



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING

MARIANNE UDOW
DIRECTOR

April 19, 2005

James Bowe
Trinity Continuing Care Services
P.O. Box 9185
Farmington Hills, MI 48333-9185

RE: Application #: AL740261122
The Village at Mercy Health Ctr 1st Floor
4170 24th Ave
Fort Gratiot, MI 48059

Dear Mr. Bowe:

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 20 is issued.
matter.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (586) 412-6802.

Sincerely,

Michael Swajanen, Licensing Consultant
Office of Children and Adult Licensing
Suite 301
16000 Hall Road
Clinton Township, MI 48038
(586) 412-6833

enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #: AL740261122

Applicant Name: Trinity Continuing Care Services

Applicant Address: # 400
39500 Orchard Hills Place
Novi, MI 48375

Applicant Telephone #: (248) 305-7910

Administrator/Licensee Designee: James Bowe, Designee

Name of Facility: The Village at Mercy Health Ctr 1st Floor

Facility Address: 4170 24th Ave
Fort Gratiot, MI 48059

Facility Telephone #: (810) 989-7440
08/26/2003

Application Date:

Capacity: 20

Program Type: AGED
PHYSICALLY HANDICAPPED
ALZHEIMERS

II. METHODOLOGY

08/26/2003	Enrollment
10/02/2003	Contact - Document Received Licensing file received from Central Office.
10/06/2003	Inspection Report Requested - Health
10/06/2003	Comment sent copy to CT
11/24/2003	Application Incomplete Letter Sent
01/12/2004	Inspection Completed-Env. Health : A
06/11/2004	Inspection Completed-Fire Safety : A
11/04/2004	Application Incomplete Letter Sent 11/4/04 Confirming letter sent to Jim Bowe requesting documentation/materials that are necessary to process this application.
02/01/2005	Application Incomplete Letter Sent
04/14/2005	Inspection Completed On-site
04/14/2005	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Village at Mercy Health Center #1 is a one-story structure barrier free structure that will provide adult foster care services to both ambulatory and non-ambulatory male and female adults. The first floor consists of a large entry foyer, recreation room, activity room, dining area, guest bedroom, laundry facilities, and seventeen bedrooms.

There are five different floor plans for the facilities bedrooms and are as follows:

1. Efficiency #1 contains 299.64 square feet and has a full bathroom.
2. Efficiency #2 contains 257.14 square feet and has a full bathroom.
3. The Efficiency #3 contains 311.89 square feet and has a full bathroom.
4. The two-bedroom has a living area that contains 247.39 square feet. Two bedrooms that contain respectively 181.90 square feet

plus a full bathroom, and 117.25 square feet plus a full bathroom located off of the living area.

5. A one bedroom that contains a living room with 210.22 square feet and a bedroom with 111.93 square feet and a full bathroom.

The bedrooms will be utilized as follows:

1. Bedroom # 129 is a one bedroom and will house one adult.
2. Bedroom # 127 is a one bedroom and will house two adults.
3. Bedroom # 125 is an efficiency #2 and will house one adult.
4. Bedroom # 123 is an efficiency # 2 and will house one adult.
5. Bedroom # 117 is an efficiency # 2 and will house one adult.
6. Bedroom # 115 is an efficiency #2 and will house one adult.
7. Bedroom # 113 is an efficiency #2 and will house one adult.
8. Bedroom # 111 is a two bedroom and will house two adults.
9. Bedroom # 109 is an efficiency #1 and will house one adult.
10. Bedroom # 107 is a one bedroom and will house one adult.
11. Bedroom # 105 is a one bedroom and will house one adult.
12. Bedroom # 104 is a one bedroom and will house one adult.
13. Bedroom # 106 is a one bedroom and will house one adult.
14. Bedroom # 108 is a one bedroom and will house two adults.
15. Bedroom # 110 is an efficiency #3 and will house one adult.
16. Bedroom # 114 is an efficiency #2 and will house one adult.
17. Bedroom # 116 is an efficiency #2 and will house one adult.

The first floor recreation room contains 351.94 square feet. The first floor activity room contains 550.06 square feet. The two room combined contain 902 square feet of indoor living space. Compliance to the requirements of rule 405.1 has been determined.

Full fire safety approval was granted on June 11, 2004, by Gary Connelly, Bureau of Construction Codes and Fire Safety. Jason Eaton, St. Clair County Health Department, granted full environmental approval. Zoning approval was granted on November 15, 2004, by Gerald Dawson, Zoning/Building Administrator, Charter Township of Fort Gratiot.

Program Description

The administrator for the facility is Christine Jones. Ms. Jones as submitted current medical documentation, tuberculin test results, good moral character verification, and documentation she is qualified to be the administrator for the programs outlined on the license application.

As previously indicated this facility will provide foster care services to both ambulatory and non-ambulatory adults who are aged, physically handicapped, and/or afflicted with

