

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



MAURA D. CORRIGAN DIRECTOR

June 6, 2013

Katy Mason Atina Senior Living, Inc. 1527 John R Road Rochester Hills, MI 48307

> RE: Application #: AS630338330 Atina Senior Living 1527 John R Road Rochester Hills, MI 48307

Dear Mrs. Mason:

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,

Cohanic William

Stephanie A. Williams, Licensing Consultant Bureau of Children and Adult Licensing 4th Floor, Suite 4B 51111 Woodward Avenue Pontiac, MI 48342 (586) 256-2097

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630338330
Applicant Name:	Atina Senior Living, Inc.
Applicant Address:	1527 John R Road
	Rochester Hills, MI 48307
Applicant Telephone #:	(248) 425-2372
Administrator:	Sara Fortuna
Licensee Designee:	Katy Mason
Name of Facility:	Atina Senior Living
	4507 John D Dood
Facility Address:	1527 John R Road Rochester Hills, MI 48307
Facility Telephone #:	(248) 425-2372
Application Date:	01/18/2013
Capacity:	6
Program Type:	AGED, PHYSICALLY HANDICAPPED,
	WHEELCHAIR ACCESSIBLE

II. METHODOLOGY

01/18/2013	Enrollment
01/28/2013	Application Incomplete Letter Sent Application/signature and date, Licensing Clearances needed for Katy Mason Sara Fortuna.
01/28/2013	Contact - Document Sent Act and Rules.
02/08/2013	Contact - Document Received Medical Clearance and Tuberculosis Result for Sara Fortuna.
02/15/2013	Contact - Document Received Application with signature and date.
02/26/2013	Application Complete/On-site Needed
02/26/2013	File Transferred To Field Office Pontiac.
03/12/2013	Application Incomplete Letter Sent
03/25/2013	Comment Application incomplete letter was returned to office. Resent application letter in today's mail.
04/11/2013	Inspection Completed On-site
04/11/2013	Inspection Completed-BCAL Sub. Compliance
04/19/2013	Contact - Telephone call made Spoke to Katy Mason.
04/22/2013	Contact - Telephone call received Spoke to Katy Mason in regards to confirming letter.
04/22/2013	Contact - Document Sent Faxed Confirming letter to Katy Mason.
05/23/2013	Inspection Completed On-site Full Compliance with physical plant, supportive documents still needed.
05/28/2013	Contact - Document Received Obtained supportive documents from Katy Mason at facility.

05/29/2013	Contact - Telephone call made Left voice message for Katy Mason in regards to supportive documents still required.
05/29/2013	Contact - Telephone call received Voice message received from Mr. Kelly Winters, Deputy Director of the Building Department-Rochester Hills.
05/29/2013	Contact - Telephone call made Voice message left for Mr. Winters.
05/31/2013	Contact - Telephone call made Spoke with Katy Mason in regards to supportive documents needed.
06/03/2013	Contact – Document Received Supportive documents received, waiting on clarification for Mrs. Mason's CPR training.
06/05/2013	Contact – Document Received Supportive documents; updated medical clearance for Mrs. Mason, Certificate of Occupancy, and class information for CPR training.
06/05/2013	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This facility is a single story ranch style brick dwelling newly built in 2012; situated on over an acre of land, fully landscaped yard, with an attached two car garage, located in Rochester Hills, a suburb north of the City of Detroit. The facility is owned by the proposed licensee designee Katy Mason. The facility has occupancy for six adult foster care residents, the maximum occupancy permitted in an adult foster care small group home. The community is serviced by public water and sewage. Medical, social, educational, religious, and shopping resources are located nearby within the surrounding community. To service residents with mobility impairments, the facility is wheelchair accessible as the front egress door leads to a curbed ramp and the second required ramp is through the garage: both ramps lead directly to firm-surfaced, unobstructed concrete which allows the occupant to move a safe distance away from the building as required by Rule 400.14509.

At final inspection, the facility was noted to be in full compliance with administrative rule requirements related to fire safety, physical plan, environmental sanitation, living and

dining, and bedroom furnishings. The home features an interconnected smoke detection system that is audible in all areas of the home. Fire extinguishers have been installed in the basement and first-floor levels of the home. The facility features gas, forced-air heating and central air conditioning: the heat plant is located in the basement and separated from the home by standard floor separation and a 1³/₄ inch solid core door hung in a fully-stopped frame and equipped with an automatic self-closing device and positive-latching hardware.

