

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



NICK LYON INTERIM DIRECTOR

February 10, 2015

Amber Hernandez-Bunce Cornerstone AFC, LLC P.O. Box 277 Bloomingdale, MI 49026

> RE: Application #: AS030369569 Grand Street 630 Grand Street Allegan, MI 49010

Dear Mrs. Hernandez-Bunce:

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 5 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

Ian Tschirhart, Licensing Consultant Bureau of Children and Adult Licensing Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 (616) 644-9526

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS030369569	
Applicant Name:	Cornerstone AFC, LLC	
Applicant Address:	P.O. Box 277 Bloomingdale, MI 49026	
Applicant Telephone #:	(269) 628-2011	
Administrator:	Amber Hernandez-Bunce	
Licensee Designee:	Amber Hernandez-Bunce	
Name of Facility:	Grand Street	
Facility Address:	630 Grand Street Allegan, MI 49010	
Facility Telephone #:	(269) 762-2969	
Application Date:	11/21/2014	
Capacity:	5	
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED	

II. METHODOLOGY

11/21/2014	Enrollment
12/02/2014	Contact - Document Sent Rules & Act booklets
12/08/2014	Application Incomplete Letter Sent
02/02/2015	Application Complete/On-site Needed
02/05/2015	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Grand Street is located at 630 Grand Street, Allegan, Michigan, which is in Allegan County. The house is being purchased by Amber Hernandez-Bunce and John Bunce on a land contract from Apex Investments of Michigan, Inc. The President of this corporation, Marjorie Allen, has given written ownership interest to the Bunce's and permission for state personnel to inspect the home and property. The corporation that owns and operates Grand Street AFC is Cornerstone AFC, LLC, which currently owns and operates two other AFC homes, Cornerstone AFC (AS120281503) and Tenth Street (AS030345182). Cornerstone AFC, LLC is associated with several other corporations that owns and operates 11 other Adult Foster Care homes.

The house is a sided ranch dwelling with three bedrooms, living room, dining area, kitchen, one full bath, and laundry room. The home does not have a basement or a garage; however, there is a large shed in the backyard and ample parking space in the driveway. The house, shed, landscaping, and cement surrounding the home are all in good condition. The home is not wheelchair accessible.

The furnace and hot water heater are in a properly ventilated room that has a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware. 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, which was tested upon the final inspection on February 5, 2015 and worked properly. There is an operable A-B-C fire extinguisher attached to the wall and is easily accessible. Evacuation routes are placed on the walls in conspicuous places near resident bedrooms. The water tested at 110 degrees Fahrenheit when tested at the kitchen faucet on February 5, 2015.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	8' X 12'	96	1
2	14' X 14'	196	2
3	10' X 14'	140	2
	Total Canacity, E		

Total Capacity: 5

The living and dining room areas measure approximately 235 square feet of living space. This complies with the 35 square feet/per occupant requirement.

The kitchen has all the necessary cooking utensils, thermometers in the freezer and refrigerator, and a garbage can with a lid.

A telephone is available for residents to use. Telephone numbers for emergency services is posted near the telephone.

All of the furniture, appliances, equipment, etc. are clean and in good condition. The overall maintenance and cleanliness of the home is good, and there are handrails where required.

Grand Street has a vehicle available for resident transportation that is in good, working condition, and has a first aid kit in it. The cost of transporting residents is included in the Resident Care Agreement.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to **five (5)** male and/or female ambulatory adults aged 18 to 100 years old whose diagnosis is Developmentally Disabled, Mentally III, and/or Traumatic Brain Injured, 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. An application has been simultaneously submitted for special certification to provide services to residents with a developmental disability and/or mental illness.

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 members, and only with the prior approval of the resident, guardian, and the responsible agency.

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.

C. Applicant and Administrator Qualifications

A licensing record clearance request was completed with no LEIN convictions recorded for Amber Hernandez-Bunce, the Licensee Designee/Administrator for this home. Mrs. Hernandez-Bunce also submitted a medical clearance request with a statement from a physician documenting their good health and current TB-tine negative results.

Mrs. Hernandez-Bunce has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this five-bed facility is adequate and includes a minimum of 1 staff to 5 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 acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (<u>www.miltcpartnership.org</u>), Identogo, and the related documents required to be maintained in each employee's record to demonstrate compliance.

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 Mrs. Hernandez-Bunce has, can administer medication to residents. In addition, the applicant 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.

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 themselves and direct care staff or volunteers and the retention schedule for all of the documents contained within their and each employee's file.

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 an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

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

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small group home (capacity 1-5).

February 10, 2015

Licensing Consultant

Date

Approved By:

M. Hale February 10, 2015

Area Manager

Date