



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

February 25, 2013

Paul Semian, Licensee Designee
Caring Hands Home Care Services dba
Attendant Care Services of Michigan
Suite 5 B
16950 19 Mile Road
Clinton Township, MI 48038

RE: Application #: AS500313598
The Estates of Macomb I
22133 21 Mile Road
Macomb Township, MI 48044

Dear Mr. Semian:

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,

Karen LaForest, Licensing Consultant
Bureau of Children and Adult Licensing
39531 Garfield
Clinton Township, MI 48038
(586) 256-1665

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500313598
Applicant Name:	Caring Hands Home Care Services, LLC D.B.A. Attendant Care Services of Michigan
Applicant Address:	Suite 5 B 16950 19 Mile Road Clinton Township, MI 48038
Applicant Telephone #:	(586) 228-9991
Licensee Designee:	Paul Semian
Administrator:	Lindsey Burton
Name of Facility:	The Estates of Macomb 1
Facility Address:	22133 21 Mile Road Macomb Township, MI 48044
Facility Telephone #:	(586) 913-7600
Application Date:	05/17/2011
Capacity:	6
Program Type:	AGED ALZHEIMERS PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

05/17/2011	Enrollment
05/24/2011	Contact - Document Received Field File received in Macomb County Office
05/28/2011	Application Incomplete Letter Sent
07/20/2011	Contact - Telephone call made Telephone call made to LD, message left.
01/24/2012	Contact - Document Received
02/12/2012	Contact - Document Received Documents received
05/03/2012	Inspection Completed On-site
05/10/2012	Contact - Telephone call made to request a new Certificate of Occupancy
05/11/2012	Application Incomplete Letter Sent A regular certificate of occupancy is needed to issue the license. The paperwork that is needed to issue the license was not submitted.
12/19/2012	Inspection Completed On-site
12/19/2012	Inspection Completed-BCAL Full Compliance
12/19/2012	Recommend License Issuance
01/04/2013	Contact - Document Received Request received to change the phone number.
02/06/2013	Inspection Completed On-site Reassigned to Karen LaForest. I conducted an onsite inspection and re-measured all rooms, inspected physical plant, reviewed employee records, and reviewed all licensing documents.
02/06/2013	Contact-Document Sent Sent email regarding discrepancy on applicant application for licensee and information on BITS screen as licensee.
02/13/2013	Contact-Document Received Email from Lansing, Dana Trierweiler, regarding correct

	licensee/applicant name to correspond on BITS and on original application.
02/13/2013	Contact-Document Received Ms. Trierweiler faxed IRS employer identification number and other documents connecting licensee name, Caring Hands Home Care Services, LLC with “doing business as” (dba) name, Attendant Care Services.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Estates of Macomb I is a newly constructed, one story large brick ranch home approximately 3624 square feet. The home is located on a large lot directly facing 21 Mile on the north side, east of Card Road in Macomb Township. The home utilizes public water and sewage through the township of Macomb. I conducted an on-site inspection on February 6, 2012. Mr. Semian, Licensee Designee, and Mr. Burton, Administrator, were present for the inspection. The home was in full compliance with regards to licensing rules and regulations for licensed adult foster care small group homes.

The home has an attached garage, a full basement, a patio in the rear, and a circle driveway in front. The interior of the home has an open floor plan, all on ground level, with a great room that includes an open dining area. The dining room table can accommodate all six wheelchairs with room for the staff. There is a recreation room for the residents’ use. The facility has six bedrooms each with their own bathrooms. The bathrooms are all wheelchair accessible. The showers were all equipped with non-skid surfacing and handrails to prevent falls. There is also a bathroom off the hallway used by the staff.

The bedrooms all have full size beds with a mattress, a mattress pad, a blanket, and a dresser with a mirror and a chair. The bedrooms all have a window that opens as well as a closet for storage. The home has an additional set of towels and linens for each resident.

The bedrooms were measured at the February 6, 2013 on-site inspection. The individual bedrooms will accommodate one resident.

Bedroom	Measurement	Square ft.	No. Residents
North	15'6" x 9'5"	146.01	1
Northeast	11'1" x 12'7" Plus 2'6" x 3'11"	149.19	1
Southeast	10'7" x 12'8"	133.94	1
Northwest	15'10" x 9'7" plus 6'1" x 3'2"	170.92	1
West (Center)	12'6" x 10'6"	131.25	1
Southeast	12'4" x 12' 5 ½"	154.62	1

The facility is in compliance with Rule 400.14409 (2) regarding bedroom usable floor space.

Measurements were taken of the Great Room, Dining Room and Recreational Room and are as follows: Great Room measured 43'5" x 19'3" for a total of 838.84 square feet; the Dining Room measured 16'1" x 12'2" for a total of 195.69 square feet; and the Recreational Room measured 23'4" x 10'8" for a total of 248.70 square feet. Total square footage of indoor living space is 1283.23 square feet, meeting compliance with Rule 400.14405 regarding indoor living space (35 square feet per resident times six residents is 210 square feet required.).

The home has a computer, television, cards and games available for the residents.

The home was nicely furnished and the kitchen was clean and well equipped with dishes, cookware, small and large appliances, utensils, drinking glasses, etc. The freezer and refrigerator had thermometers located in them and there was hand soap and paper towel in the kitchen. The kitchen waste receptacle had a tight closing lid. The home's open floor planned allowed easy maneuvering for wheelchairs. The flooring is wood floors.

Caustics and poisons were stored in locked cupboards in the laundry room. Medications are kept in a locked mobile medication cart which is then stored back in the locked laundry room. Medications are separated by internals and externals.

