

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



April 8, 2014

Rabia Latif Paramount Care, Inc. Suite 101 12345 Telegraph Road Taylor, MI 48180

RE: Application #: AS820338243

Paramount Care 15381 Cooper Street Taylor, MI 48180

Dear Ms. Latif:

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 (313) 456-0380.

Sincerely,

Edith Richardson, Licensing Consultant Bureau of Children and Adult Licensing

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Cadillac Pl. Ste 11-350 3026 W. Grand Blvd Detroit, MI 48202 (313) 919-1934

enclosure

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

#### I. IDENTIFYING INFORMATION

**License #:** AS820338243

**Applicant Name:** Paramount Care, Inc.

Applicant Address: Suite 101

12345 Telegraph Road

Taylor, MI 48180

**Applicant Telephone #:** 

Administrator/Licensee Designee: Rabia Latif

Name of Facility: Paramount Care

Facility Address: 15381 Cooper Street

Taylor, MI 48180

**Facility Telephone #:** (313) 539-6845

01/16/2013

**Application Date:** 

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

PHYSICALLY HANDICAPPED

TRAUMATICALLY BRAIN INJURED

#### II. METHODOLOGY

01/16/2013	Enrollment
01/22/2013	Contact - Document Sent Rules & Act Booklets
01/22/2013	Application Incomplete Letter Sent Rec cl - crime for Rabia
02/14/2013	Application Incomplete Letter Sent
01/23/2014	Application Complete/On-site Needed
01/23/2014	Inspection Completed On-site
01/24/2014	Contact - Document Received
02/26/2014	Contact - Document Received
02/27/2014	Inspection Completed-BCAL Full Compliance

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Plant

Paramount Care Home is located in a residential area in Taylor. The home is a single story structure without a basement and garage. The first floor of the home consists of a living room, dining room, kitchen, full bathroom, three bedrooms a laundry room and a furnace room.

The heat plant and hot water heater are located in an enclosure that is constructed of material which has a 1-hour-fire-resistance rating and the door is equivalent to a 1 3/4-inch solid core wood. The door is hung in a fully stopped wood or steel frame and is equipped with an automatic self-closing device and positive-latching hardware. A permanent outside vent that cannot be closed is incorporated in the design of heating plant room so that adequate air for proper combustion is assured.

The home is equipped with hard wired interconnected smoke alarm system that was installed by a licensed electrician and is fully operational. The home is in full compliance with fire safety rules.

The home can accommodate wheelchairs.

The home has public water and sewer and is in compliance with environmental health rules.

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The living room, dining room and bedrooms were measured during the initial inspection and have the following dimensions.

Living room 15 X 11= 165 sq. ft. Dining room 10 X 6= 60 sq. ft.

#### Resident bedrooms

SW bedroom 12 X 11= 132 sq. ft. (2 residents) SE bedroom 13 X 11= 143 sq. ft. (2 residents) NE bedroom 13 X 10=130 sq. ft. (2 residents)

The applicant has requested a license for six residents, and based on the above information can accommodate six residents.

# B. Administration/Program/Resident Care/Records

# 1. Population to be Served & Admission Criteria

The applicant intends to provide 24-hour supervision, protection and personal care to six (6) male or female ambulatory adults whose diagnosis is developmentally disabled, mentally impaired or Alzheimer, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from placement agencies and private-pay.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, or the responsible person.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

## 2. Applicant and Household

#### a. Corporation or Limited Liability Company

The Paramount Care Corporation is the applicant. The Paramount Care Corporation is a profit company registered with the State of Michigan.

Rabia Latif is the sole shareholder in this corporation. Ms. Latif has designated herself as the licensee designee and as the administrator.

# 3. Applicant, Licensee Designee, Administrator-Qualifications, Experience, Competency, Financial Capability & Stability and Good Moral Character

A licensing record clearance request was completed with no lien convictions recorded for the licensee designee/administrator. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee/administrator has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The applicant submitted a financial statement, credit report and proposed annual budget. Based on this information, the applicant meets the requirements for financial stability and capability.

#### 4. Staffing Plan, Proposed Ratios, Staff Training & Competencies

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of one staff to six residents per shift.

The applicant acknowledges an understanding of the training and qualification 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.

The applicant agrees to maintain a personnel file on each employee that includes documentation of the following minimum training:

Reporting requirements
First Aid
Cardiopulmonary resuscitation
Personal care, supervision, and protection
Resident rights
Safety and fire prevention
Prevention and containment pf communicable disease

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, can administer medication to residents.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to

maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee's file.

#### 5. Records & Record Keeping

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written.

Evacuation and emergency plans are posted in the facility and the applicant is aware that fire drills must be conducted and recorded.

The applicant has completed an emergency repairs record identifying vendors to service the homes heating and electrical systems and provide general home maintenance and repair major appliances.

The applicant has developed weekly menus that include breakfast, lunch and dinner.

The following resident records were reviewed with the applicant:

Resident Identification Form
Resident care Agreement
Health Care Appraisal
Medication Record
Monthly Weight Record
Assessment Plan
Funds & Valuables Record Part 1 & 2
Incident/Accident Report

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. The applicant has 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 their responsibility to obtain all of the required 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 the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The applicant was provided technical assistance on the statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct service or have direct access to residents. The applicant has indicated that the requirements and procedures outlined in 400.734b (3) will be utilized as the process to identify criminal history when assessing good moral character.

Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident and employee record keeping including the handling and accounting of resident funds.

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

# IV. RECOMMENDATION

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

Edith Richardson Licensing Consultant	04/08/14 Date
Approved By:	04/08/14
Ardra Hunter Area Manager	Date