



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

March 31, 2026

Laura Hatfield-Smith
REM Michigan LLC
South Suite 350
6600 France Ave
Edina, MN 55435

RE: Application #:	AS730419623 REM Michigan Winfield 3595 Winfield Saginaw, MI 48603
--------------------	--

Dear Laura Hatfield-Smith:

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,

Martin Gonzales, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

Enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS730419623
Applicant Name:	REM Michigan LLC
Applicant Address:	South Suite 350 6600 France Ave Edina, MN 55435
Applicant Telephone #:	(989) 791-3465
Administrator/Licensee Designee:	Laura Hatfield-Smith, Designee
Name of Facility:	REM Michigan Winfield
Facility Address:	3595 Winfield Saginaw, MI 48603
Facility Telephone #:	(989) 791-3465
Application Date:	05/30/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL
Special Certification:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODOLOGY

05/30/2025	Enrollment
05/30/2025	PSOR on Address Completed
05/30/2025	File Transferred To Field Office
06/03/2025	SC-ORR Response Received-Approval
07/01/2025	Application Incomplete Letter Sent 1st application incomplete letter sent.
10/30/2025	Contact - Document Sent Sent email to LD Laura Lynn Smith requesting documentation.
10/30/2025	Contact - Document Received LD Smith emailed me back stating they were still opening new license.
01/15/2026	Contact - Document Received LD Submitted some requested documentation.
02/19/2026	Contact - Document Received LD submitted additional paperwork.
02/19/2026	SC-Application Received - Original
03/31/2026	Application Complete- Onsite Needed.
03/31/2026	Inspection Completed On-site
03/31/2026	Inspection Completed-BCAL Full Compliance
03/31/2026	Recommend License Issuance
03/31/2026	SC-Recommend MI and DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The property at 3595 Winfield, Saginaw, MI, 48603, is owned by Paul Chaveriat (PD Homes LLC) and being leased by REM Michigan LLC, REM Michigan Winfield is located in the Township of Saginaw, Saginaw, County. REM Michigan Winfield is in a residential subdivision with neighbors nearby. REM Michigan Winfield is a single-story

ranch style house that was built on a basement. The home consists of 5 bedrooms, 2 full baths, kitchen, dining room, living room, den and common room. The home does not have a garage. The property includes a screened in porch that includes a front and a back yard. The facility has central air conditioning and public sewer and water. There is ample space for parking in the driveway and on the street.

The furnace and hot water heater 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. The furnace and water heater were inspected and determined by Nikolai's New Designs LLC, to be fully operational on February 16, 2026.

The home has two (2) separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceeded the 30-inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width. The bedrooms have the proper means of egress as required by R 400.725.

The electrical work was done in accordance with the National Electric Code. The home meets the environmental and interior finish requirements of rules R 400.717, R 400.719, and R 400.721.

The home has a public water and sewer system. The home has hardwired smoke detectors that are interconnected together. The smoke detectors also include a carbon monoxide detector combination. The home has fire extinguishers, which meets the requirements of R 400.723.

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

Bedroom #	Room Dimensions	Total Sq. Footage	Total Resident Beds
1	13' x 14'	182 sq. feet	2
2	10' x 16'5"	165 sq. feet	1
3	12' x 10'5"	126 sq. feet	1
4	13'5" x 9"	121.5 sq. feet	1
5	11'5" x 15'	172.5 sq. feet	1

The living, dining, and sitting room areas measure a total of 501 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Compliance with Rule 400.661, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were clean, neat, and met all applicable rules relating to environmental and fire safety requirements.

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 **six** (6) male or female adults whose diagnosis is developmentally disabled, physically disabled or mentally impaired, ages 18+, in the least restrictive environment possible. The facility will accept wheelchair users. 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. Residents will be referred from Community Mental Health Authority, hospitals, and nursing homes.

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 REM Michigan LLC, which is a non-profit established on 12/16/2024. 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.

The Board of Directors of REM Michigan LLC, has submitted documentation appointing Laura Hatfield-Smith as Licensee Designee and Administrator of the facility. A licensing record clearance request was completed with no convictions recorded for the licensee designee/administrator. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. The licensee designee/administrator has 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 or 3-staff-to-6 residents per shift during daytime hours and 1 or 2-staff-to-6 residents per shift during nighttime hours depending on the needs of the residents. All staff shall be awake during sleeping hours.

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.identogo.com) (Formerly L-1Enrollment, by Morpho Trust), and the related documents required to be maintained in each employee 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 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 file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all the documents contained within 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

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 and special certification to this AFC adult small group home (capacity 3-6).
--

Martin Gonzales

03/31/2026

Martin Gonzales Licensing Consultant	Date
---	------

Approved By:

Mary Holton

03/31/2026

Mary E. Holton Area Manager	Date
--------------------------------	------