



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

September 1, 2017

Angela Joquico
Special Tree Macomb Center LTD
10909 Hannan
Romulus, MI 48174

RE: Application #: AM500377879
Middle Branch Residential Center
45500 Romeo Plank Rd.
Macomb Township, MI 48044

Dear Ms. Joquico:

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 9 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, appearing to read "Linda Pavlovski".

Linda Pavlovski, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(586) 835-6827

enclosure

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

I. IDENTIFYING INFORMATION

License Application #:	AM500377879
Applicant Name:	Special Tree Macomb Center LTD
Applicant Address:	10909 Hannan Romulus, MI 48174
Applicant Telephone #:	(734) 239-1937
Administrator/Licensee Designee:	Angela Joquico
Name of Facility:	Middle Branch Residential Center
Facility Address:	45500 Romeo Plank Rd. Macomb Township, MI 48044
Facility Telephone #:	(586) 846-3747
Application Date:	05/19/2015
Capacity:	9
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

05/19/2015	Enrollment Online
06/04/2015	Inspection Report Requested - Fire
06/04/2015	Contact - Document Sent Fire Safety String
06/04/2015	Contact - Document Sent Rules & Act booklets
06/10/2015	Contact - Document Received Licensing file received from Central office
06/24/2015	Application Incomplete Letter Sent Sent by email in PDF format to Ms. Joquico, licensee designee.
02/28/2017	Contact - Document Received E-mail from licensee Angie Joquico. Discussed setting up fire inspection.
03/16/2017	Contact - Document Received E-mail communication with licensee Angie Joquico.
04/04/2017	Contact - Document Received E-mail communication with licensee Angie Joquico. Construction is on target and it is anticipated it will be completed in about six weeks.
05/01/2017	Contact - Document Received Received update regarding status of construction from licensee Angie Joquico.
05/09/2017	Contact - Document Sent E-mail communication with licensee Angie Joquico regarding training questions.
06/14/2017	Contact - Document Received Update regarding construction and waiting on fire inspection to be completed.
06/28/2017	Contact - Document Received E-mail communication regarding updates on construction and fire inspection.
07/05/2017	Inspection Completed On-site

07/05/2017	Inspection Completed-Env. Health: A
07/12/2017	Inspection Completed-Fire Safety : A
07/12/2017	Contact - Document Received Information received regarding an update on the address of facility from licensee.
08/30/2017	Contact - Document Received Received updated medical clearance and T.B. results from licensee Angie Joquico.
08/30/2017	Application Complete

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Middle Branch Residential Center is located at 45500 Romeo Plank Road in Macomb Township. The center is a new construction single story structure that is wheelchair accessible. The center consists of a dining room, kitchen, and multiple sitting/lounge areas overlooking wetlands on the property. There are a total of nine individual bedrooms with three full bathrooms located near the bedrooms. There is an attached garage with a protected landing area for residents.

The furnace and hot water heater are located on the first floor a with solid core door which has a 2-hour-fire-resistance rating equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. There is also a fire suppression sprinkler system installed and fire extinguishers placed throughout the home that was inspected and approved by the Bureau of Fire Services on 7/12/2017. There is an on-demand generator in case of emergencies. Also, there are nurse pull chords and push buttons installed in each bedroom, bathroom, and kitchen area.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
Bedroom #1	12'2" x 13'6"	164 sq. ft.	1
Bedroom #2	12'6" x 13'	163 sq. ft.	1
Bedroom #3	12'6" x 12'	150 sq. ft.	1
Bedroom #4	12'6" x 13'	163 sq. ft.	1
Bedroom #5	13'1" x 12'6"	164 sq. ft.	1

Bedroom #6	12'2" x 13'5"	163 sq. ft.	1
Bedroom #7	12'2" x 13'4"	162 sq. ft.	1
Bedroom #8	12'11" x 13'1"	169 sq. ft.	1
Bedroom #9	12'7" x 13'1"	164 sq. ft.	1

Total capacity: 9

The living, dining, and sitting room areas measure a total of 1,189 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate nine (9) residents per the AFC the rule requirement R400.14405 (1) and R400.14409 (2)(3). It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Middle Branch Residential Center is designed to provide a residential program for individuals who require 24-hour supervision, protection and personal care. The center can accept up to nine (9) adults both male and female with varying functional levels who have experienced life altering changes, primarily traumatic brain injuries and spinal cord injuries. The center is structured to create the least restrictive environment possible and to promote independence in daily living skills. The program services provided include assistance and skills training in basic and advanced activities of daily living. Group and individual leisure activities and community integrations. Transportation and assistance as needed with community activities, services, and therapeutic programs. The services will be provided by trained professionals who are capable of meeting the physical, emotional, intellectual, and social needs of each resident. The rehabilitation team will develop and implement a treatment plan, which will be individual to each resident's needs and goals.

Admission and discharge policies, program statement, refund policy, personnel policies, standard procedures, as well as floor plans, organizational chart, permission to inspect, proof of ownership, staff training, fire evacuation plan, and staff pattern for the facility were reviewed and accepted as written as outlined in Rule(s) 400.14103, 400.14207, 400.14209, and 400.14302.

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, and the responsible agency.

C. Applicant and Administrator Qualifications

The applicant is Special Tree Residential Centers, LTD, which is a "For Profit Corporation" and was established in Michigan on 9/4/1985. 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 Board of Directors of Special Tree LTD has submitted documentation appointing Angela Joquico as Licensee Designee for this facility and Geoffrey Rantala as the Administrator of the facility. Ms. Joquico has been appointed as the licensee designee at numerous licensed AFC homes in Macomb, Oakland, Saginaw and Wayne Counties. Ms. Joquico has been employed with Special Tree Rehabilitation System since 1999. Mr. Rantala has been employed with Special Tree since 1988.

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

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules as outlined in Rule 400.14201 (3)(a) through (i).

The staffing pattern for the original license of this 9-bed facility is adequate and includes a minimum of 1 staff to 5 residents per shift. All staff shall be awake during sleeping hours.

Angela Joquico, the licensee designee 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. Angela Joquico 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 as required with Rules 400.14204 and 400.14208.

Angela Joquico 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 (www.miltcpartnership.org), L-1 Identity Solutions™ (formerly Identix ®), and the related documents required to be maintained in each employees record to demonstrate compliance.

Angela Joquico 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. In addition, Angela Joquico 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 required with Rules 400.14312.

Angela Joquico 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 consistent with Rules 400.14304.

Angela Joquico 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. Angela Joquico 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 per Rules 400.14311.

Angela Joquico acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply consistent with Rules 400.14315.

Angela Joquico 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, Angela Joquico 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 consistent with Rule 400.14316(1)(a) through (2).

Angela Joquico 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 per Rules 400.14302.

Both the staff and resident files will be reviewed prior to the expiration of the temporary license during the next onsite inspection.

D. Rule/Statutory Violations

The facility has been determined to be in full compliance with the applicable administrative rules and the licensing statute based upon the onsite inspections conducted and the licensee's intent to comply with all administrative rules for a medium group home (12 or less) as well as the licensing act, Public Act 218 of 1979, as amended.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult medium group home (capacity 1-9).

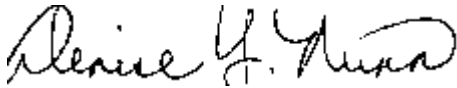


9/1/2017

Linda Pavlovski
Licensing Consultant

Date

Approved By:



09/01/2017

Denise Y. Nunn
Area Manager

Date