



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



JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

October 12, 2009

Joanne Stutesman
Evangelical Homes of Michigan
18000 Coyle
Detroit, MI 48235

RE: Application #: AM810298263
Memory Support Center @ Brecon Village #2
101 Brecon Drive
Saline, MI 48176

Dear Ms. Stutesman:

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 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,

Chuck Wisman, Licensing Consultant
Bureau of Children and Adult Licensing
301 E. Louis Glick Hwy
Jackson, MI 49201
(517) 780-7548

cc: Adult Services, Washtenaw Co. DHS

enclosure

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

I. IDENTIFYING INFORMATION

License #: AM810298263

Applicant Name: Evangelical Homes of Michigan

Applicant Address: 18000 Coyle
Detroit, MI 48235

Applicant Telephone #: (313) 836-5306

Administrator/Licensee Designee: Joanne Stutesman, Designee/Administrator

Name of Facility: Memory Support Center @ Brecon Village #2

Facility Address: 101 Brecon Drive
Saline, MI 48176

Facility Telephone #: (734) 429-1155

Application Date: 09/15/2008

Capacity: 12

Program Type: ALZHEIMERS

II. METHODOLOGY

Licensing for this facility is based upon Public Act 218 and the administrative rules for small (medium) group homes effective May 24, 1994.

This investigation included a review of the application forms and supporting documents, processed licensing record and medical clearances, applicant financial reports, fire safety inspection report, environmental inspection report, admission and program policies, written notices of corrective action, and on-site licensing inspections. Significant dates of contact and inspections were as follows,

09/15/2008	Enrollment
09/29/2008	Application Incomplete Letter Sent
10/21/2008	Contact – Document Received med clearance
11/20/2008	Contact – Telephone call made Licensee designee confirmed each facility contained a kitchen. Application incomplete letter was explained to licensee designee.
11/24/2008	Application Incomplete Letter Sent
12/23/2008	Contact – Document Received Fire Safety Plan Disapproval
01/14/2009	Contact – Document Received Final fire safety plan report
04/17/2009	Contact – Telephone call received Applicant requested families be allowed to provide own beds. Letter requested from applicant attesting to this and that the applicant provide a bed if the resident has no bed
08/25/2009	Contact – Document Received A box of documentation was delivered this date from the licensee ostensibly in response to the application incomplete letter
08/26/2009	Contact – Telephone call made Discussed current facility status, health department requirements, and inspection process with C.E.O.
08/26/2009	Inspection Report Requested – Health
09/24/2009	Inspection Completed-Environmental Health : C
10/01/2009	Inspection Completed On-site Reviewed documentation, documentation submitted, and physical

	plant inspection completed
10/01/2009	Inspection Completed-Fire Safety : A Verbal report in face-to-face with inspector at facility
10/07/2009	Inspection Report Requested – Health Re-inspection request
10/08/2009	Contact – Document Received Copy of variance request, revised Written Assessment Plan & Resident Care Agreement
10/08/2009	Inspection Completed – Environmental: A
10/09/2009	Inspection Completed On-site Final on-site inspection

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

1. Description:

The facility is a large one-story complex in the design of a spoked wheel with each of the three spokes as individually licensed facilities emanating from an adjoining central complex/hub. The individually licensed facilities are separated from the common hub by a 2-hour fire separation. A detailed one-page floor plan is contained in each facility licensing record. The facility complex is entered via the central hub entrance. A copy of the actual architectural plans is contained in the corporate licensing record.

The adult foster care licensed complex is located on an open 32 acre campus that also includes a retirement community, retirement condominiums, independent living apartments, and assisted living apartments.

The central hub is not specifically licensed to any one facility but provides the following for resident use:

Activity rooms	Chapel
Spa	Commercial kitchen
Salon	Family visitation room
Resource Center/Library	Market cafe
Administrative Offices	Medical clinic/office

The northeast end of the central hub also contains an “adult day area” providing a three season room, dining area, kitchen, family room, etc. This area is a community support program and not for the residents of the licensed facilities.

