



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

May 15, 2012

Mary Bishop
Cottage Grove Estates, LLC
5990 Borden Road
Fenwick, MI 48834

RE: Application #: AS340316818
Cottage Grove Estates
5990 Borden Road
Fenwick, MI 48834

Dear Ms. Bishop:

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 (517) 241-2585.

Sincerely,

Dawn N. Timm, Licensing Consultant
Bureau of Children and Adult Licensing
7109 W. Saginaw
P.O. Box 30650
Lansing, MI 48909
(517) 335-6232

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS340316818
Applicant Name:	Cottage Grove Estates, LLC
Applicant Address:	5990 Borden Road Fenwick, MI 48834
Applicant Telephone #:	(989) 637-4822
Administrator	Mary Bishop
Licensee Designee:	Mary Bishop
Name of Facility:	Cottage Grove Estates
Facility Address:	5990 Borden Road Fenwick, MI 48834
Facility Telephone #:	(989) 637-4822
Application Date:	01/10/2012
Capacity:	6
Program Type:	AGED

II. METHODOLOGY

01/10/2012	Enrollment
01/12/2012	Contact - Document Sent Rules & Act booklets
01/12/2012	Inspection Report Requested - Health
01/12/2012	Application Incomplete Letter Sent
01/18/2012	Contact - Document Received
01/18/2012	Application Complete/On-site Needed
02/02/2012	Application Incomplete Letter Sent
02/10/2012	Contact - Telephone call made to Mary Bishop to schedule appt. for inspection
02/23/2012	Inspection Completed On-site
02/23/2012	Inspection Completed-BCAL Sub. Compliance
03/02/2012	Inspection Completed-BCAL Sub. Compliance
03/05/2012	Inspection Completed-Env. Health : A
03/14/2012	Application Incomplete Letter Sent
04/24/2012	Contact- Face to face interview completed with household member.
04/30/2012	Contact- Document sent

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Cottage Grove Estates is an aluminum-sided, single story house with a partially finished walk-out basement. The facility is located in rural Ionia County in the small village of Fenwick, Michigan. The facility itself sits on ten acres of land and is surrounded by woods and fields. The main entrance to the facility faces away from the road, so parking for visitors and staff is located in that area. There is a large wrap around deck located off the north and west sides of the facility that can be enjoyed by residents during warmer weather. Residents may also access the backyard area of the facility to enjoy gardening, nature, and flowers.

Main entrance to the facility is gained through the French doors located off of the foyer and kitchen areas. This entrance is at grade and is wheelchair accessible. There is also another entrance immediately off of the kitchen. This entrance is approximately seven feet from the main entrance. This entrance is also wheelchair accessible as it is equipped with a small ramp of the correct height, width, and length. The ramp ends on a firm surface so individuals will be able to adequately maneuver their wheelchair after exiting from this ramp. All of the exit doors are equipped with alarms to indicate when someone enters and exits the facility.

The main level of the facility consists of a kitchen, dining room, living room, foyer, staff office, one full bathroom, and one half- bathroom. The main level is designated for resident use while the partially finished basement will be utilized solely as living space for the live-in licensee designee/administrator Mary Bishop and her spouse.

The furnace and water heater are located in the basement of the facility. Access to the basement is gained through the kitchen or through the walkout doors located at the basement level. Floor separation between the furnace and the facility is achieved through a fire-rated metal door that is positive-latching and self-closing. The door is hung in a fully stopped wooden frame. The furnace was inspected by a licensed heating and cooling person on 02/27/2012 and found to be in safe operating condition. Fire extinguishers are located on the main level and in the basement. The facility is equipped with single station smoke detectors that are located in the furnace room, all resident sleeping areas, the kitchen, laundry area and basement.

The facility uses private water and has a private sewage disposal system. The Ionia County Health Department inspected the facility on 01/30/2012. Full approval was given on 03/05/2012 after removal of a hydrant was verified.

