



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

June 5, 2012

Jodi Farleigh
Farleigh's Senior Care Home Inc
9518 Pennfield Road
Battle Creek, MI 49014

RE: Application #: AS130317431
Farleigh's Senior Care Home
355-359 Morgan Road
Battle Creek, MI 49037

Dear Ms. Farleigh:

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 (269) 337-5066.

Sincerely,

Davida McShan, Licensing Consultant
Bureau of Children and Adult Licensing
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 615-5087

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS130317431

Applicant Name: Farleigh's Senior Care Home Inc

Applicant Address: 9518 Pennfield Road
Battle Creek, MI 49014

Applicant Telephone #: (269) 969-9530

Administrator/Licensee Designee: Jodi Farleigh, Designee

Name of Facility: Farleigh's Senior Care Home

Facility Address: 355-359 Morgan Road
Battle Creek, MI 49037

Facility Telephone #: (269) 969-9530
02/29/2012

Application Date:

Capacity: 6

Program Type: AGED

II. METHODOLOGY

02/29/2012	Enrollment
03/02/2012	Application Incomplete Letter Sent 1326 for Jodi
03/05/2012	Contact - Document Received 1326 Marie
03/08/2012	Inspection Report Requested - Health
03/08/2012	Application Complete/On-site Needed
04/25/2012	Application Incomplete Letter Sent
05/29/2012	Inspection Completed On-site

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules governing operation of small group adult foster care facilities with an approved capacity of 1-12 residents, licensed or proposed to be licensed after 05/24/1994.

A. Physical Description of Facility

Farleigh's Senior Care Home is located at 355-359 Morgan Rd., Battle Creek, Michigan 49037. The home is situated near Bedford Rd., in Bedford Township, Calhoun County, Michigan. Dr. Reza Tehrani, 1160 Lakeside Drive, Battle Creek, MI 49015 is the owner of the property. Proof of ownership is contained in the facility file. Ms. Jodi Farleigh is leasing the property from Dr. Tehrani and the leasing document can be found in the facility file. Dr. Tehrani did give permission for Ms. Farleigh to use the property for an AFC.

Farleigh's Senior Care Home is a wood and brick ranch duplex style home with 2198 square feet of living space, two separate basements and two attached single car garages. The home is in a suburban area of similar construction homes. The home is nicely landscaped on a three acre lot. The interior of the home is spacious in layout, completely updated, comfortable, and very tastefully decorated.

The main entrance opens into a small foyer with two doors that enter into the main home. The home used to be a duplex but the wall dividing the home has been removed. The doors open into a kitchen and living room area on either side. There is a wall separating the kitchen areas. To the right of the home is the living room area, kitchen, and dining area. There are French doors off of the dining room area that lead to a small fenced in deck. There is a hall that leads to the right. A full bathroom is located to the left off of the hallway. There is a single occupancy bedroom further down the hall to the

left. To the right off of the hallway is a two occupancy bedroom. The basement door for this side of the duplex styled home is located to the right off of the hallway. The basement is equipped with a fire rated self-closing door. At the end of the hallway is a single car garage. The basement on this side of the home has its own furnace, hot water heater, and circuit panel. The laundry facilities are also located in this basement. The basement itself is not finished but is very clean and new in appearance. To the left of the main entrance is another kitchen, dining room, and hearth room area. There is a set of sliding glass doors that has its own small fenced in deck area. There is a hallway to the left with a single occupancy bedroom to the left. A full bathroom is to the right. Further down the hall to the right is the double occupancy bedroom. The door leading to the basement is located to the left. There is a fire rated self-closing door leading to the basement. The end of the hallway leads to another single car garage. The basement on this side of the home also has its own hot water heater, furnace, and circuit panel. This separate basement is furnished with a living room, bedroom, and bathroom. There is a door leading outside from the basement. There is no kitchen. Licensee, Jody Farleigh, stated that a live in staff person would be residing on this side of the basement.

Resident bedrooms were found to be of the following dimensions and accommodation capability:

<u>BEDROOM</u>	<u>DIMENSIONS</u>	<u>SQ. FOOTAGE</u>	<u>OCCUPANCY</u>
Bedroom #1	14 x 10	140	2
Bedroom #2	11 x 12'6"	138	1
Bedroom #3	11 x 12'6"	138	2
Bedroom #4	9'8" x 11	107	1
TOTAL OCCUPANCY			6

Compliance with rule R400.14409 (6) was demonstrated at the time of final inspection.