The floor plan for each licensed facility is almost exactly the same. Each facility is entered via a 2-hour floor separation doorway from the central hub. This doorway opens to a corridor. The corridor then opens to the facility dining area. Off the dining area is a full kitchen. The dining area contains an electric fireplace and opens to a large three-season room. Off the dining area is the facility living area that also contains an electric fireplace. Each three-season room contains an entranceway to a large very well landscaped courtyard located between each facility and the exterior of #3. Each courtyard contains perimeter fencing thus preventing any resident inadvertently leaving the facility via the courtyard.

The resident bedrooms consist of two separate floor plans titled the “Single Occupancy Suite” (capacity of 1 resident), and the “Companion Suite” where the bedroom capacity would be 2 residents. A floor plan for each type of bedroom is contained in each facility licensing record. The single occupancy suite measures approximately 300 square feet. The companion suite measures approximately 500 square feet.

Each bedroom contains a full bathroom and a small efficiency style living area. According to licensee literature, each bedroom contains “a non-intrusive sensor system (that) detects movement and automatically reports activities to The Memory Support Center staff via silent paging system.”

Although the bedrooms are not furnished, the licensee will provide furnishings if the resident is not providing their own furnishings. In this type of setting, most prospective residents provide their own personal furnishings. The licensee has submitted a letter affirming that bedrooms will not be occupied until fully furnished according to the licensing rules. A copy of the letter is retained in the licensing corporation record.

According to the licensee designee, the facility will not use bedrails; however, the use of bedrails is contained in the facility program statement. All resident beds supplied by the licensee are hydraulically operated allowing the beds to be lowered near the floor for safety purposes. According to the licensee designee, a number of residents are opting for this type of bed rather than provide their own bed.

All necessary plumbing, electrical, heating, and cooling repairs are completed by in-house personnel.

Each bedroom contains a window located between the bedroom and the bedroom corridor adjacent to the bedroom door. This window was originally constructed to allow staff to monitor residents without opening the bedroom door when the individual resident monitoring system alerted staff. Due to administrative licensing rule requirements regarding resident privacy, the licensee has installed louvered blinds on

both the inside and outside of the windows in order to protect that privacy. The licensee has also submitted a variance to allow the presence of such windows.

2. Sanitation:

The facility is served by a public water and sewer system operated by the City of Saline.

Each bedroom contains its own full bathroom. The shower is simply a shower head and controls mounted on a tiled wall of the bathroom. The bathroom/shower is an open design (European style) with no separate walls or doors for the shower. The floor is sloped in such a way to allow full wheelchair use and the floor slope of the bathroom allows all water from the shower to drain into a floor drain.

On October 8, 2009, the Washtenaw County Department of Environment and Infrastructure Services completed a re-inspection of the facility and subsequently submitted a statement verifying that the facility is in full compliance with all environmental rule requirements.

Each facility contains its own full service kitchen located off the dining area. The kitchen contains all modern commercial style stainless steel appliances. This includes a commercial style dish washer, built-in wall ovens, cook stove with oven, microwave, and granite counter tops. The counter top is also wheel chair accessible to allow residents confined to wheel chairs to assist in food preparation.

The complex also contains a large fully commercial kitchen located within the central hub. According to the licensee designee food will also be prepared by an additional commercial kitchen located off-site but within the complex grounds.

Garbage service is provided weekly by Waste Management. A copy of the contract is contained in the licensing corporation record.

3. Fire Safety:

The facility is protected throughout by a sprinkler system and a hard-wired smoke detection system. Although the exit doors contain 15 second delay opening mechanisms, the doors automatically unlock when the fire alarm sounds.

On October 1, 2009, the Office of Fire Safety provided the facility a full approval fire safety certification via a verbal statement by the respective inspector to licensing.

The entire complex has a stand alone power generator capable of operating the entire complex during a public power outage.

The facility will exit residents into the central hub for fire drills during inclement weather. Each facility and the central hub have separately interconnected smoke detection systems; therefore, if an alarm is sounds, it only sounds in that particular facility/area.

Each facility is separated from the central hub by a 2 hour fire separation. On October 1, 2009, the assigned fire safety inspector stated that the evacuation of residents into the central hub area during inclement weather was acceptable due to the 2-hour fire separation and the separate smoke alarm systems.

