



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

January 8, 2014

Ellen Angeles
Golden Haven Adult Foster Home LLC
52249 Hawthorne Drive
Chesterfield, MI 48047

RE: Application #: AS500337345
Golden Haven Foster Home Warren
28740 Roan Drive
Warren, MI 48093

Dear Ms. Angeles:

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
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(586) 256-1665

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500337345
Applicant Name:	Golden Haven Adult Foster Home LLC
Applicant Address:	52249 Hawthorne Drive Chesterfield, MI 48047
Applicant Telephone #:	(586) 354-0787
Administrator/Licensee Designee:	Alexander Angeles, Administrator Ellen Angeles, Licensee Designee
Name of Facility:	Golden Haven Foster Home Warren
Facility Address:	28740 Roan Drive Warren, MI 48093
Facility Telephone #:	(586) 354-0787
Application Date:	10/29/2012
Capacity:	6
Program Type:	AGED ALZHEIMERS

II. METHODOLOGY

10/29/2012	Enrollment
11/01/2012	Application Incomplete Letter Sent FP & 1326 Ellen & Alexander
11/02/2012	Contact - Document Received 1326 w/FP Ellen, & Alexander
11/15/2012	Application Complete/On-site Needed
11/15/2012	Application Incomplete Letter Sent Sent applicant letter with required documents needed for licensing.
12/19/2012	Contact - Document Received Received Warranty Deed from the licensee designee. Only document sent.
12/19/2012	Contact - Telephone call made Contacted the applicant and left a message that I need additional licensing documents as outlined in my November 15, 2012 Incomplete application letter.
01/28/2013	Contact - Telephone call made Left message for applicant to call me as to her continued interest in licensing. I have received no documentation.
01/30/2013	Contact - Telephone call received Applicant called and said she was waiting for me to come out. I told her she must submit her licensing documents first, and then I would schedule an on-site inspection. She said she did her fingerprinting, application and fee, I said not enough. She has 120 days and it is almost up. Said she would send in documents.
02/14/2013	Contact - Document Received Applicant brought in documents for licensing
02/20/2013	Application Incomplete Letter Sent Documents need amending and several documents not submitted, letter went back to applicant.
03/26/2013	Contact - Document Received Received additional documents
03/28/2013	Application Incomplete Letter Sent

04/03/2013	Contact - Document Received Received additional documents but they need revisions
04/04/2013	Application Incomplete Letter Sent
04/15/2013	Contact - Document Received Applicant sent additional documents but need modifications.
04/18/2013	Application Incomplete Letter Sent
08/20/2013	Contact - Document Received
08/21/2013	Application Incomplete Letter Sent
08/27/2013	Inspection Completed On-site preliminary inspection completed
08/28/2013	Confirming letter sent Informed of corrections needed
12/02/2013	Inspection Completed On-site Final Inspection completed
12/02/2013	Confirming letter sent Informed of additional documents needed prior to license issuance.
12/20/2013	Contact-Documents Received
01/06/2014	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Golden Haven Foster Home is a spacious, 2800 square foot ranch style, brick home built in 1969 in an established area of Warren, Michigan. The home contains five bedrooms, a living room, large dining/recreational, room adjacent to the kitchen, three full bathrooms and a basement. The home has two ramps and can accept wheelchair residents. Public water and sewage is through the City of Warren.

I conducted two inspections, a preliminary inspection dated August 27, 2013 and a final inspection conducted December 2, 2013. The home was noted to be in full compliance

December 20, 2013 with all applicable licensing rules and regulations for small group homes.

Ms. Ellen Angeles is the licensee designee and Mr. Alexander Angeles is the appointed administrator. Both were present at the preliminary and final inspections. Mr. and Mrs. Angeles stated that the bedrooms will be utilized as follows:

<u>Bedroom Location</u>	<u>Measurements</u>	<u>Sq. Ft.</u>	<u>No. Residents</u>
Northeast	12'10" x 10'3"	131.51	Live in Caregiver
Central West	14'1" x 11'9"	165.44	1
Southwest	14'1" x 14' ½"	197.68	2
Southeast	16'4" x 14'4"	234	2
Northwest	11'4" x 17'	192.61	1

The facility can accommodate six residents and a live-in caregiver in accordance with Rule 400.14409 (3).

