



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

February 28, 2013

Blake Ewing
10686 Wacousta Road
DeWitt, MI 48820

RE: Application #: AM190336317
A Ewing Country Estate AFC
10686 Wacousta Road
DeWitt, MI 48820

Dear Mr. Ewing:

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 12 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) 899-5675

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM190336317
Applicant Name:	Blake Ewing
Applicant Address:	10686 Wacousta Road DeWitt, MI 48820
Applicant Telephone #:	(517) 214-3903
Administrator:	Blake Ewing
Licensee:	Blake Ewing
Name of Facility:	A Ewing Country Estate AFC
Facility Address:	10686 Wacousta Road DeWitt, MI 48820
Facility Telephone #:	(517) 214-3903
Application Date:	08/23/2012
Capacity:	12
Program Type:	AGED ALZHEIMERS

II. METHODOLOGY

08/23/2012	Enrollment
08/24/2012	Contact - Document Sent Rules & Act booklets
08/24/2012	Inspection Report Requested - Health Inv. #1020627
08/24/2012	Inspection Report Requested - Fire
08/24/2012	Application Incomplete Letter Sent Rec cl & FP for Blake
09/10/2012	Inspection Completed-Env. Health : A
09/12/2012	Contact - Document Received Rec cl & FP for Blake
09/12/2012	Lic. Unit file referred for criminal history review Blake
09/12/2012	Lic. Unit received criminal history file from review
09/12/2012	Application Complete/On-site Needed
11/02/2012	Application Incomplete Letter Sent
02/12/2013	Inspection Completed-Fire Safety : A
02/25/2013	Inspection Completed On-site
02/25/2013	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

A Ewing Country Estate AFC is a large, ranch-style facility with a finished walkout basement. The facility is located in rural Dewitt, Michigan, which is about a 15 minute drive from Lansing, Michigan. The facility sits approximately 500 feet from the main road. There is ample parking available for staff members and visitors. There is also a man-made pond located approximately 150 feet from the front of the facility. It is surrounded by a split-rail fence. The fencing is decorated with small, clear lights that are timed to turn on during the evening hours year-round. All four of the facility exits have lighting that illuminates the walkways and extends a small way into the yard areas. A large pole barn sits in the back of the property as well but is not for resident use. The facility has three deck areas available for residents to enjoy during the warmer months of the year. The first porch is located off of a sitting room available to all residents to use for private family visits or small gatherings. This deck is fully enclosed. The second deck is located off of the dining area through a sliding glass door and is also fully enclosed. The third deck is located off of the west wing of resident bedrooms. This deck provides an exit/entrance point to the west wing resident bedrooms. There is also a front porch area located off of the original front entrance to the facility. Residents may use this porch to watch wildlife in the front pond.

The main level of the facility has 11 resident bedrooms, a large great room, sitting room for private family visits, three full bathrooms, one-half bathroom, dining room, kitchen and laundry area. The facility also has a fully finished walkout basement, however, this area will not be utilized by residents or accessible to residents. The facility is wheelchair accessible and has two exits with ramps from the main level of the facility. One wheelchair accessible entrance/exit is located on the east end of the facility and the other is located on the south end of the facility. Hallways and door widths inside of the facility also are able to accommodate individuals who use wheelchairs to assist with mobility.

The facility utilizes private water and private sewage disposal systems. The Mid-Michigan District Health Department conducted inspections of the property and facility on 09/10/2012 and again on 10/01/2012 and issued the facility an 'A' rating.

The facility utilizes two gas furnaces both of which were inspected and found in good working condition in December 2012 and February 2013. One of the furnaces is located in the finished basement area and floor separation is established by a fire-rated, fully enclosed metal door located at the basement level. The door is equipped with an automatic, self-closing device and positive latching hardware. The hot water heater is located in this area as well. The second furnace is located in a crawl space accessed from the outside of the facility.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational.

The facility is fully sprinkled as well. The facility has been determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules. The facility received an 'A' rating on 02/12/2013.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
One	12'4" x 11'4"	139.7 square feet	One
Two	10'8" x 11'4"	120.8 square feet	One
Three	10'8" x 11'2"	119 square feet	One
Four	11'0" x 7'8"	84.26 square feet	One
Five	9'10" x 12'7"	123.7 square feet	One
Six	12'9" x 12'7"	160.4 square feet	Two
Seven	9'2" x 12'2"	111.6 square feet	One
Eight	9'2" x 12'2"	111.6 square feet	One
Nine	9'2" x 13'2"	120.8 square feet	One
Ten	9'2" x 12'0"	110 square feet	One
Eleven	9'2" x 15'5"	141.4 square feet	One
Great Area	24'0 x 16'6"	396 square feet	
Sitting Room	13'0" x 16'4"	212.3 square feet	
Dining Room	11'4" x 16'4"	185 square feet	

The indoor living and dining areas measure a total of 793.3 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate twelve residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to twelve male and/or female residents who are aged and/or who have Alzheimer's Disease or related conditions. The program will include the opportunity to socialize with one another and staff members through board games, dominoes, puzzles, reading, watching television, enjoy the outdoor deck areas, and outings. Family and friends are strongly encouraged to visit as often as possible with their loved one. The applicant intends to accept referrals from Tri-County Office on Aging MI Choice Waiver Program as well as accept residents with private sources for payment.