Based upon the above information, this facility has the square footage necessary to accommodate up to 6 adults, as requested in the application.

The living space for the home is listed below:

The home has a living room that measures 17 x 16 and a hearth room that measures 17'4" x 12'8". There are two kitchen/ dining room areas. Kitchen/ dining room 1 measures 17'4" x 14'6" and kitchen/ dining room 2 measures 17 x 11. The proposed capacity for the home is 6. Based upon the above measurements, there will be more than the required 35 square feet per resident minimal living space available for the residents of the home.

The bedrooms were properly furnished, clean and neat. Each bedroom has an easily operable window with a screen, a mirror for grooming and a chair. The bedrooms all have adequate closet space for the storage of clothing and personal belongings. The bedrooms also have adequate lighting to provide for the needs of the staff and

residents. The shower and bathtub area is equipped with required non-skid surfacing and handrails to assure resident safety in the maintenance of personal hygiene. The bathrooms were equipped with soap and paper towels for hand washing. The facility was equipped with all required furnishings, linens, and cooking utensils.

Based on the above information and observations, it was found that facility to be in substantial compliance with Departmental requirements regarding environmental conditions.

Farleigh's Senior Care Home has private water and sewage. The Health Department inspected the facility and gave the home an A rating on 04/02/2012. Garbage disposal is supplied through Scooters Garbage Disposal. The kitchen and bathroom areas were evaluated and found to be adequately equipped and in clean condition. All necessary appliances were present at the time of final inspection. Poisons and caustics will be stored in a secured area not used for food storage or preparation. The home has adequate food storage capacity. The refrigerators were equipped with thermometers to monitor the temperature of food storage. Water temperature was tested at the time of final inspection and found to be within the acceptable range as defined by rule R400.14401(2). The home also met the minimum requirements regarding food service (R 400.14402) and maintenance of premises (R 400.14403). Laundry facilities are located in the basement. The washer and dryer were properly installed and the dryer vent was made of acceptable non-combustible material.

Based on the above information and observations, the facility was found to be in substantial compliance with Departmental requirements regarding environmental conditions.

2. Fire Safety

The licensee installed a fully integrated hard wired smoke detection system to meet the requirements of R 400.14505. The smoke heads are placed as required by the rule. The home also has fire extinguishers located on the main floor, which meet the requirements of R 400.14506. The home has more than two means of egress from the main floor, and the exit doors all meet the requirements of rules R 400.14507 and R 400.14509. All the bedroom doors have conforming hardware. The bedrooms of the home also have the proper means of egress as required by R 400.14508. The interior of the home is of standard drywall construction or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.14502, R 400.14503, and R 400.14504.

Two gas forced air furnaces heat the facility. The furnaces are new and were installed in March of 2010. The licensee was advised that water temperature should be monitored on a regular basis. The electrical service (circuit breaker panels) were found to be adequate and in safe condition at the time of final inspection. The home was found to be in compliance with rules relating to interior finish, smoke detection equipment, fire

extinguishers, means of egress, both generally and for bedrooms, heating equipment, flame producing equipment enclosures, and electrical service.

The facility's emergency procedures, which contain written instructions to be followed in case of fire and medical emergency, were reviewed. Evacuation routes were also posted in the facility, with emergency telephone numbers posted in proximity to the telephone. The home had its emergency preparedness plans posted as required. The home has emergency medical services available through Bedford Township. The licensee understands the Departmental requirements relating to the maintenance of fire drill records with the licensee. The licensee has indicated that it is the licensee's intent to conduct fire drills at least on a monthly basis, one per shift per quarter, as well as to maintain a record of these fire drills and resident performance during such drills.

Based upon the above observations and information, the facility was found to be in substantial compliance with administrative rules pertaining to emergency preparedness and fire safety.