The dining /recreational room measured 18'6 ½" x 16'6" or 305.91 square feet. The living room measured 16'2" x 17'8" or 285.56 square feet. Total square footage of indoor living space is 591.47 square feet, adequate for six residents and one live-in caregiver, meeting compliance with Rule 400.14405 (1) requiring 35 square feet per occupant.

The home was nicely decorated and neat and clean. There are sufficient furnishings including living room furniture, dining room table, lamps, decorative items on the walls and bedroom furniture including dressers, chairs, mirrors and beds. All beds had comforters, mattress pads, and each bed had two sets of sheets. All beds had pillows. There were two sets of bath towels, hand towels and washcloths for each resident. The kitchen was equipped with a refrigerator, stove/oven, small appliances, dishes, silverware, glassware and cook and bake ware. The freezer and refrigerator contained thermometers for regulating the temperature for food safety. All bathrooms and the kitchen had hand soap and paper towels for hand washing. Poisons and caustics are located away from food preparation areas and secured by locks. Bathrooms contained handrails and non-skid strips for bathing. Medications will be locked in a cupboard and will be separated by internals and externals for each resident.

A fire safety inspection was conducted by the consultant at the preliminary and final inspections. The smoke detection system is interconnected and when activated, was audible in all areas of the home. The door locking hardware is single motion, non-

locking against egress on primary and secondary exits. All bedroom windows opened easily. All interior finish consists of drywall and is class C rated for smoke and fire. The furnace is located in the basement and there is a means of separation by a solid wood door. Fire extinguishers, 2A10BC were located and mounted on the main level and in the basement. The home had the schematic fire evacuation plan posted and the emergency telephone numbers posted. The home has also submitted written emergency procedures for fire, severe weather and medical emergencies. Ms. Angeles was aware fire drills must be conducted and has a fire drill form to complete. She was informed at the final inspection that there must be four drills done on days, four drills on evenings and four drills on sleep hours each year, a total of twelve drills annually. The times of the drills and the time to evacuate must be recorded on the drills. The licensee designee obtained a heating and cooling inspection on the furnace on December 2, 2013 by Strictly H/C that indicated the furnace operation is okay. The City of Warren gave approval of the electrical on December 9, 2013 by T. Tokarz. No fire safety hazards or concerns were noted at my preliminary and final inspections.

B. Program Description

Golden Haven Foster Home LLC submitted licensing application materials on October 29, 2012 for an original license issuance. The application states that the limited liability company will accept males and females, wheelchair accessible, elderly of 60 years or older, and/or Alzheimer's disease. Proposed capacity is six residents. The licensee designee, Ellen Angeles, does not have any other adult foster care licensed homes.

The following limited liability company documents have been submitted: formation of the limited liability company via Michigan Department of Licensing and Regulatory Affairs, ID # D81143, named Golden Haven Adult Foster Home, LLC. Ellen Angeles is the authorized resident agent. Ms. Angeles address listed is 52249 Hawthorne Drive, Chesterfield Twp., MI 48047. The LLC documentation was filed and formed on September 18, 2012. Company members list was also submitted and include the following persons: Ellen Angeles; Alexander Angeles; Vivencia Baldejera; and Melvin Baldejera. Mr. and Mrs. Angeles own the home and provided a letter to licensing for permission to enter the premises and to inspect. Ownership was verified via a warranty deed provided by the Angeles'. Ms. Angeles also submitted an organizational chart identifying individuals involved in the company.

