

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



October 26, 2006

June Thompson Forest Glen Assisted Living, LLC Suite 200 3075 Orchard Vista Dr. Grand Rapids, MI 49546

RE: Application #: AL140280138

Forest Glen Assisted Living

29601 Amerihost Dr. Dowagiac, MI 49047

Dear Ms. Thompson:

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.

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 (269) 337-5066.

Sincerely,

Kelly Williams, Licensing Consultant Office of Children and Adult Licensing

Kelly Williams

322 E. Stockbridge Ave Kalamazoo, MI 49001 (269) 337-5274

enclosure

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

I. IDENTIFYING INFORMATION

License #: AL140280138

Applicant Name: Forest Glen Assisted Living, LLC

Applicant Address: Suite 200

3075 Orchard Vista Dr. Grand Rapids, MI 49546

Applicant Telephone #: (616) 464-1564

Administrator/Licensee Designee: June Thompson, Designee

Name of Facility: Forest Glen Assisted Living

Facility Address: 29601 Amerihost Dr.

Dowagiac, MI 49047

Facility Telephone #: (269) 684-5088

Application Date: 10/28/2005

Capacity: 20

Program Type: AGED

PHYSICALLY HANDICAPPED

II. METHODOLOGY

10/28/2005	Enrollment
11/02/2005	Inspection Report Requested - Fire
11/02/2005	Inspection Report Requested - Health 1009422
11/02/2005	File Transferred To Field Office Kalamazoo
12/01/2005	Application Incomplete Letter Sent
09/08/2006	Inspection Report Requested - Health 2nd request per Brian Lint
09/08/2006	Inspection Report Requested - Health
09/08/2006	Inspection Report Requested - Health
10/20/2006	Inspection Completed On-site
10/26/2006	Inspection Completed-Env. Health : A
10/26/2006	Inspection Completed-Fire Safety : A
10/26/2006	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This is a newly constructed, spacious single story facility. The facility is comprised of two resident bedroom wings of ten rooms each, a large dining/common use area, a sitting area, a commercial kitchen, a resident kitchenette, a laundry room, a hair salon, and a bath/shower/whirlpool room. There are two different types of resident bedrooms (some rooms include an additional living room-type area) and each have their own attached full bathroom. Some rooms additionally have a small kitchenette with microwave and mini-fridge. Rooms feature spacious closets and large windows. The licensee does have appropriate/required furnishings available for each resident, although has found that many residents prefer to bring their own furnishings. In those cases, the licensee will ensure that resident furnishings are in compliance with adult foster care licensing rules.

The Cass County Environmental Health Department issued approval of the facility on 10/3/06 (report received from licensee on 10/25/06) and the Office of Fire Safety issued final approval of the project on 10/16/06 (report received from licensee 10/25/06). The

facility is fully sprinkled and appropriate smoke alarms are installed. Zoning approval from the City of Dowagiac is on file. The city's building inspector issued the certificate of occupancy effective 10/18/06.

Leisure Living Management, Inc. who in turn leases the property to Forest Glen Assisted Living, LLC, holds the property deed. A copy of the lease agreement is on file.

B. Program Description

Forest Glen Assisted Living, LLC is the licensee. Forest Glen Assisted Living, LLC is composed of two other LLCs, those being Thornapple Investment Partners, LLC and Assured Senior Living Group, LLC. June Thompson is the licensee designee and current administrator. Ms. Thompson is the licensee designee for numerous facilities operated by Leisure Living Management or its affiliates. Once her record clearance is processed, the facility administrator will be changed to Rebecca Fear, who is a registered nurse. All Ms. Fear's medical and qualifying information is on file.

The licensee prefers to care for both men and women who are aged. Resident care will be provided by direct care staff who report to Ms. Fear. Direct care staff are trained in the required areas by Ms. Fear utilizing an in home curriculum that has been reviewed and approved by this consultant. An activities coordinator will provide resident activities both in and away from the facility.

The licensee has submitted an admission policy, discharge policy, and program statement that are in substantial compliance with rule requirements. I have reviewed the Employee Handbook and other facility materials that meet requirements for a personnel policy. Job descriptions, staffing patterns, financial information, resident care practices, and organizational information have all been received and reviewed and found to be in compliance with relevant rules.

C. Rule/Statutory Violations

All rule noncompliances were corrected prior to license issuance.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home (capacity 20).

Keely Williams	
	10/25/06
Kelly Williams	Date
Licensing Consultant	
Approved By:	
Gregory V. Corrigan	10/26/06
Gregory V. Corrigan Area Manager	Date