4. Zoning:

On August 25, 2009, the licensee submitted a copy of May 19, 2008, correspondence received from the City of Saline Planning Commission approving the final site plan “for the construction of the 42,379 square foot of new structures consisting of cottages, memory care center and storage buildings.”

A copy of documentation verifying ownership of the facility is contained in the corporation licensing record.

B. Program Description

1. Administrative structure & capability:

According to corporate documentation the licensee, Evangelical Homes of Michigan, is a domestic non-profit corporation that was first incorporated on November 24, 1894 as a social service provider. Denise B. Rabidoux is the current president and chief executive officer of the corporation. Joanne Stutesman is the licensee designee and administrator for the licensed facility. A letter verifying her appointment is contained in the corporate licensing record. According to the Articles of Incorporation amended on June 23, 1975,

“The purposes for which the corporation is organized are as follows: This corporation is organized exclusively for religious, charitable and educational purposes, especially to establish and maintain facilities for housing, caring, nursing and educating children, aged, infirm or other needy persons, and to establish and maintain other institutions of charity, and to accomplish such purposes, to solicit, secure and receive funds, gifts and support.”

Corporate documentation dating to November 24, 1894, is contained in the licensing record. Additional documentation is maintained on the Department of Labor and Economic Growth website and accessed via the 734278 identification number.

According to the corporate website (www.evangelicalhomes.org), the corporation also operates a variety of other housing and service entities located throughout the State of Michigan including skilled nursing facilities, retirement communities, community outreach services, home help services, and wellness programs. The corporation has no other licensed adult foster care facilities other than those constructed within this particular complex.

According to submitted documentation, facility food service will be provided by an outside contractor, Morrison Dining Services. This includes all food preparation,

support services, and serving. A copy of the contract and Morrison advertising literature is maintained in the licensing corporation binder. Since the Morrison employees are under contract with the licensee and those same employees will have continuing, direct contact with residents, the licensee has also established on-site employee records pursuant to licensing requirements. Required fingerprinting will also be conducted for those same employees subsequent to original license issuance. The licensee also submitted a three-ring binder containing all licensee food service policies.

According to its website (www.iammorison.com/SeniorLiving),

“Morrison Senior Living, a member of the Compass Group, is the nations’ only food service company exclusively dedicated to providing food, nutrition, and dining services to senior living communities. Our Atlanta-based company serves approximately 370 senior living clients in 41 states including some of the largest and most prominent senior living communities in the United States”

According to the Compass Group website, “Compass Group has become the global leader in contract foodservice and hospitality...”

A copy of the facility organization chart is located in the license record.

Each licensed facility will be directly supervised by a “resident services coordinator” who reports to the licensee designee/administrator.

2. Qualifications and competencies:

Denise Rabidoux, as the C.E.O. of the corporation, first joined the licensee corporation in 1992 as its director of operations according to her submitted qualifications. According to Ms. Rabidoux she also holds a Bachelor of Science Degree in Nursing.

Joanne Stutesman is the licensee designee and administrator for all three facilities. According to her resume, she completed a Bachelor of Arts degree from Concordia College, and she has over thirty years experience in long term care services of which the majority was with Evangelical Homes. She is also licensed as a nursing home administrator, and she has submitted verification of completed licensing required training including training in food service. Verification of her completion of numerous continuing education classes and certifications regarding Alzheimer’s disease is contained in the licensing record.

According to the licensee’s submitted documentation, all staff will complete the following training over and above the licensing required training:

“Within 60 days of employment all staff receive training in the *Best Friends Approach to Alzheimer’s Care* and complete the *Dementia 101* course developed by Evangelical Homes of Michigan and Dr. Shelly Weaverdyck. Direct care staff will complete basic nutrition and food handling training within 30 days of

employment and the *Serve Safe* program presented by Morrison Dining Services within 90 days of employment. Within six months of employment all direct care staff will begin the *Advanced Dementia Specialist* program (18 hour program) developed by Evangelical Homes of Michigan and Dr. Shelly Weaverdyck. Staff will also receive training within 30 days of employment on the use of the *Life Story* to enhance interactions with the resident.”