Ms. Angeles submitted personnel policies and procedures for Golden Haven Foster Home LLC. She also submitted in writing the designated person to act in behalf of the company in her absence to make licensing decisions. Job descriptions for the staff were also submitted. Additional documentation submitted for licensing include: Admission and Discharge policies; Program Statement; Staff Training Plan; Proposed Staffing Pattern; Standard and Routine Procedures; Fee and Refund Policies; Written Emergency Procedures in the event of a Fire, Severe Weather, and Medical Emergency; Emergency List of Telephone Numbers; Warranty Deed; Electrical and

Heating Inspections; Rotating Menus for four weeks; and Projected Annual Budget for the home.

Ms. Ellen Angeles is the licensee designee authorized to conduct business and make decisions on behalf of the company. Ms. Angeles has at least one year experience working with the populations identified in the application. Ms. Angeles is a licensed physical therapist and has worked five years at Medilodge of Richmond with the elderly and is currently employed at Shelby Nursing Center for a year and a half working with the elderly and providing physical therapy services. Ms. Ellen Angeles was fingerprinted on October 24, 2012 TCN# LX12265685P. Ms. Angeles presented evidence that she is in good physical and mental health via a licensing medical clearance dated May 13, 2013 and a tuberculosis test dated October 12, 2012 with negative results.

The appointed administrator is Alexander Angeles. Mr. Angeles is a licensed physical therapist and has been working with the elderly since 2006 in both a skilled nursing and assisted living facility for the elderly at Genesis Health Care per his written reference from the program manager, Carole Ann Peltier. Mr. Angeles also has provided evidence he is of good moral character via a criminal history check and fingerprinting that was completed on October 30, 2012, TCN# LX12267205Y. Mr. Angeles presented evidence that he is in good physical and mental health via a licensing medical clearance dated May 13, 2012 and a negative tuberculosis test dated March 8, 2013. Mr. Angeles submitted all training documentation to meet compliance with Rule 400.14201 (3) to meet the qualifications as an administrator which includes: Prevention and Containment of Communicable Diseases; Financial and Administrative Management; Effective Fire Safety Training; Resident Rights; Nutrition; Medication Administration; and First Aid and CPR. Mr. Angeles obtained his training through Direct Care Training and Resource Center, Inc. and provided the transcript of completion.

Ms. Angeles stated that she has two live in caregivers, a husband and wife. They also completed training and completed the necessary documents for employees including the following: employment application, work experience and education, all training as required and in accordance with Rule 400.14203 (1) (a) through (g); signing of the job description and receipt of personnel policies; medical clearance and TB testing with results; two reference checks; state identification or driver's license; and both will be fingerprinting upon licensing with 10 tens.

At the final inspection I reviewed with Ms. Angeles and Mr. Angeles the required resident forms that need to be completed and maintained in the home. These forms included the following: Resident Information and Identification Form; Resident Care Agreement; Resident Assessment Plan; Resident Weight Record; Resident Medication Record; Resident Funds and Valuables Part I and Part II; Resident Health Care Appraisal; Resident Incident and Accident Report; Resident Register; and Resident Health Care Chronological. I also reviewed Resident Fire Drills and what to do in the event a resident or the resident's designated representative has a grievance with services or care in the home. Prior to the expiration of the temporary license, the

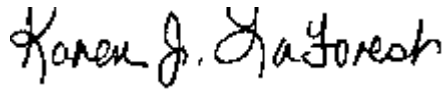
consultant will review resident records to ensure compliance with Rule 400.14316 that pertains to resident record.

C. Rule/Statutory Violations

There are no rule or statutory violations noted.

IV. RECOMMENDATION

I recommend a temporary license be issued to #AS500337345 known as Golden Haven Foster Home Warren.

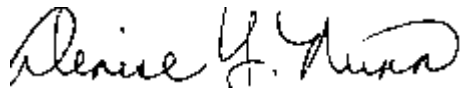


01/08/2014

Karen LaForest
Licensing Consultant

Date

Approved By:



01/08/2014

Denise Y. Nunn
Area Manager

Date