Two upper kitchen cabinets have been identified and the appropriate hardware installed to secure and lock all prescribed medications. Electrical, hot water tank, furnace and cooling Inspections have been completed and a Certificate of Occupancy has been granted by the City of Rochester Hills Building Department dated 06/04/2013.

The great room features a gas fireplace in which the Mrs. Katy Mason, licensee designee submitted documentation on 05/28/2013 attesting to how they plan to provide for the safety of the residents when the fireplace, stating that a protective barrier is in place at all times, gas will be shut off at the source, no resident usage, staff supervision at all times when fireplace is in use, and fireplace will be shut-off fifteen minutes before end of shift. Laundry facilities are located in a utility room on the first floor of the facility including a gas-dryer with a solid galvanized metal duct.

The interior of the home includes a great room, office, a library, six bedrooms; bathroom#1 and bathroom #2 have wheelchair accessible shower stalls with no bathtubs, a kitchen, dining room, and first floor laundry room. I measured all of the community living space and bedrooms within the home to determine occupancy limits. The measurements, square footage, and capacity limits are as follow:

Great Room:	21'6" x 20	430 square feet
Dining Area:	10'9" x 12'6"	134.4 square feet

Total square footage of community space: 564.4 square feet.

Bedroom #1:	11'11" x 10'7" + 2'5' x 3'9"	135.2 square feet	Capacity 1
Bedroom #2:	10'6" x 13'8"	143.3 square feet	Capacity 1
Bedroom #3:	10'5" x 12'7" plus 2'5" x 3'6"	139.6 square feet	Capacity 1
Bedroom #4:	12'8" x 10'5" plus 2'5" x 3.6"	140.5 square feet	Capacity 1
Bedroom #5:	15'4" x 10'6"	161 square feet	Capacity 1

Bedroom #6:	10'7" x 12'	plus
	2'4 x 5'9"	

140.4 square feet Capacity 1

The total community living square footage is sufficient, per R400.14405(1) for the facility to accommodate up to six AFC residents. Based solely on square footage of all the bedrooms, it allows for the capacity of two residents in each room; however despite the potential bedroom capacity of 12 in the six bedrooms, this would exceed the allowable maximum of six residents in a small group home.

B. Program Description

The admission policy, discharge policy, program statement and refund agreement has been submitted and do not conflict with the licensing requirements. Atina Senior Living is a Small Group/Adult Foster Care Facility with the capacity to provide services for six ambulatory or non-ambulatory residents. The facility stated objectives are to provide a long-term safe living environment with home like features for the Aged and Physically Handicapped adults in order to enhance their day to day living experience through but not limited to the following; community outings, social and recreational interactions, trained staff, and personalized care.

Atina Senior Living, Inc. is a corporation that was formed on 04/07/2011, for profit, in good standing and approved to conduct business in the State of Michigan. A licensing clearance request has been received and processed for Mrs. Katy Mason, licensee designee and Mrs. Sara Fortuna, administrator, verifying their good moral character. The applicant has submitted financial documentation assuring the financial capability and stability of this corporation. Mrs. Mason and Mrs. Fortuna have submitted the appropriate educational, training and employment documentation and resumes to establish that they have the required experience and education to provide and deliver adult foster care services to the Aged and physically handicapped adults in the State of Michigan.

Mrs. Mason has numerous years in the nursing home setting including the last two years (April of 2011 to present) as the Director of Social Services at an area nursing home, working with geriatric and physically handicapped population. Mrs. Fortuna has nineteen years as a licensed registered nurse in nursing homes and in the home health care arena providing care to the Aged and physically handicapped population.

Medical clearances and negative tuberculin test results have also been received for Mrs. Mason and Mrs. Fortuna verifying they are in good mental and physical health and have no limitations to work with or around adult foster care residents. I provided technical assistance to the applicant to facilitate their compliance with statutory and rule requirements for the maintenance of the facility and resident records including the handling and accounting of resident funds. I provided technical assistance as to compliance with statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct service to residents.

C. Rule/Statutory Violations

The applicant was found to be in substantial compliance with the licensing act and applicable administrative rules.

IV. RECOMMENDATION

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

Scohanie William

06/06/2013

Stephanie A. Williams Licensing Consultant Date

Approved By:

Denie J. Munn

06/06/2013

Denise Y. Nunn Area Manager Date