The licensee submitted a detailed three-day agenda describing direct care staff orientation. A copy of the agenda is contained in the licensing record.

The requirement that all staff considered as part of the required staff/resident ratio must be fully trained pursuant to the licensing rules was reviewed with the licensee designee.

3. Program Information:

According to the licensee’s program goals (contained in the program statement), the licensee “is to become a partner in care with individual’s living with dementia or Alzheimer’s disease, and their caregivers. The Memory Support Center will provide a social model of care to support the person with memory loss and their loved ones. The Memory Support Center will offer a variety of innovative programs designed to enhance an individual’s abilities and offer opportunities for continued meaningful relationships with family members and friends.”

According to the licensee’s mission statement,

“It is the mission of the Evangelical Homes of Michigan, a Health and Human Service Ministry related to the United Church of Christ, to provide health and housing services to persons who are elderly, in a manner which respects their rights, dignity, and worth as children of God and to render those services with compassion and patience in accordance with the highest professional and ethical standards.”

The facility will exclusively admit only males or females who have a diagnosis of Alzheimer’s disease.

The licensee has installed a sophisticated, computer driven monitoring system to assist in the protection and supervision of residents. This system consists of very small, unobtrusive motion detectors located in each bedroom doorway, bedroom bath and the bedroom itself. An additional motion detector can be added to each bed as necessary. The location information regarding each resident is automatically fed into a centralized computer. Each resident has a profile within the computer and if the resident’s location or motion doesn’t fit that particular resident’s profile, a message is sent to staff via a small pocket/handheld electronic device that will report the location of each resident in real time. If a resident remains too long out of bed at night, too long in the bathroom, etc. pursuant to their particular profile, the device will report this information directly to

staff via a screen message on the device. According to the licensee designee, this system has successfully operated in their skilled nursing facility located approximately 3 miles from these facilities.

The licensee has incorporated individual resident and/or designated representative signed authorization for the use of the monitoring system into each resident's Resident Care Agreement. The monitoring system is also described in each Written Assessment Plan with a check-off for acknowledgement of the system by each resident or designated representative.

The only video monitoring is located at the entrance to the complex and at the service entrance for general security purposes.

The medications of each resident will be secured in each resident's bathroom in a locked wall cabinet. The licensee has no standard medication delivery system such as bubble packs, prescription bottles, etc. Medications are delivered to the facility in whatever manner each resident's pharmacy supplies those medications. The licensee does employ a nurse to monitor resident medical needs and medication issues. Administrative rules of particular importance were reviewed with the licensee designee on October 1, 2009, during the on-site inspection.

The licensee provided a copy of the refund policy and a copy is retained in the licensing corporate record. According to the policy as explained by the C.E.O., a prorated refund is provided in all circumstances.

4. Facility and employee records:

Facility, resident and employee records will be maintained within each separate facility and the central hub.

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 and/or resident information. The licensing consultant provided technical assistance to the applicant on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website and the toll free number (1-877-718-5542) or via e-mail at ocalcheck@michigan.gov.

5. Resident rights:

The licensee has incorporated a copy of the resident rights into facility policies.

The facility also has a policy of a strict prohibition on allowing smoking or tobacco products on campus by anyone including residents and staff. A copy of the policy is included in the licensing corporation record.

5. Conclusion:

Compliance with the physical plant rules has been determined. All items cited for correction have been verified as corrected in writing or by inspection. A variance request has been submitted related to the windows located next to the door of each residential suite, and approval of the variance is contingent upon compliance with the conditions specified by the Bureau. Compliance with Quality of Care rules will be assessed during the period of temporary licensing via an interim inspection.

IV. RECOMMENDATION

It is recommended that a temporary license be issued. The terms of the license will permit the licensee to provide care for up to 12 male or female adults who are diagnosed with Alzheimer's disease.

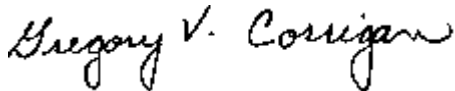


October 12, 2009

Chuck Wisman
Licensing Consultant

Date

Approved By:



October 12, 2009

Gregory V. Corrigan
Area Manager

Date