

# State of Michigan DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



March 29, 2011

Mayra Ramos ResCare Premier, Inc. PO Box 100 Milan, MI 48160

RE: Application #: AS730311060

ResCare Premier McCarty

3475 Hospital Road Saginaw, MI 48603

Dear Ms. Ramos:

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 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 (989) 758-2717.

Sincerely,

Diane L Stier, Licensing Consultant Bureau of Children and Adult Licensing 1919 Parkland Drive

Jane F. Stier

Mt. Pleasant, MI 48858-8010

(989) 772-8479

**Enclosure** 

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

## I. IDENTIFYING INFORMATION

**License #:** AS730311060

**Applicant Name:** ResCare Premier, Inc.

**Applicant Address:** 9901 Linn Station Road

Louisville, KY 40223

**Applicant Telephone #:** (800) 866-0860

Administrator/Licensee Designee: Mayra Ramos, Designee

Name of Facility: ResCare Premier McCarty

Facility Address: 3475 Hospital Road

Saginaw, MI 48603

Facility Telephone #:

10/08/2010

**Application Date:** 

Capacity: 6

Program Type: MENTALLY ILL

DEVELOPMENTALLY DISABLED
PHYSICALLY HANDICAPPED

TRAUMATICALLY BRAIN INJURED

#### II. METHODOLOGY

10/08/2010	Enrollment
11/16/2010	Contact - Document Sent Rule & ACT Books
11/16/2010	File Transferred To Field Office Saginaw
01/18/2011	Contact - Document Received Not ready for initial inspection. Will contact in early February.
01/18/2011	Application Incomplete Letter Sent
03/22/2011	Application Complete/On-site Needed
03/25/2011	Inspection Completed On-site
03/25/2011	Inspection Completed-BCAL Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

# A. Physical Description of Facility

ResCare Premier McCarty is located on the northwest outskirts of Saginaw on Hospital Road just south of McCarty road. The building was previously used as a children's foster home and a day care. The wide driveway, leading from the attached garage, with large apron provides sufficient parking for staff and visitors. The home has a fenced yard, currently separated from the rear of the house. [ResCare plans to attach the fence to the house during the temporary license period, to provide a large back yard for resident recreation.] A full basement has a separate egress stairwell leading directly to the outside. Since the furnaces are in approved furnace rooms (see below) and there are two independent exits, the basement may be used for regular resident activities.

The two furnaces (inspected on file) and hot water heaters are located in the basement in two rooms that are constructed of material that has a 1-hour-fire-resistance rating with a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. Four fire extinguishers are in place in the home. This home also has a fire suppression (sprinkler) system that was inspected and approved on 3/18/11.

The home has five bedrooms, conference room with attached office are, medication/staff room, kitchen, utility room, small sitting ("Florida") room, dining/living

area, two full baths for resident use, and one half bath for staff use. The living/dining area (562 sq. ft.) and sitting room (115 sq. ft.) provide more than the required 35 sq. ft. of living space for each resident. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11.25' x 13.8'	155 sq. ft.	1
2	10.9' x 13.8'	150 sq. ft.	1
3	10.9' x 13.8'	150 sq. ft.	1
4	11.4' x 13.8'	157 sq. ft.	1
5	16.1' x 11.75'	189 sq. ft.	2

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 ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible. 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 Saginaw County Community Mental Health Authority.

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 RESCARE PREMIER, Inc., which is a "For Profit Corporation," was established in Michigan, on 11/19/96. 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.

A licensing record clearance request was completed with no lien convictions recorded for Mayra Ramos, the licensee designee and administrator. Ms. Ramos submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results.

Ms. Ramos has previously submitted documentation to satisfy the qualifications and training requirements identified in the administrative group home rules, as has been serving as licensee designee and administrator in ResCare facilities in Michigan for many years.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of two staff –to- six residents per shift. 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 <u>regular</u>, <u>ongoing</u>, "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 (<u>www.miltcpartnership.org</u>), L-1 Identity Solutions<sup>TM</sup> (formerly Identix ®), and the related documents required to be maintained in each employees 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 of 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

1A · - 1

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

## VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small group home (capacity 1 - 6).

Whene J. Steer	March 29, 2011
Diane L Stier Licensing Consultant	Date
Approved By:	03/30/2011
Deborah Clark Area Manager	Date