



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS

SHELLY EDGERTON
DIRECTOR

June 14, 2016

Cynthia White
Life Center Inc.
Suite 104
48711 Vandyke
Shelby Twp, MI 48317

RE: Application #: AS630379155
Bay Pointe
2950 Birchena Crescent
West Bloomfield, MI 48324

Dear Ms. Weller:

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 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 (248) 975-5053.

Sincerely,

A handwritten signature in blue ink that reads "John P. Pochas".

John Pochas, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 860-3822

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AS630379155
Applicant Name:	Life Center Inc
Applicant Address:	15419 Middlebelt Livonia, MI 48154
Applicant Telephone #:	(734) 261-1094
Administrator/Licensee Designee:	Cynthia White
Name of Facility:	Bay Pointe
Facility Address:	2950 Birchena Crescent West Bloomfield, MI 48324
Facility Telephone #:	(248) 363-5817
Application Date:	08/11/2015
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED

II. METHODOLOGY

03/18/2015 Inspection Completed-Env. Health: A

08/11/2015 Enrollment

08/14/2015 Licensing Unit file referred for criminal history review
Red Screen/AS820071862.

08/14/2015 Contact - Document Received
Medical clearance and TB/Cynthia.

08/20/2015 Inspection Report Requested - Health
1024

08/20/2015 Comment
EHI Invoice 1024672.

09/09/2015 Contact - Telephone call received
VM-Pam/Oakland County Health Dept. EHI done March.

09/10/2015 Contact - Telephone call made
Beverly/Oakland County Health Dept. will cancel EHI Request.

09/16/2015 Application Complete/On-site Needed

09/16/2015 File Transferred To Field Office
Pontiac.

09/16/2015 Contact - Document Sent
Act & Rules.

09/28/2015 Contact - Document Received
Licensing file received from Central office

03/03/2016 Inspection Completed On-site

04/15/2016 SC-Application Received - Original

04/18/2016 Contact - Document Sent
Emailed request for documents.

04/19/2016 Inspection Completed – Full Compliance

05/04/2016 Inspection Report Requested - Health
1024

06/01/2016 Inspection Completed-Env. Health: A

06/13/2016 Recommend License Issuance.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules governing operation of small group adult foster care facilities with an approved capacity of 1-12 residents, licensed or proposed to be licensed after 5/24/94.

A. Physical Description of Facility

1) Environmental Conditions

Bat Pointe Home is located at 2950 Birchena Crescent, West Bloomfield, Michigan 48324. The home is situated to the west of Hiller Road and north of Commerce Road in Oakland County, Michigan. George Hopping, 710 Winter Park Lane, Petoskey MI 249770 is the owner of record for the property. Proof of ownership and lease agreement is contained in the facility file.

Bay Pointe Home is a brick sided ranch situated on a crawl space cinderblock foundation. The home is in a suburban area of mixed construction style homes. The interior of the home is comfortable, clean, and nicely decorated.

The main entrance opens into a foyer with a large living room to the right with the kitchen and dining rooms adjacent to the living room. The general area is spacious and open in design. Resident bedrooms are divided along a large and open hallway leading from the foyer area to the left. A gas-fired furnace is located in a separate mechanical room across from the office. Floor separation is provided by a metal fire rated door. A separate laundry room, containing a washer and dryer, is located near to the kitchen and office area. The home has two and a half full baths.

Resident bedrooms were measured at the time of inspection and were found to be of the following dimensions and accommodation capability:

BEDROOM	DIMENSIONS	SQ. FOOTAGE	OCCUPANCY
Bedroom # 1	16' x 12'	192	2
Bedroom # 2	15' x 13'5"	202	2
Bedroom # 3	12' x 10'	120	1
Bedroom # 4	12' x 11'	121	1
		Total Occupancy:	6

Compliance with rule R400.14409 (6) was demonstrated at the time of final inspection.

Based upon the above information, this facility has the square footage necessary to accommodate up to 6 adults, as requested in the application.

The living space for the home was measured and is listed below:

The home has a large living room that measures 20' x 17', and a kitchen area that measures 10' x 9 and dining area with measures 13'x 9'. The proposed capacity for the home is 6. Based upon the above measurements, there will be more than the required 35 square feet per resident minimal living space available for the residents of the home.