B. Program Description

1) Program Statement

The licensee submitted a copy of the program statement to the Department for review and inclusion in the licensing record. The document is acceptable as written. The facility will offer a program and services for male and female aged adults. According to the program statement, the goal of the program is to "offer the least restrictive facility and to keep dignity and respect at its highest". Transportation to community programs and doctor appointments will be provided upon request. Activities and daily crafts will also be provided for residents.

2) Required Information

On 03/09/2012, the Department received a license application and application fee from Ms. Jodi Farleigh, acting on behalf of Farleigh's Senior Care Home, INC., to operate a small group AFC facility at the above referenced address in Bedford Township, Michigan. The filing endorsement from the Michigan Department of Licensing and Regulatory Affairs has an Incorporation/ Qualification date of 11/14/2011.

As part of the application process the licensee submitted admission and discharge policies for Farleigh's Senior Care Home. The documents are acceptable as written. Also included in the Department files are a proposed staffing pattern, a current organizational chart, a proposed budget, a floor plan with room use and size specifications, and current financial documents. As part of the licensing process, the licensee presented personnel policies, routine procedures, and job descriptions for review during the final inspection. The documents are kept in the home and are available for review.

The administrative structure for Farleigh's Senior Care Home, INC. is as follows:

President: Jodi Farleigh
Vice President: Jodi Farleigh
Designated Responsible Person: Debbie Williams

A Records Clearance Request has been processed for Ms. Jodi Farleigh. Based upon the information from the Record Clearance Report, Ms. Jodi Farleigh is found to be of good moral character, sound judgment, and suitable to provide care to dependent adults. A current Licensing Medical Clearance form for Ms. Farleigh is contained in the record. The form indicates that she is in good physical and emotional health, and there is no reason why she should not be involved in the operation of this facility and the provision of adult foster care. A current negative TB test is also on file with the Department.

Ms. Jodi Farleigh submitted, on behalf of Farleigh's Senior Care Home INC., financial information as part of the new application process. The applicant submitted a current balance sheet/ projected budget. Based on the information presented, it is determined that the applicant corporation has demonstrated a stable financial position and possesses the financial capability to operate an adult foster care facility at the above referenced location.

3) Qualifications and Competencies

The licensee designee, Ms. Jodi Farleigh, is currently a Guardian Conservator. Ms. Farleigh has held her current position for twelve years. Ms. Farleigh also has experience as an assistant manager at a Home for the Aged facility for fourteen years before accepting her current position.

Ms. Farleigh has demonstrated that there were no changes to report in information previously submitted in this application for a license. The licensee designee was advised of Departmental requirements relating to changes in information, as outlined under administrative rule R400.14103 (5), and has indicated that it is the intent of the corporation to assure continued compliance with this rule. The licensee was also reminded of Departmental requirements pertaining to posting of the license as outlined under rule R400.14103 (4), and has indicated that it is her intent to maintain compliance with this requirement.

Based on the above information, it has been determined that Ms. Jodi Farleigh is in substantial compliance with rule R400.14103 regarding required information and reporting changes, and rules R400.14201, R400.14202, and R400.14205 regarding qualifications and health of the Licensee.

As required by rule R400.14202, the home has a designated administrator. Ms. Jodi Farleigh will act as administrator for Farleigh's Senior Care Home. Based on the information submitted and information reviewed in the home at the time of the final

inspection, Ms. Farleigh is qualified to act as administrator for Farleigh's Senior Care Home based on her background and training.

As mentioned above, the applicant submitted copies of the proposed admission and discharge policies to the Department for review and inclusion in the licensing record. The documents have been reviewed and it has been determined that they do not conflict in content or intent with current rules and are therefore acceptable as written. A copy of the proposed staffing pattern is contained in the licensing file. The proposed staffing pattern appears to meet the care requirements of the proposed population described in the home's program statement and the minimum requirements of rule R 400.14206.

Individuals who are interested in placement into Farleigh's Senior Care Home should contact Ms. Jodi Farleigh at the facility. The licensee designee also understands that the facility will conduct its own evaluation and written assessment of any individual who is referred for placement. The purpose of this assessment is to judge whether the individual fits the criteria established in the home's program statement and is compatible with the current residents. A resident care agreement and a current health appraisal are also required at the time of admission. Based upon the above information, the facility is found to be in substantial compliance with requirements of rule R400.14302 pertaining to admission and discharge.