The resident bedrooms and living area measured as follows:

Bedroom #1	10'2" x 12'0"= 122.04 square feet	One resident
Bedroom #2	9'10" x 12'0"= 117.96 square feet	One resident
Bedroom #3	12'0" x 12'2"= 146.04 square feet	One resident
Bedroom #4	11'6" x 9'3"= 106.38 square feet	One resident
Bedroom #5	11'6" x 11'0"= 126.5 square feet	One resident
Bedroom #6	12'0" x 14'1"= 168.96 square feet	One resident
Living room	17'9" x 15'6"= 275 .12 square feet	6 Residents

B. Program Description

The facility will provide 24-hour supervision, protection, and personal care for six (6) male and/or female residents over the aged 55 years and older. The program will include organized impromptu social gatherings, games, arts and crafts, and exercise. Enjoying the outdoors will also be encouraged during the spring and summer months. The applicant plans to incorporate the residents' personal interests into daily activities whenever possible and to encourage family members and friends to visit often and engage with their loved one.

The applicant is Cottage Grove Estates LLC which is a domestic for-profit corporation that was established on 08/26/2011. The applicant submitted a proposed monthly budget projecting expenses and income for the facility.

Mary Bishop is the licensee designee and administrator for the facility. A criminal history background check was completed on 01/18/2012 and no convictions were found. Mary Bishop submitted a medical clearance dated 12/16/2011 which documented that no physical and/or mental health conditions or health problems exist that would limit her ability to work with or around dependent adults. Mary Bishop will be living at the facility with her spouse, Gary Bishop Jr., who is considered an adult member of the household. A criminal history clearance was completed on Gary Bishop on 03/06/2012 and Mr. Bishop was approved as adult household member on 04/30/2012. Gary Bishop also submitted a medical clearance dated 12/16/2011 which documented that no physical and/or mental health conditions exist that would limit his ability to work with or around dependent adults. Both Mary and Gary Bishop submitted evidence of a negative TB test result. Mary Bishop has over 25 years of experience working with vulnerable adults who were aged and/or diagnosed with developmental disabilities, cognitive impairments, dementia, or mental illness. She has worked in licensed AFC facilities as well as skilled nursing facilities and nursing homes. Mary

Bishop provided documentation of the required trainings for licensees/administrators as well as a copy of her high school diploma.

The facility plans to have one staff member per shift but will adjust the staff to resident ratio to ensure the safety, supervision, and care needs of the residents are met in accordance with the residents' written assessment plans. The night staff person will be asleep and will use the aid of monitors in public areas to assist residents as necessary during the night. Awake staff members will be utilized when resident needs require it.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, 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 employee's 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 designee can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet in the original pharmacy container and that daily medication administration records will be maintained on each resident receiving medication.

The applicant acknowledges their responsibility to establish good moral character and suitability, obtain and maintain documentation of good physical and mental health status, maintain documentation of all required trainings, and obtain all required documentation and signatures that are to be completed prior to any staff member or volunteer working directly with residents. In addition, the applicant acknowledges their responsibility to maintain current employee records for the licensee designee, administrator, volunteer, or staff member, and the retention schedule for all of the documents contained within each employee's file.

The applicant acknowledges their responsibility to obtain all required documentation and signatures prior to each direct care staff member and/or volunteer working with residents. 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 completed written assessment plan, resident care agreement, and health care appraisal forms and signatures 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 annually for each resident.

The applicant acknowledges their responsibility to maintain a current resident file in the facility and the retention schedule for all of the documents contained within each resident file.

The applicant acknowledges an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-day written discharge notice and for issuing an emergency discharge notice of less than 30 days.

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 of the incident/accident. The applicant 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.

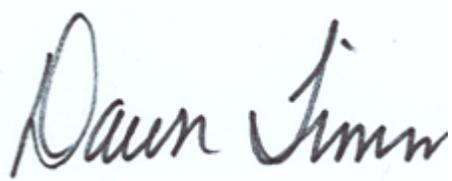
The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and values and intends to comply with the rules. The applicant acknowledges that a separate Resident Funds Part II (BCAL-2319) form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the personal money transactions that have been agreed to be managed by the applicant.

C. Rule/Statutory Violations

Compliance with the physical plant rules has been determined. All items cited for correction have been verified by visual inspection. Compliance with quality of care rules will be assessed during the period of temporary licensing via on-site inspections.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC small group facility with a capacity of six (6) residents.



05/10/2012

Dawn N. Timm
Licensing Consultant

Date

Approved By:



5/15/12

Betsy Montgomery
Area Manager

Date