The bedrooms were properly furnished, clean, and neat. Each bedroom has an easily operable window with screen, a mirror for grooming and a chair. The bedrooms all have adequate closet space for the storage of clothing and personal belongings. The bedrooms also have adequate lighting to provide for the needs of the staff and residents. The shower and bathtub area is equipped with required non-skid surfacing and handrails, to assure resident safety in the maintenance of personal hygiene. The bathrooms were equipped with soap and paper towels for hand washing. I also observed that the facility was equipped with all required furnishings, linens, cooking and eating utensils.

Bay Pointe has private water and public sewage services. Garbage disposal service is provided through Rizo Management. The kitchen and bathroom areas were evaluated, and were found to be adequately equipped and in clean condition. All necessary appliances were present at the time of final inspection. Poisons and caustics will be stored in a secured area not used for food storage or preparation. The home has adequate food storage capacity. The refrigerator was equipped with thermometers to monitor the temperature of food storage. Water temperature was tested at the time of final inspection and found to be within the acceptable range as defined by rule R 40014401(2). The home also met the minimum requirements regarding food service (R 400.14402) and maintenance of premises (R 400.14403). Laundry facilities are located in a separate room off of the office area. The washer and dryer were properly installed and the dryer vent was made of acceptable non-combustible material.

Based on the above information and observations, I found the facility to be in substantial compliance with Departmental requirements regarding environmental conditions.

2. Fire Safety

Bay Pointe has a fully integrated hard wired smoke detection system to meet the requirements of R 400.14505. The smoke heads are placed as required by the rule. The home also has fire extinguishers located on each side of the main floor, which meet the requirements of R 400.14506. The home has more than two means of egress from the main floor and the exit doors all meet the requirements of rules R 400.14507 and R 400.14509. The means of egress were measured at the time of final inspection and meet the 30-inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom doors have conforming hardware. The bedrooms of the home also have the proper means of egress as required by R 400. 14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the

environmental and interior finish requirements of rules R 400.14502, R 400.14503, and R400.14504.

A gas forced air system heats the facility. The furnace is located in the basement. The applicant was advised that water temperature should be monitored on a regular basis. The water temperature was tested at the final inspection and found to be in compliance with the rule R 400.14401(2). I also found the electrical service (circuit breaker panel) to be adequate and in safe condition at the time of final inspection. The home was found to be in compliance with rules relating to interior finish, smoke detection equipment, fire extinguishers, means of egress, both generally and for bedrooms, heating equipment, flame producing equipment; enclosures, and electrical service.

I reviewed the facility's emergency procedures, which contain written instructions to be followed in case of fire, and medical emergency. Evacuation routes were also posted in the facility, with emergency telephone numbers posted in proximity to the telephone. The home had its emergency preparedness plans posted as required. The home has emergency medical services available through the city of West Bloomfield. The applicant understands the Departmental requirements relating to the maintenance of fire drill records with the applicant. The applicant has indicated that it is the applicant's intent to conduct fire drills at least on a monthly basis, one per shift per quarter, as well as to maintain a record of these fire drills, and resident performance during such drills.

Based upon the above observations and information, I found this facility to be in substantial compliance with administrative rules pertaining to emergency preparedness and fire safety.

B. Program Description

1) Program Statement

The applicant submitted a copy of the program statement to the Department for review and inclusion in the licensing record. The document is acceptable as written. The facility will offer a program and services for male and female adults with developmental disabilities. According to the program statement, the goal of the program is to maximize the functioning of each resident's capability and condition. Self-care and daily living skills will be promoted through ongoing guidance in areas of dressing, grooming, kitchen use, home management, meal preparation, house cleaning, home maintenance, laundry, budgeting, banking and use of community resources. The specific program to be provided to the residents is results oriented and consists of preadmission screening, admission evaluation, goal attainment, discharge and follow up. All transportation will be provided to facilitate that residents assessment plan requirements.

2) Required Information

On 09/23/15, the Department received a license application and application fee from Ms. Cynthia White, acting on behalf of Life Center Inc., to operate a small group AFC

facility at the above referenced address in West Bloomfield, Michigan. The filing endorsement from the Michigan Department of Licensing and Regulatory Affairs has a filing date of 6/15/82. The applicant is seeking to operate a program for Adult Foster Care homes and elder care facilities.

As part of the application process the applicant submitted admission, discharge policies for Bay Pointe home. The documents are acceptable as written. Also included in the Department files are a proposed staffing pattern, a current organizational chart, a proposed budget, a floor plan with room use and size specifications, and current financial documents. As part of the licensing process, the applicant presented personnel policies, routine procedures, and job descriptions for review during the final inspection. The documents are kept in the home and are available for review.

