



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

August 7, 2017

Samantha Thelen
Grandhaven Living Center LLC
Suite 200
3196 Kraft Avenue SE
Grand Rapids, MI 49512

RE: Application #: AL330378741
Grandhaven Living Center
3145 West Mt. Hope
Lansing, MI 48911

Dear Ms. Thelen:

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 20 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 (517) 284-9720.

Sincerely,

A handwritten signature in cursive script that reads "Leslie Barner".

Leslie Barner, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 256-2181

enclosure

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

I. IDENTIFYING INFORMATION

License Application #:	AL330378741
Licensee Name:	Grandhaven Living Center LLC
Licensee Address:	Suite 200 3196 Kraft Avenue SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 464-1564
Administrator:	Sheila Ward
Licensee Designee:	Samantha Thelen
Name of Facility:	Grandhaven Living Center
Facility Address:	3145 West Mt. Hope Lansing, MI 48911
Facility Telephone #:	(517) 485-5966
Application Date:	07/30/2015
Capacity:	20
Program Type:	AGED

II. METHODOLOGY

07/30/2015	On-Line Enrollment
08/04/2015	Comment Fire and environmental inspection reports approved per area manager
08/04/2015	Contact - Document Sent Rules & Act booklets
08/04/2015	Application Incomplete Letter Sent
06/13/2017	Application Incomplete Letter Sent
07/18/2017	Application Complete/On-site Needed
07/18/2017	Inspection Completed-BCAL Full Compliance
07/19/2017	Inspection Completed-Fire Safety : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a newly built, one-story, u-shaped, ranch style facility located in the city of Lansing. There are 20 resident bedrooms and bathrooms all located on the main floor of the facility. The facility also includes a living room, kitchen, dining area, and beauty shop on the main floor. The facility is wheelchair accessible with five approved means of egress that are equipped with a ramp from the main level. The facility utilizes a public water supply and sewage disposal system.

There are nine gas water heaters and furnaces located within six mechanical rooms on the main floor of the facility.

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. There are 82 smoke detectors throughout the facility that have been installed near sleeping areas, on each occupied floor of the home, and near all flame or heat-producing equipment and the facility is fully sprinkled. The facility was determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules on July 19, 2017.

Resident bedrooms range in size, with each having a full bathroom with walk-in shower, closet space, bedroom area and living room space. There are 12 one-bedroom rooms, four one-bedroom deluxe rooms, and four studio rooms. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Type	Room Dimensions	Total Square Footage	Total Resident Beds
1	One – bedroom	23' 4" X 21' 4"	498	1
2	One – bedroom	23' 4" X 21' 4"	498	1
3	One – bedroom	23' 4" X 21' 4"	498	1
4	One – bedroom	23' 4" X 21' 4"	498	1
5	One – bedroom	23' 4" X 21' 4"	498	1
6	One – bedroom	23' 4" X 21' 4"	498	1
7	One – bedroom	23' 4" X 21' 4"	498	1
8	One – bedroom	23' 4" X 21' 4"	498	1
9	One – bedroom	23' 4" X 21' 4"	498	1
10	One – bedroom	23' 4" X 21' 4"	498	1
11	One – bedroom	23' 4" X 21' 4"	498	1
12	One – bedroom	23' 4" X 21' 4"	498	1
13	One – bedroom deluxe	32' 0" X 16' 0"	512	1
14	One – bedroom deluxe	32' 0" X 16' 0"	512	1
15	One – bedroom deluxe	32' 0" X 16' 0"	512	1
16	One – bedroom deluxe	32' 0" X 16' 0"	512	1
17	Studio	15' 3" X 9' 10"	150	1
18	Studio	15' 3" X 9' 10"	150	1

19	Studio	15' 3" X 9' 10"	150	1
20	Studio	15' 3" X 9' 10"	150	1

The facility contains a large common dining room, bistro area for refreshments, and living room space. The indoor living and dining areas measure a total of 1,581 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 20 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to 20 male or female residents who are aged in need of socialization and assistance with activities of daily living. The program will include life enrichment staff who are trained in the planning and/or implementation of resident activities, including one-on-one sessions, and small and large group activities. The program includes assistance with activities of daily living, monitoring of health care needs, three meals a day along with snacks, laundry services, life enrichment activities, housekeeping, and maintenance services. The applicant intends to accept referrals residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public library, local shopping centers that offer transportation, churches, the universities, capitol area transportation authority (CATA), etc. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Administrator Qualifications

The applicant is Grandhaven Living Center, L.L.C., a "Domestic Limited Liability Company", established in Michigan on 3/2/2001. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of Grandhaven Living Center, L.L.C. have submitted documentation appointing Samantha Thelen as licensee designee for this facility and Sheila Ward as the administrator of the facility.

Criminal history background checks of the applicant and administrator were completed and they were determined to be of good moral character to provide licensed adult foster care. The applicant and administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

The applicant and administrator have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Licensee designee Samantha Thelen has 15 years of experience working with the aged population. Specifically, Ms. Thelen has managed and developed activities for the aged population, served as a recreation therapist wherein she developed programs specific to dementia, stroke and rehabilitation. Ms. Thelen has resident service plan management experience, served as administrator for the applicant's other separately licensed facilities, and has served as licensee designee for the other properties wherein she has successfully managed oversight of licensing compliance. Ms. Thelen has a Bachelor of Science degree from Grand Valley State University. Administrator Sheila Ward has 11 years of experience working with the aged population. Specifically, Ms. Ward worked as a recreation assistant where she developed and implemented activities for residents with dementia, worked as life enrichment director where she educated and trained staff and residents' family members about dementia, served as administrator at other licensed facilities wherein she successfully managed the day to day operations of the facilities and successfully managed oversight of licensing compliance. Ms. Ward has been formally educated at Lansing Community College in dementia, psychology, and gerontology.

The staffing pattern for the original license of this 20 bed facility is adequate and includes a minimum of 2 staff for 20 residents per shift. The applicant acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The applicant has indicated that direct care staff will be awake during sleeping hours. The applicant has indicated that each staff member will be capable of providing for the residents' needs consistent with the service plans. All staff members will receive training in dementia care, providing sufficient knowledge to provide appropriate care, communication, and protection to residents.

The applicant acknowledged an understanding of the qualifications, suitability, and training 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. The applicant acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee designee will 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 acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, the applicant acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

The applicant acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

The applicant acknowledge the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal 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 updating and completing those forms and obtaining new signatures for each resident on an annual basis.

The applicant acknowledged the responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

The applicant acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged that a separate Resident Funds Part II BCAL-2319 form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

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

The applicant acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home with a capacity of twenty (20) residents.



8/4/17

Leslie Barner
Licensing Consultant

Date

Approved By:



08/07/2017

Dawn N. Timm
Area Manager

Date