4) Facility and Employee Records

Farleigh's Senior Care Home's personnel policies were reviewed and it was determined that they do not conflict with statutory or administrative rule requirements. The job descriptions for Farleigh's Senior Care Home were reviewed and submitted to the department. They are acceptable as written. Good moral character requirements as related to the hiring of staff were also discussed with the licensee.

a) Facility Records in General (Rule R400.14209)

The resident care agreement proposed for use in this facility is the current Department resident care agreement. Departmental requirements pertaining to maintaining a resident register, as required under rule R400.14210 have been discussed with the licensee and the licensee indicates that it is her intent to comply with this requirement. Copies of required Department forms were also given to the applicant during the course of the pre-licensing period. The applicant indicated that she understands the Department requirements for record keeping.

Home menus have been discussed and the applicant understands the requirements set forth in rule R400.14313 and has indicated that the home will meet the requirement with respect to nutrition and menus as stated in the rule. Ms. Farleigh has been advised that all working menus are to be dated, prepared in advance, and that any changes or substitutions may be reflected on the working menus. Menu records are to be maintained in the facility for a period of one year. The licensee designee was also

advised that a licensed physician must order any special diets implemented in the home.

b) Employee Records (rules R400.14204 and R400.14208)

Based on the licensee's previous experience, the licensee is well aware of the requirements for staff qualifications and training and intends to comply with the rules. The licensee understands that all employees must submit to a pre-employment physical, which includes a TB tine test. The results of the test are to be obtained before employment begins. The licensee will also verify age and check references before a person is offered employment. The licensee provides an orientation and training of its own relating to reporting requirements, emergency procedures, prohibited practices, resident rights, and personal care, protection, and supervision required in adult foster care. Each employee must complete certified training in First Aid and CPR. Evidence of staff training will be maintained in the employee records for future Departmental review. The administrator/ licensee designee understands and intends to comply with the requirements of rules R400.14204 and R400.14208.

5) Resident Care, Services, Records

Departmental requirements pertaining to resident records as specified in rule R400.14316 were discussed with the Licensee. The Licensee has indicated that it is the corporation's intent to comply with these requirements. During the course of the pre-licensing investigation, I advised the licensee of Departmental requirements pertaining to resident rights and prohibited practices as outlined under rules R400.14304 and R400.14308. The licensee attests that it is the intent of the corporation to achieve and maintain compliance with these requirements.

Also discussed were Departmental requirements pertaining to incident and accident reports, as outlined under rules R400.14311 and the requirements for safeguarding and distributing of prescription medication as outlined in rule R400.14312. The licensee has again indicated that it is her intent to achieve and maintain compliance with these requirements. I determined that the facility was in substantial compliance with Departmental requirements pertaining to investigating and reporting as stipulated in rule R400.14312, and resident rights as outlined in rule R400.14304.

The licensee was provided with copies of the Department forms Resident Funds and Valuables Parts II & I. The licensee is aware that these are required forms and an alternate form cannot be used unless the Department approves the form. Compliance will be evaluated at the time of renewal.

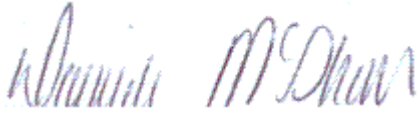
The applicant stated that she has an understanding of the rule R400.14317 relating to resident recreation and intends to comply through an activity schedule for the home which will expose the residents to a variety of community based recreation and leisure time activities.

The licensee designee is aware of the requirements of rules R400.14318 and R400.14319, and assures me that the licensee will comply with the requirements of the rules regarding emergency and regular transportation.

In conclusion, the facility, by virtue of observation, interview, and review of program documentation, is found to be in substantial compliance with Departmental requirements relating to resident care, services, and records. A more complete evaluation of resident services will be made at the time of license renewal.

IV. RECOMMENDATION

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

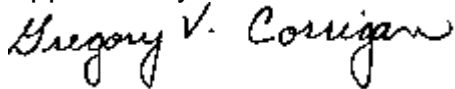


06/04/2012

Davida McShan
Licensing Consultant

Date

Approved By:



06/05/2012

Gregory V. Corrigan
Area Manager

Date

