



RICK SNYDER  
GOVERNOR

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



MAURA D. CORRIGAN  
DIRECTOR

July 19, 2011

Pamela Wicks  
Lifehouse Grand Blanc Operations, LLC  
6140 28th St. SE  
Grand Rapids, MI 49546

RE: Application #: AL250290707  
Prestige Pointe II  
4131 Cook Rd  
Grand Blanc, MI 48439

Dear Ms. Wicks:

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 (810) 787-7031.

Sincerely,

Crecendra Brown, Licensing Consultant  
Bureau of Children and Adult Licensing  
Suite 110  
1388 W. Bristol Rd.  
Flint, MI 48507  
(810) 787-7035

Enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL250290707
<b>Applicant Name:</b>	Lifehouse Grand Blanc Operations, LLC
<b>Applicant Address:</b>	6140 28th St. SE Grand Rapids, MI 49546
<b>Applicant Telephone #:</b>	(616) 464-6122
<b>Administrator/Licensee Designee:</b>	Natalie Smith, Administrator Pamela Wicks, Designee
<b>Name of Facility:</b>	Prestige Pointe II
<b>Facility Address:</b>	4131 Cook Rd Grand Blanc, MI 48439
<b>Facility Telephone #:</b>	(810) 695-9796
<b>Application Date:</b>	06/01/2007
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED ALZHEIMERS PHYSICALLY HANDICAPPED

## II. METHODOLOGY

06/01/2007	Enrollment
06/06/2007	Application Incomplete Letter Sent items 19 and 20
07/02/2007	Contact - Document Received completed application items, 1326 Patti Matejewski and Louis Andrioti
07/06/2007	Inspection Report Requested - Fire Change of Ownership
07/06/2007	Inspection Report Requested - Health
07/06/2007	Lic. Unit file referred for criminal history review SC Louis Andrioti
07/18/2007	Lic. Unit received criminal history file from review
07/18/2007	Application Complete/On-site Needed Flint
07/18/2007	File Transferred To Field Office Flint
07/26/2007	Inspection Completed-Env. Health: A
07/27/2007	Application Incomplete Letter Sent
05/15/2009	Contact - Document Received
05/20/2009	Application Incomplete Letter Sent
06/02/2009	Inspection Report Requested - Health
07/17/2009	Inspection Report Requested - Fire applicant lost the 1712 requesting plan review.
07/21/2009	Contact - Document Sent Plan Review Paperwork sent to Pam Wicks
09/10/2009	Contact - Telephone call made PC to Pam Wicks - Need Shop drawings of alarm and sprinkler completed

03/24/2011	Inspection Report Requested – Health
03/24/2011	Inspection Completed On-site
07/06/2011	Inspection Completed On-site

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

Prestige Pointe II is located at 4131 Cook Road, Grand Blanc, Michigan 48439 in Genesee County. The physical plant is a single level structure with no basement. Construction is frame with brick and cedar siding exterior. It is situated in an urban residential neighborhood. Next door to this facility is a similar structure, also a proposed adult foster care large group home. The facility has 20 single occupancy resident bedrooms. There is a half bathroom located between every two resident bedrooms. In addition, there are two full bathrooms with bathing facilities for residents. The facility has a spacious living room and a spacious dining room. There is a large kitchen with commercial equipment. There are laundry facilities, a staff bathroom, staff offices, a staff lounge and a medication room. There is also a room that is utilized by a beautician who provides contractual services. The furnace and hot water heater are in an approved enclosure on the same level. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational.

The facility has a public water and sewer system. The facility is also connected to the municipal water supply. An environmental inspection by the Genesee County Health Department was conducted on 04/07/2011. The facility was determined to be in substantial compliance with all applicable licensing rules pertaining to environmental health.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
Bedroom 1	11' x 9'7"	107	1
Bedroom 2	11' x 10'3"	113	1
Bedroom 3	11' x 9'7"	107	1
Bedroom 4	10' x 10'5"	105	1
Bedroom 5	11' x 9'7"	107	1
Bedroom 6	11' x 10'3"	113	1
Bedroom 7	10' x 10'5"	105	1
Bedroom 8	11' x 10'3"	113	1

Bedroom 9	11' x 10'3"	113	1
Bedroom 10	11' x 10'3"	113	1
Bedroom 11	11' x 9'7"	107	1
Bedroom 12	10' x 10'5"	105	1
Bedroom 13	11' x 10'3"	113	1
Bedroom 14	9' x 12'	108	1
Bedroom 15	11' x 10'	111	1
Bedroom 16	11' x 10'	111	1
Bedroom 17	11' x 10'	111	1
Bedroom 18	11' x 10'	111	1
Bedroom 19	11' x 10'	111	1
Bedroom 20	11' x 10'	111	1

The living, dining, and sitting room areas measure a total of 921 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The facility has four separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30 inch minimum width requirement. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

The bedrooms have the proper means of egress as required by R 400.15508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R400.15401, R400.15402, R400.15403, R400.15405, R400.15406 and R400.15407.

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**

The applicant, Lifehouse Grand Blanc Operations LLC, submitted a copy of the required documentation. 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 twenty (20) male or female ambulatory adults whose diagnosis is Alzheimer's, aged and/or physically handicapped in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs.

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.

Lifeshouse Grand Blanc Operations LLC will ensure that the resident's transportation and medical needs are met. Lifeshouse Grand Blanc Operations LLC has transportation available for residents to access community-based resources and services. 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**

On 07/02/2007, Lifeshouse Grand Blanc Operations LLC submitted an application to provide foster care services to twenty adults at 4131 Cook Rd, Grand Blanc, Michigan.

The applicant, Lifeshouse Grand Blanc Operations LLC, which is a "Michigan Domestic Limited Liability Company", was established in Michigan, on 03/28/2007. The company is an experienced adult foster care provider, currently operating several licensed adult foster care facilities in the State of Michigan. 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 applicant has a board of directors that oversee the company.

Lifeshouse Grand Blanc Operations LLC submitted a written statement naming Pam Wicks as the licensee designee and Natalie Smith as the facility administrator. Pam Wicks and Natalie Smith submitted licensing record clearance requests that were completed with no LEIN convictions recorded. They also submitted medical clearance requests with statements from a physician documenting their good health and current TB-test negative results. Pam Wicks and Natalie Smith have 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 1 staff to 15 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 1 to 15 resident ratios.

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](http://www.miltcpartnership.org)),

L-1 Identity Solutions™ (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 and 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).

*Crecendra Brown*

July 18, 2011

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Crecendra Brown  
Licensing Consultant

Date

Approved By:

*Denise Y. Nunn*

July 18, 2011

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Denise Y. Nunn  
Area Manager

Date