For residents diagnosed with Alzheimer's Disease and/or dementia, Mr. Ewing plans to gather additional assessment information prior to admission to better understand how the individual's diagnosis of Alzheimer's/dementia impacts them so that staff members can be properly informed of how best to care for the individual on a daily basis. The assessment process will also include the individual's current level of communication and understanding so staff best understand how to interpret the individual's verbal cues or physical gestures. Additional information will be gathered to determine the individual's interests so appropriate activities such as music, exercise, reviewing photo albums, folding and sorting tasks can be used during times of agitation and increased anxiety to distract and calm the resident. Care will also be taken to determine what time of day works best to complete that individual's daily hygiene tasks and showers and a schedule will be made based on what works best for that individual. The facility will continually assess the resident and make changes as necessary. Individual resident bedrooms are also decorated in soothing, colors and not cluttered with excessive furniture or decoration. Mr. Ewing plans to admit individuals who are in the beginning stages of Alzheimer's/dementia, as this is less disruptive to other residents, but plans to provide care as long as appropriate given the resident's needs and the staff members' abilities to continue to meet that resident's needs. Consideration will also be given to determine if the resident remains compatible with other residents. Each of the facility exits is also alarmed to alert staff members that someone has exited the facility. The alarms will be on 24 hours per day. Window alarms are also available and will be installed based on resident need. The facility will provide ongoing training for staff on working with Alzheimer's residents and accommodating the residents' individual routines and preferences.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community and surrounding community resources for recreational activities including the library, shopping centers, churches, and any other activity of interest to the residents. These resources provide an environment to enhance the quality of life of residents.

C. Applicant and Administrator Qualifications

The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents (along with outside income from rental properties). The applicant is currently licensed as an AFC family home and is expanding to a 12 bed facility. The facility is currently full with six residents and has been a successful business since its opening in February 2010.

A criminal history background check on Blake Ewing, who is both the licensee and the administrator, was completed on 08/06/2012 and he were determined to be of good moral character to provide licensed adult foster care. Mr. Ewing also submitted a statement from his physician, dated 02/06/2013, documenting his good health and current negative tuberculosis test results.

Mr. Ewing has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. For the past three years, Mr. Ewing has worked as both a staff member in his currently licensed AFC family home providing direct care to aged residents and/or residents diagnosed with Alzheimer's/dementia conditions as well as managing the business side of the home as well. Mr. Ewing has cared for residents who became combative, non-verbal, incontinent, and immobile due to the effects of Alzheimer's/dementia-related conditions. To enhance his learning, Mr. Ewing attended eight hours of training by Eastern Michigan University on the care of residents with Alzheimer's Disease. He has also attended other classes about dementia through his local AFC trade association. Mr. Ewing will work with guardians to enlist the assistance of local hospice agencies to provide additional care during the end stages of Alzheimer's Disease and/or dementia. Prior to opening his AFC family home, Mr. Ewing provided direct care for his own relative as well as provided care to his partner's father who has dementia and used a wheelchair for mobility.

The staffing pattern for the original license of this twelve bed facility is adequate and includes a minimum of two staff for twelve residents per shift. Mr. Ewing acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs especially concerning those diagnosed with Alzheimer's/dementia related conditions. Mr. Ewing has indicated that both direct care staff will be awake during sleeping hours.

Mr. Ewing acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

Mr. Ewing acknowledged an understanding of the responsibility to assess the good moral character of employees. Mr. Ewing acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term

Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

Mr. Ewing acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee will administer medication to residents. In addition, Mr. Ewing 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.

Mr. Ewing acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, Mr. Ewing acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Mr. Ewing acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

Mr. Ewing acknowledge the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal 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 updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Mr. Ewing acknowledged the responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

Mr. Ewing acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant(s) acknowledged 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 resident's personal money transactions that have been agreed to be managed by the applicant.

Mr. Ewing acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. Mr. Ewing indicated the intent to respect and safeguard these resident rights.

Mr. Ewing acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

Mr. Ewing acknowledged the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

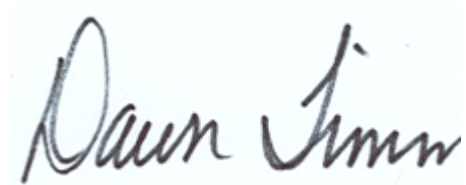
Mr. Ewing acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care medium group facility with a capacity of twelve (12) residents.



02/28/2013

Dawn N. Timm
Licensing Consultant

Date

Approved By:



2/28/13

Betsy Montgomery
Area Manager

Date