

RICK SNYDER GOVERNOR State of Michigan DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN DIRECTOR

June 30, 2011

Janine Tucker-Kummer Pleasant Lake Lodge, Inc. 2085 S. 33 1/2 Mile Rd. Cadillac, MI 49601

> RE: Application #: AL830309090 Enchanted Acres 2035 S. 33 1/2 Mile Road Cadillac, MI 49601

Dear Ms. Tucker-Kummer:

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 (231) 922-5309.

Sincerely,

Brene O Vasier

Bruce A. Messer, Licensing Consultant Bureau of Children and Adult Licensing Suite 11 701 S. Elmwood Traverse City, MI 49684 (231) 922-5470

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL830309090	
Applicant Name:	Pleasant Lake Lodge, Inc.	
Applicant Address:	2085 S. 33 1/2 Mile Rd. Cadillac, MI 49601	
Applicant Telephone #:	(231) 920-9993	
Licensee Designee:	Janine Tucker-Kummer	
Administrator:	Rebecca Yonkman	
Name of Facility:	Enchanted Acres	
Facility Address:	2035 S. 33 1/2 Mile Road Cadillac, MI 49601	
Facility Telephone #:	(231) 775-7366	
Application Date:	04/28/2010	
Capacity:	20	
Program Type:	AGED MENTALLY ILL	

II. METHODOLOGY

04/28/2010	Enrollment
06/28/2010	Application Incomplete Letter Sent
11/04/2010	Contact - Document Received BFS Plan Review / Approved with 8 contingencies
06/07/2011	Inspection Completed On-site
06/08/2011	Inspection Report Requested - Health
06/10/2011	Inspection Completed-Fire Safety : D
06/14/2011	Inspection Completed-Env. Health : A
06/21/2011	Application Complete/On-site Needed
06/21/2011	Inspection Completed On-site
06/21/2011	Inspection Completed-BCAL Full Compliance
06/23/2011	Inspection Completed-Fire Safety : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Enchanted Acres Adult Foster Care Home is a large expansive two-story facility of new construction. It is situated in a peaceful area north of the city of Cadillac in Wexford County. The surrounding area is mostly woodlands interspersed with small lakes and streams. Medical and hospitalization services, mental health and social services agencies are all located in the nearby city of Cadillac. Shopping, recreation, religious and social activities are all found in Cadillac.

The home consists of two levels: each level contains a large sitting area, three double resident bedrooms, four single resident bedrooms and two full bathrooms. A large kitchen and dining room is located on the upper level, as are the laundry facilities. Attached to the facility, but separated by required fire barriers, is living space for a live-in staff member. Video monitors are located on each level in the main sitting areas and also down the hallway.

The furnace and hot water heater is located on the lower level in a room that is constructed of material that has a 1-hour-fire-resistance rating, has a 1-3/4 inch sold core door equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwired smoke detection

system, with battery backup, which was installed by a licensed electrician and is fully operational. The facility has a fire protection "sprinkler" system throughout the building.

On June 23, 2011, the home was inspected by the Bureau of Fire Services. An "Approved" fire safety certification was issued.

The facility has private water and septic systems. On June 14, 2011, the home was inspected by the District Health Department #10, who determined that the home is in substantial compliance with applicable rules pertaining to environmental health, water supply and sewage disposal.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1-6	14'X10'6"	147	2 each (12 total beds)
7-10	11'6"X8'6"	90	1each (4 total beds)
11-14	11'3"X8'6"	88	1 each (4 total beds)

The living, dining, and sitting room areas measure a total of 1,402 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate twenty (20) 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 20 male or female ambulatory adults who are aged or who are diagnosed with a mental illness in the least restrictive environment possible. The program for the mentally ill residents will include the development of skills related to social interaction, personal hygiene, personal adjustment, and public safety. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Programs for the aged residents will include recreational activities, community interaction, health and fitness.

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 libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is Pleasant Lake Lodge, Inc., which is a "For Profit Corporation" and was established in Michigan, on February 27, 2009. 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.

The Board of Directors of Pleasant Lake Lodge, Inc. has submitted documentation appointing Janine Tucker-Kummer as licensee designee for this facility and Rebecca Yonkman as the administrator of the facility.

A criminal history background check was conducted for the applicant (or Licensee Designee) and administrator. They have been determined to be of good moral character. The applicant (Licensee Designee) and administrator submitted a statement from a physician documenting their good health and current negative TB-tine results.

The applicant has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 2 staff –to- 20 residents per shift during awake hours and one staff –to-20 residents during sleeping hours. All staff shall be awake during sleeping hours.

The applicant acknowledged that at no time will this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facilities staff-to-resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledges an understanding of the training suitability 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 regular, ongoing, "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 (www.miltcpartnership.org), 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 good moral character, medical and training 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 the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges their responsibility to obtain the required written assessment, written assessment plan, resident care agreement, and health care appraisal 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.

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 an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-Day discharge written notice to a resident as well as when a resident can be discharged before the issuance of a 30-Day written discharge notice.

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 accidents and incidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with 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 that a separate *Resident Funds Part II (BCAL-2319)* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

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

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).

Brene Of Jessen June 29, 2011

Bruce A. Messer Licensing Consultant

Date

Approved By:

Betey Montgomery 6/30/11

Betsy Montgomery Area Manager

Date