



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

February 29, 2012

Jannine Stoddard
The Sugarbush House LLC
12032 Torrey Rd
Fenton, MI 48430

RE: Application #: AS250316843
The Sugarbush House III
1152 Woodkrest
Flint, MI 48532

Dear Mrs. Stoddard:

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 (248) 975-5053.

Sincerely,

Lisa Gundry, Licensing Consultant
Bureau of Children and Adult Licensing
4809 Clio Road
Flint, MI 48504
(810) 787-7033

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250316843
Applicant Name:	The Sugarbush House LLC
Applicant Address:	5631 Sugarbush Lane Flint, MI 48532
Applicant Telephone #:	(810) 577-6080
Administrator/Licensee Designee:	Jannine Stoddard, Designee
Name of Facility:	The Sugarbush House III
Facility Address:	1152 Woodkrest Flint, MI 48532
Facility Telephone #:	(810) 577-6080
Application Date:	01/11/2012
Capacity:	6
Program Type:	AGED ALZHEIMERS WHEELCHAIR ACCESSIBLE

II. METHODOLOGY

01/11/2012	Enrollment
01/13/2012	Contact - Document Sent Rules & Act booklets
01/31/2012	Application Incomplete Letter Sent
02/28/2012	Inspection Completed On-site

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The Sugarbush House III home is an immaculate five bedroom home located at 1152 Woodkrest Drive, Flint in Genesee County. The home is located in a well-established subdivision on a large lot. The physical plant is a one story brick-sided structure with a large partly-finished basement. It consists of two living room areas, a den, an eat-in dining room, kitchen, and five resident bedrooms. The home has three full bathrooms. The main bathroom has a large shower area and is located in the main hallway by the bedrooms. Each bedroom has a closet or wardrobe. The facility has adequate storage areas. There is an attached garage which may be used for additional storage areas. There is a driveway with adequate parking for staff and visitors.

The home has two furnaces and hot water heater, which are located in the basement. Floor separation is achieved by a 1¾ inch solid core door equipped with an automatic self-closing device and positive latching hardware. The laundry facilities are located in the basement. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational.

The facility has a municipal water and sewer system.

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	11'4" x 10'7"	119	1
Bedroom 2	14'2" x 11'4"	160	1
Bedroom 3	10'10" x 11'5"	123	1
Bedroom 4	10'10" x 11'5"	123	1
Bedroom 5	13'3" x 15	198	2

** The home has an additional room that is currently being used as an office. The applicant has indicated that they may use the room for a private bedroom someday. The measurements for that room are 8'1" x 10', which is 81 square foot. This is enough space for one (1) resident.

The eat-in dining area measures 6'9" x 6'11", which is 47square feet. This area can comfortable seat six (6) residents. The front living room measures 289 square feet and the sunken living room measures an additional 356 square feet of living space. The den measures a total of 299 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Compliance with Rule 400.14410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were beautifully furnished, clean, and met all applicable rules relating to environmental and fire safety requirements.

The home has two 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 of the rule. 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 Sugarbush House LLC intends to accommodate residents with wheelchairs. The homes two means of egress terminate directly to the outside at grade; therefore, the required two wheelchair ramps are not necessary.

The home has fire extinguishers, which meets the requirements of R 400.14506. The bedrooms have the proper means of egress as required by R 400.14508. 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 R 400.1502, R 400.14503, and R 400.14504.

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.

A. Program Description

The applicant, The Sugarbush House LLC, submitted a copy of the required documentation to the consultant. 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 or non-ambulatory adults whose are Aged, Alzheimer's, 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.

The Sugarbush House LLC will ensure that the resident's transportation and medical needs are met. The Sugarbush House 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.

B. Rule/Statutory Violations

On 1/11/2012, Sugarbush House LLC submitted an application to provide foster care services to six adults at 1152 Woodkrest Drive Flint, Michigan.

The applicant, The Sugarbush House LLC, which is a "Domestic Limited Liability Company", was established in Michigan, on 12/14/2009. The corporation is an experienced adult foster care provider, currently operating two other licensed adult foster care facilities in 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 corporation.

The Sugarbush House LLC submitted a written statement naming Jannine Stoddard as the licensee designee and as the facility administrator. Ms. Stoddard submitted a licensing record clearance request that was completed with no LEIN convictions recorded. She also submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. Ms. Stoddard 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 6-bed facility is adequate and includes a minimum of 1 staff to 6 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-6 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),

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.

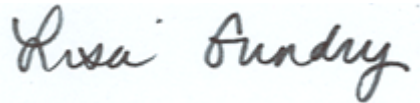
The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

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 small group home (capacity 1-6).

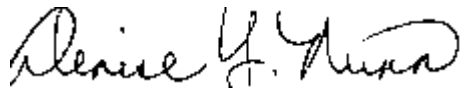


2/29/2012

Lisa Gundry
Licensing Consultant

Date

Approved By:



2/29/2012

Denise Y. Nunn
Area Manager

Date