The Estates of Macomb 1 is in Macomb Township. The home is located close to several major roads and freeways. The home is located near a number of restaurants and stores for shopping, churches and parks.

A fire safety inspection was conducted on February 6, 2013. All interior finish is drywall. The smoke detection system is interconnected to the electrical system and when activated, it was audible in all areas of the home. Fire extinguishers were mounted upstairs near the kitchen and in the basement. All exit locking hardware was noted to be single motion, non-locking against egress. Written emergency procedures for severe weather, fire and medical emergencies were available in the home. Emergency telephone numbers were posted in the home. The fire evacuation floor plan was also posted by the front exit door and other areas of the home. There was no fire hazards noted in the home during my on-site inspection. The township of Macomb gave final approval for the electrical and heating and cooling inspections on November 1, 2012 when the home received a final Certificate of Occupancy. I informed Mr. Semian and Mr. Burton that fire drills must be conducted on each shift each quarter, recorded on a fire drill form, and they stated they would comply with this rule requirement.

B. Program Description

Mr. Semian applied for an original adult foster care license on May 17, 2011 for a facility located at 22133 21 Mile road in Macomb, MI under the licensee name, Caring Hands Home Care Services, LLC dba Attendant Care Services of Michigan. The home is wheelchair accessible and can accept physically handicapped, wheelchair residents. The population to be served includes the Aged, Alzheimer's, Physically Handicapped, and/or Traumatic Brain Injured males or females, ambulatory or non-ambulatory 18 years or older. Mr. Paul Semian is the appointed licensee designee.

The following limited liability company documents were received: The organizational chart; financial records that included the company income statement, balance sheet, and projected budget; personnel policies and procedures accompanied by job descriptions; articles of organization for a LLC; and the tax identification number from the internal revenue service. Mr. Paul Semian is the resident agent for the company and the sole member of the company.

Mr. Semian stated that the staff will all be trained internally as required in the licensing rules and he will provide additional specialized training to meet the needs of the population served.

Mr. Semian has over a year work experience in the population being serviced (he operates the Estates of Rochester Hills) and the necessary educational requirements. Mr. Semian submitted evidence he is of good moral character via a licensing record clearance and fingerprinting that was completed on May 2, 2012. A medical clearance was completed on that indicated Mr. Semian is in good mental and physical health dated February 11, 2013 and a tuberculin skin test was done on September 27, 2011 indicating negative results. This meets compliance with Rule 400.14205 (2) and (4).

Mr. Semian stated he has appointed Mr. Lindsey Burton as his administrator to oversee the day-to-day operations of the facility. Mr. Burton submitted documentation that he has the educational credentials and at least one year experience with the population serviced. Mr. Burton provided evidence he is of good moral character through a licensing record clearance and fingerprinting which is dated November 6, 2012. Mr. Burton submitted a licensing medical clearance that he is in good physical and mental health dated February 6, 2013 and a negative tuberculin skin test dated February 6, 2013, meeting compliance with Rule 400.14205 (2) and (4). Mr. Burton submitted training documentation from Eisenhower Center, his previous employer stating that he qualifies as the administrator by completing the following training requirements: Nutrition, First Aid and CPR (updated February 11, 2013), Financial and Administrative Management, Fire Safety training, Prevention and Containment of Communicable Diseases, Medication Administration, Resident Rights, and Foster care, as defined in the act. Mr. Burton meets the qualifications of administrator as outlined in Rule 400.14201 (3) and (6). Mr. Burton was informed he must complete the 16 hours of training annual as required in Rule 400.14203 (1) (a) (b) in the administrative rules and Mr. Burton stated he agrees to meet compliance with this rule.

During the on-site inspection on February 6, 2013, the following facility records were available for my review: Facility Program Statement; Admission and Discharge policies; Written Emergency Preparedness Plans; Emergency Repair Companies with their telephone numbers for plumbing, heating and cooling, gas and electrical; Grievance Policy; Personnel Policies and Procedures; Staff Training Plan and Staffing Ratios; Standard and Routine Procedures; Fee and Refund Policies; Rotating Menus; Job Descriptions; Floor Plan with measurements; Designated Person in the Absence of the Administrator; Proof of Ownership and Certificate of Occupancy, Limited Liability Documents; and Financial Documents for the Company and facility.

I reviewed three employee files and the files contained the following documents: signed employment application with education and work experience; two reference checks; verification the staff signed for their job description and personnel policies and procedures; training documents; employee physical and TB test; driver's license (that verifies the employee's age); hire date; and the signed background workforce agreement and verification of fingerprints.

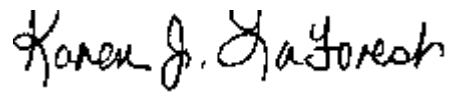
To ensure compliance with Rule 400.14316 that pertains to resident records, prior to the expiration of the temporary license, I will review resident records to ensure the following documents are completed: Resident Care Agreement; Resident Assessment Plan; Resident Information and Identification Record; Resident Funds and Valuables Part I and II; Resident Health Care Appraisal; Resident Weight Record; Resident Medication Records; Resident Health Care Chronological/Physician Contact Forms; Resident Register; Resident Fire Drills; and Resident Grievance Procedures.

C. Rule/Statutory Violations

There were no rule or statutory violations noted at the February 6, 2013 inspection.

IV. RECOMMENDATION

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

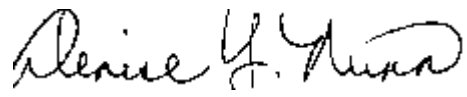


02/21/2013

Karen LaForest
Licensing Consultant

Date

Approved By:



02/21/2013

Denise Y. Nunn
Area Manager

Date