The administrative structure for Life Center Inc. is as follows:

Executive Director:	Erich Audretsch
Associate Executive Director:	Cynthia White
Associate Executive Director	Susan Weller
Quality Assurance:	Katie Stulock
Finance Director:	Kerry Johnson

A Records Clearance Request has been processed for Ms. Cynthia White. Based upon the information from the Record Clearance Report, I find that she is of good moral character, sound judgment, and is suitable to provide care to dependent adults. A current Licensing Medical Clearance form for Ms. White is contained in the record. The form indicates that she is in good physical and emotional health, and there is no reason why she should not be involved in the operation of this facility, and the provision of adult foster care. A current negative TB test is also on file with the Department. The licensing file also contains a written statement from Life Center Inc. naming Ms. White as the applicant designee.

As referenced above, Ms. White submitted, on behalf of Life Center Inc., financial information as part of the new application process. The applicant submitted a current balance sheet as well as a projected budget. Based on the information presented, I have determined that the applicant corporation has demonstrated a stable financial position and possesses the financial capability to operate an adult foster care facility at the above referenced location.

3) Qualifications and Competencies

The applicant designee, Ms. Cynthia White, has been involved in providing Adult Foster Care services to developmentally disabled individuals for over 25 years. Ms. White has a Bachelor degree in psychology and Master degree in Education. Ms. White is currently the administrator for the following other AFC homes in Oakland, Wayne and Macomb counties under Life Center Inc.:

AS630012697	Walbridge
AS630312997	Terova
AS500257047	Indian Hills
AS500012035	Mile End
AS500255064	Chapman
AS500247054	Eaton
AS820074883	Timber Trail
AS820015865	Garfield
AS820013833	Ozga

Based on such previous experience, Ms. White has demonstrated that she has the administrative and management expertise to run the Adult Foster Care facility. Based on personal contact and materials submitted I conclude that Ms. White has demonstrated her competency as required by the rule R 400.14201.

At the time of the final inspection, Ms. White indicated that there were no changes to report in information previously submitted in this application for a license. The applicant was advised of Departmental requirements relating to changes in information, as outlined under administrative rule R400.14103 (5), and has indicated that it is the intent of the corporation to assure continued compliance with this rule. The applicant was also reminded of Departmental requirements pertaining to posting of the license as outlined under rule R400.14103 (4), and has indicated that it is her intent to maintain compliance with this requirement.

Based on the above information, I have determined that Ms. White is in substantial compliance with rule R400.14103 regarding required information and reporting changes, and rules R400.14201, R400.14202, and R400.14205 regarding qualifications and health of the Applicant.

As required by the rule R400.14202, the home has a designated administrator. Ms. Cynthia White will act as administrator for Life Center Inc/Bay Pointe Home. Based on the information submitted and information reviewed in the home at the time of the final inspection, Ms. White meets the requirements of the rules and is qualified based on her background and training to act as administrator for New Life, Inc/Bay Pointe.

The applicant understands that in accordance with rules R 400.14307, R 400.14308, and R 400.14309 regarding behavior intervention and crisis intervention, individual intervention programs will only be used at the least restrictive level necessary as defined in the individual plan of service. Only trained staff shall implement such programs. Facility staff will not utilize seclusion or restraints. Documentation of the implementation of any behavior management program will be maintained in the facility and will be available at all times for Departmental review.

As mentioned above, the applicant submitted copies of the proposed admission and discharge policies to the Department for review, and inclusion in the licensing record. I have reviewed the documents and determine that they do not conflict in content or

intent with current rules and are therefore acceptable as written. A copy of the proposed staffing pattern is contained in the licensing file. The proposed staffing pattern appears to meet the care requirements of the proposed population described in the home's program statement and the minimum requirements of rule R 400.14206.

Individuals, who are interested in placement into the Life Center Inc/Bay Pointe home, should contact Ms. White at the facility. The applicant also understands that the facility will conduct its own evaluation and written assessment of any individual who is referred for placement. The purpose of this assessment is to judge whether the individual fits the criteria established in the home's program statement and is compatible with the current residents. A resident care agreement and a current health appraisal are also required at the time of admission. Based upon the above information, the facility is found to be in substantial compliance with requirements of rule R400.14302 pertaining to admission and discharge.

