

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



ISMAEL AHMED DIRECTOR

JENNIFER M. GRANHOLM GOVERNOR

September 26, 2008

June Thompson Grace Haven Assisted Living, LLC Suite 200 3075 Orchard Vista Dr, SE Grand Rapids, MI 49546

> RE: Application #: AL190294006 Grace Haven Assisted Living-Supportive Care 1507 Glastonbury Dr. St. Johns, MI 48879

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 (517) 335-6232.

Sincerely,

Dawn N. Timm, Licensing Consultant Bureau of Children and Adult Licensing 7109 W. Saginaw P.O. Box 30650 Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL190294006
Applicant Name:	Grace Haven Assisted Living, LLC
Applicant Address:	Suite 200 3075 Orchard Vista Dr, SE Grand Rapids, MI 49546
Applicant Telephone #:	(616) 464-1564
Licensee Designee:	June Thompson
Administrator:	Tim Kryzs
Name of Facility:	Grace Haven Assisted Living-Supportive Care
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Facility Address:	1507 Glastonbury Dr. St. Johns, MI 48879
Facility Address: Facility Telephone #:	•
-	St. Johns, MI 48879
Facility Telephone #:	St. Johns, MI 48879 989-224-1650

II. METHODOLOGY

12/10/2007	Enrollment
12/12/2007	Application Incomplete Letter Sent
12/18/2007	Contact - Document Received
12/19/2007	Application Complete/On-site Needed
01/11/2008	Application Incomplete Letter Sent
04/30/2008	Inspection Completed-Fire Safety : D
06/19/2008	Inspection Report Requested - Health
06/24/2008	Inspection Completed-Fire Safety : A
07/02/2008	Inspection Completed-Env. Health : A
08/21/2008	Inspection Completed On-site
08/22/2008	Inspection Completed On-site
08/22/2008	Inspection Completed-BFS Full Compliance
08/22/2008	Telephone call to facility- documents received
08/22/2008	Telephone call to June Thompson

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single story structure built on a cement slab located in a small residential area. It has vinyl siding exterior with brick along the lower half of the building. The yard surrounding the facility is nicely landscaped with a porch area located off of the main dining room. The porch area overlooks a shallow stream located at the back of the facility. The stream is formed through rain drain-off flowing into this area. There is also adequate parking for staff and visitors. This facility is connected to Grace Haven Assisted Living- Specialized Care (AL190294037) via a corridor. The facility is accessible to persons with impaired mobility.

The building consists of:

- 1. Main dining room connected with a sitting room (860 square feet)
- 2. Beverage area (directly off of the main dining room)
- 3. Lobby area
- 4. Lounge/TV area (measuring 374 square feet)

- 5. Administration office
- 6. Therapy room
- 7. Business office
- 8. Large commercial kitchen
- 9. Three storage areas
- 10. Three mechanical rooms
- 11. Laundry room
- 12. Staff lounge
- 13. Activity/Multi-purpose room with full kitchen
- 14. Nurses station with medication room
- 15. Full bathroom with shower and therapeutic whirlpool tub
- 16. Four studio bedrooms (each measuring 277 Square feet)
 - a. Bay window
 - b. Private bathroom with shower
- 17. Twelve one-bedroom units (each measuring 516 square feet)
 - a. Bay window
 - b. Private bathroom with shower
 - c. Kitchenette (microwave, sink, small refrigerator & cupboards)
- 18. Four one-bedroom deluxe (each measuring 576 square feet)
 - a. Bay window
 - b. Private bathroom with shower
 - c. Walk-in closet
 - d. Kitchenette (microwave, sink, small refrigerator & cupboards)

The total living space measured over 1100 square feet which is more than adequate for 20 residents. Approximately 50% of the resident bedrooms will be left unfurnished to provide residents the opportunity to furnish their living space with their own belongings. A variance was requested and approved for this on August 25, 2008. The approved variance requires the facility to provide bedroom furniture for the unfurnished rooms upon the request of a resident and that resident-provided furniture meet licensing rule requirements.

All construction is new and has been inspected and approved by local and state inspectors. A Certificate of Occupancy was given by the City of St. Johns, Community Development Department, on June 25, 2008. On May 2, 1999, the City of St. Johns rezoned the parcel of land to be used as a High Density Residential.

The Bureau of Fire Safety gave the facility an "A" rating on 06/24/2008, which means that the facility has met all the applicable codes and regulations for fire safety, including smoke detectors and a sprinkling system. The facility utilizes the City of St. Johns municipal water supply and sewer system. The Clinton County Health Department gave the facility an "A" rating on 07/02/2008.

B. Program Description

The facility will accept male and female residents ages 60 years and over with physical disabilities and/or ailments who are in need of assistance with activities of daily living, hospice, physical therapy, occupational therapy, respite, and rehabilitative care.

Grace Haven Assisted Living, LLC was incorporated on 11/14/2007. Three owners have interest in Grace Haven Assisted Living, LLC and have appointed June Thompson to be the licensee designee. Mrs. Thompson has been approved as the licensee designee multiple times in the past and has the credentials to meet the requirements. A current licensing record clearance, medical clearance and TB test are on file for Mrs. Thompson.

Timothy Krzys is the administrator for Grace Haven Assisted Living- Supportive Care. He has submitted documentation of his qualifications and competencies and meets the licensing rule requirements. A licensing record clearance, medical clearance and TB test for Mr. Krzys are current and complete.

This licensing consultant reviewed the personnel policies, job descriptions, admissions/discharge policy, financial projections, staff files, paperwork required for resident files, emergency plans, staff training modules and program description. The licensee designee has considerable experience with required AFC licensing records and documentation.

The facility plans to have no less than one direct care staff per 15 residents during the day and afternoon shift and one staff person per 20 residents on the midnight shift. Staffing patterns will be adjusted to ensure the proper safety, supervision and care of the residents. The administrator, Tim Krzys, is employed as a full time staff person and has his Master's Degree in Nursing. He will also be available on-call during his off hours.

C. Rule/Statutory Violations

As of 08/22/2008, the facility was found to be in full compliance with the licensing act and applicable administrative rules.

IV. RECOMMENDATION

I recommend the issuance of a temporary license to this AFC adult large group home for up to 20 residents aged 60 and over. The term of the temporary license will be ore a six month period starting 08/25/2008.

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08/25/2008

Dawn N. Timm Licensing Consultant

Date

Approved By:

Betey Montgomery 9/9/08

Betsy Montgomery Area Manager Date