

RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

June 6, 2018

Savannah Green Sandyside Senior Living 8257 Peaceful Valley Clarkston, MI 48348

> RE: Application #: AL630388808 Sandyside Senior Living 9259 Sandyside White Lake, MI 48386

Dear Ms. Green:

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 (248) 975-5053.

Sincerely,

Mildred Afschuracz

Mildred A. Schwarcz, Licensing Consultant Bureau of Community and Health Systems 4th Floor, Suite 4B 51111 Woodward Avenue Pontiac, MI 48342 (248) 860-3967

enclosure

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

I. IDENTIFYING INFORMATION

License Application #:	AL630388808	
••		
Licensee Name:	Sandyside Senior Living	
Licensee Address:	9259 Sandyside	
	White Lake, MI 48386	
Licensee Telephone #:	(248) 670-2618	
Administrator/Licensee Designee:	Savannah Green	
Name of Facility:	Sandyside Senior Living	
	0050 Canabraida	
Facility Address:	9259 Sandyside	
	White Lake, MI 48386	
Facility Telephone #:	(248) 670-2618	
Application Date:	06/06/2017	
Capacity:	20	
Program Type:	PHYSICALLY HANDICAPPED	
	AGED	
	ALZHEIMERS	

II. METHODOLOGY

06/06/2017	On-Line Enrollment	
06/07/2017	Contact - Document Sent Rule & Act 218 Books	
06/20/2017	Contact - Document Received Record clearance for Savannah Green, licensee designee	
06/21/2017	Inspection Report Requested - Health 1027115	
06/21/2017	Inspection Report Requested - Fire	
06/21/2017	Contact - Document Sent Fire Safety String	
06/21/2017	Contact - Document Received Record clearance for Mandy Utter, proposed administrator	
06/28/2017	Contact - Document Received Livescan fingerprinting request for Savannah Green	
07/05/2017	Inspection Completed-Environmental Health: A	
07/14/2017	Contact - Document Received IRS letter for EIN #	
07/17/2017	Contact - Document Received Licensing file received from Central office	
07/25/2017	Application Incomplete Letter Sent Letter requesting additional information prior to initial onsite inspection.	
01/30/2018	Application Complete/On-site Needed	
01/30/2018	Inspection Completed On-site	
03/06/2018	Inspection Completed-Fire Safety: B Temporary until 051018	
04/30/2018	Inspection Completed-BCAL Full Compliance	
05/14/2018	Inspection Completed-Fire Safety: A	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The proposed facility is a single story, brick structure, located in a residential neighborhood in the township of White Lake. The facility is situated across the street from a public school. There are community-based resources near the facility, such as restaurants, grocery stores, public parks, public library, hospitals/outpatient medical clinics, places of worship, and retail stores.

The facility is heated with a boiler, providing hot water for heating and distributed via baseboard radiators. The boiler/heating plant room is located in an enclosed room. The heating plant and the enclosure have been granted approval by the Bureau of Fire Services. A fire safety inspection was conducted on 05/14/2018 and the facility was granted an "A" rating. The facility is equipped with the required smoke detection and fire suppression system, in accordance with the fire safety rules for adult foster care large group homes (13 to 20).

The facility utilizes a private water supply and sewage disposal system. The Oakland County Health Department conducted an environmental health inspection on 05/09/2017 and granted the facility an "A" rating.

The facility consists of one single occupancy resident bedroom, six double occupancy resident bedrooms, two multi-occupancy resident bedrooms, one half-bathroom, three full bathrooms, a commercial kitchen, a living room, a dining room, a covered porch, a staff office, and a storage room. There is adequate onsite parking for staff and visitors. There are written consents in the file from residents who are continuing to occupy the multi-occupancy bedrooms.

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	13'7" x 12'5"	169	2
2	12'2" x 13'5"	163	2
3	14'7" x 10'	146	2
4	10'2" x 14'	142	2
5	20'6" x 14'	226	3
6	20'2" x 14'2"	285	4
7	10'4" x 13'6"	139	2
8	10'3" x 14'10"	152	2
9	8' x 12'	96	1

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

The living and dining room areas measure a total of 768 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The maximum capacity cannot exceed 20 residents.

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 twenty (20) male or female ambulatory and non-ambulatory adults who are physically handicapped, aged and/or diagnosed with Alzheimer's. Care and services will be provided 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. Residents will be referred from local hospitals, local churches, community-based agencies, and private referral sources.

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, if applicable.

The licensee will provide and/or arrange all transportation for program and medical needs. 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

The applicant is Sandyside Senior Living, L.L.C., which is a "Domestic Limited Liability Company", established in Michigan, on 08/31/2017. The business entity was initially established on 06/20/2017 as a limited liability partnership, but this has since been dissolved.

On 06/06/2017, Sandyside Senior Living submitted an application to provide adult foster care services to 20 males and females, at 9259 Sandyside, White Lake. This is essentially an application for a change in licensee, as this property has been considered continuously licensed. The previous license name is Estabrooks Havencrest and the previous license number is AL630007327. At the present time, there are 15 residents in the facility.

Sandyside Senior Living 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 Sandyside Senior Living, L.L.C. has submitted documentation appointing Savannah Green as Licensee Designee and Administrator of the facility.

A licensing record clearance request was completed with no lein convictions recorded for Ms. Green, licensee designee and administrator. Ms. Green submitted a medical clearance request with a statement from a physician documenting her good health and current TB-tine negative results.

Ms. Green provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Green submitted proof of her educational background and her experience providing care to the physically handicapped, the aged, and individuals with Alzheimer's. Ms. Green has been working in this licensed adult foster care setting for the past four years, in the capacity of a home manager. Ms. Green submitted documentation of competency and training in all the areas required by the licensing rules for an applicant and an administrator.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 2 staff to 20 residents per shift. All staff shall be awake during sleeping hours.

Ms. Green acknowledged 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.

Ms. Green acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have <u>regular</u>, <u>ongoing</u>, "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>), and the related documents required to be maintained in each employee's record to demonstrate compliance.

Ms. Green acknowledged 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, Ms. Green 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.

Ms. Green acknowledged 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, Ms. Green acknowledged 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.

Ms. Green acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Ms. Green indicated that it is their intent to achieve and maintain compliance with these requirements.

Ms. Green acknowledged 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. Ms. Green 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.

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

Ms. Green acknowledged 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, Ms. Green acknowledged 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.

Ms. Green acknowledged 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

At the time of this recommendation for licensure, the applicant, Sandyside Senior Living LLC is in full compliance with all applicable licensing rules and statutory requirements for adult foster care large group homes (13 to 20).

IV. RECOMMENDATION

I recommend issuance of a temporary license to Sandyside Senior Living LLC to provide adult foster care services at 9259 Sandyside, White Lake.

Mildred Afschuracz

05/23/2018

Mildred A. Schwarcz Licensing Consultant

Date

Approved By:

Denie J. Munn

06/06/2018

Denise Y. Nunn Area Manager Date