal hygiene, personal adjustment skills, public safety skills, independent living skills and transportation. The applicant intends to accept residents from local referral sources such as Tri County Office on Aging and private sources for payment

**If needed by residents,** behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life and increase the independence of residents.

#### C. <u>Applicant and Administrator Qualifications</u>

The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents. The applicant has appointed Brad Heinze to be the licensee designee and administrator of the facility.

Criminal history background check of the applicant Brad Heinze was completed, and he was determined to be of good moral character to provide licensed adult foster care. Brad Heinze submitted statements from a physician documenting his good health and current negative tuberculosis test results.

Brad Heinze have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Brad Heinze has almost two years of experience working with the aged population and has operated this adult foster care home since 2023 under a family home license.

The staffing pattern for the original license of this 12 bed facility is adequate and includes a minimum of <u>1</u> staff for <u>12</u> residents per shift. The applicant acknowledged that the staff to resident ratio may need to be increased in order to

provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The applicant has indicated that direct care staff will be awake during sleeping hours.

The applicant 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.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledged the requirement for obtaining criminal record checks of employees and contractors who have <u>regular</u>, <u>ongoing</u> "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (<u>www.miltcpartnership.org</u>) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee 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.

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

The applicant acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created 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 resident's personal money transactions that have been agreed to be managed by the applicant.

The applicant 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. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant 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.

The applicant 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.

The applicant acknowledged 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 12 residents.

Ondrea John	Carr	7/18/2025
Ondrea Johnson Licensing Consultant	Date	
Approved By:		
Maun Umm	07/18/2025	
Dawn N. Timm Area Manager		Date