4) Facility and Employee Records

I have reviewed Life Center Inc.'s personnel policies and determined that they do not conflict with statutory or administrative rule requirements. The job descriptions for Life Center Inc. /Bay Pointe home were reviewed and submitted to the department. They are acceptable as written. I have also discussed with the applicant the good moral character requirements as related to the hiring of staff. Particular attention was placed upon the new rule related to the determination of good moral character by the applicant (R 400.14734b). I have reviewed the process that the home will follow and find it meets the intent of the administrative rules. The applicant is well aware of the requirements for employee records based on previous experience in Adult Foster Care.

a) Facility Records in General (Rule R400.14209)

The resident care agreement proposed for use in this facility is the current Department resident care agreement. Departmental requirements pertaining to maintaining a resident register, as required under rule R400.14210 have been discussed with the applicant and the applicant indicates that it is her intent to comply with this requirement. Copies of required Department forms were also given to the applicant during the course of the pre-licensing period. The applicant indicated that she understands the Department requirements for record keeping.

Home menus have been discussed and the applicant understands the requirements set forth in rule R400.14313 and has indicated that the home will meet the requirement with respect to nutrition and menus as stated in the rule. The applicant has been advised that all working menus are to be dated, prepared in advance, and that any changes or substitutions may be reflected on the working menus. Menu records are to be maintained in the facility for a period of one year. The applicant was also advised that a licensed physician must order any special diets implemented in the home.

b) Employee Records (rules R400.14204 and R400.14208)

Based on the applicant's previous experience, the applicant is well aware of the requirements for staff qualifications and training and intends to comply with the rules. The applicant understands that all employees must submit to a pre-employment physical, which includes a TB tine test. The results of the test are obtained before employment begins. The applicant will also verify age and check references before a person is offered employment. The applicant provides an orientation and training of its own relating to reporting requirements, emergency procedures, prohibited practices, resident rights, and personal care, protection, and supervision required in adult foster care. In addition, contract agency training resources are utilized e.g. MORC (Macomb Oakland Regional Center). Each employee must complete certified training in First Aid and CPR. Evidence of staff training will be maintained in the employee records for future Departmental review. Based upon our conversation at the time of inspection, the administrator/ applicant understand and intend to comply with the requirements of rules R400.14204 and R400.14208.

5) Resident Care, Services, and Records

Departmental requirements pertaining to resident records as specified in rule R400.14316 were discussed with the Applicant. The Applicant has indicated that it is the home's intent to comply with these requirements. During the course of the pre-licensing investigation, I advised the applicant of Departmental requirements pertaining to resident rights and prohibited practices as outlined under rules R400.14304 and R400.14308. The applicant attests that it is the intent of the home to achieve and maintain compliance with these requirements.

Also discussed were Departmental requirements pertaining to incident and accident reports, as outlined under rule R400.14311 and the requirements for safeguarding and distributing of prescription medication as outlined in rule R400.14312. The applicant has again indicated that it is their intent to achieve and maintain compliance with these requirements. I determined that the facility was in substantial compliance with Departmental requirements pertaining to investigating and reporting as stipulated in rule R400.14311, resident medication as stipulated in rule R400.14312, and resident rights as outlined in rule R400.14304.

I discussed the rules pertaining to the handling of resident funds with the administrator/ applicant at the time of the final inspection. The applicant is aware that these are required forms and an alternate form cannot be used unless the Department approves the form. Compliance will be evaluated at the time of renewal.

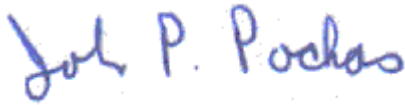
The applicant stated that they have an understanding of the rule R400.14317 relating to resident recreation and intends to comply through an activity schedule for the home which will expose the residents to a variety of community based recreation and leisure time activities.

The applicant is aware of the requirements of rules R400.14318 and R400.14319, and assures me that the applicant will comply with the requirements of the rules regarding emergency and regular transportation.

In conclusion, the facility, by virtue of observation, interview, and review of program documentation, is found to be in substantial compliance with Departmental requirements relating to resident care, services, and records. A more complete evaluation of resident services will be made at the time of license renewal.

IV. RECOMMENDATION

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

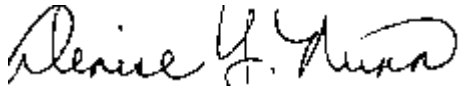


06/13/2016

John Pochas
Licensing Consultant

Date

Approved By:



06/14/2016

Denise Y. Nunn
Area Manager

Date