



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

October 29, 2018

Simabarashe Chiduma
Open Arms Link
#107A
4700 S. Hagadorn Rd
East Lansing, MI 48823

RE: Application #: AS330395823
Open Arms Greenhouse
922 Green Street
Lansing, MI 48906

Dear Mr. Chiduma:

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 (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 #:	AS330395823
Applicant Name:	Open Arms Link
Applicant Address:	329 Crest Street Lansing, MI 48910
Applicant Telephone #:	(517) 203-5807
Licensee Designee:	Simabarashe Chiduma
Administrator	Mascline Chiduma
Name of Facility:	Open Arms Greenhouse
Facility Address:	922 Green Street Lansing, MI 48906
Facility Telephone #:	(517) 455-8300
Application Date:	08/15/2018
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODOLOGY

08/15/2018	Application Received Original Online app
08/15/2018	Fee Received Original Online fee \$105
08/15/2018	Enrollment Online enrollment
08/16/2018	Contact - Document Received IRS ltr
08/16/2018	Contact - Document Sent Rule & Act booklets
08/16/2018	File Transferred To Field Office Lansing
08/27/2018	Application Incomplete Letter Sent
09/14/2018	Contact - Document Received Received admission policy, budget, contracts, discharge policy, floor plans, lease, organizational chart, permission to inspect, program statement, standard/routine procedures, staffing pattern, experience of administrator and licensee designee, personnel policies, job descriptions, and TB test results for administrator
09/14/2018	Application Incomplete Letter Sent To Simba Chiduma via email
09/26/2018	Contact - Document Received Received articles of incorporation, by laws, board of directors list, appointment of licensee designee and administrator, medical clearance and TB test for licensee designee, medical clearance and TB test for administrator, CPR and first aid certification for licensee designee and administrator, updated program statement, additional training and experience documentation for

aged population for licensee designee and administrator, updated standard/routine procedures, and updated personnel policies.

09/26/2018	Application Complete/On-site Needed
10/11/2018	Inspection Completed On-site
10/11/2018	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a two-story home with vinyl siding located on a quiet dead-end street in the city Lansing in Ingham County. The facility has a paved driveway where staff and visitors can park and there is also parking available in the street in front of the facility. The facility has a living room, dining area, kitchen, two resident bedrooms and one full bathroom on the main floor of the home and four resident bedrooms, an activity room, and one full bathroom on the second story. There is one main exit to the facility which is located on the main floor in the dining area. The facility does not accept residents requiring wheelchairs. The applicant acknowledged that residents with mobility impairments may only reside on the main floor of the facility. The facility has public water and sewage.

The gas furnace and hot water heater as well as the laundry area are in the basement of the home. The door separating the basement from the main level of the home is a metal 20-minute fire rated door 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. There are smoke detectors in the kitchen, in every resident bedroom, at the top of the stairs on the second level of the home and near the heating plant in the basement. The facility is equipped with fire extinguishers on each floor of the facility including the basement.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1 (white room)	9' 0" X 10' 2"	92	1
2 (orange room)	9' 11" X 10' 6"	104	1
3 (blue room)	9' 2 ½" X 11' 3 ½"	105	1
4 (blue/white room)	9' 9 ½" X 11' 11"	117	1
5 (light blue room)	8' 7" X 11' 7"	99	1
6 (off white room)	10' 5" X 13' 7"	142	1
7 (activity room)	9' 4 ½" X 10' 2 ½"	97	0; used as activity room

The indoor living and dining areas measure a total of 318 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

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

B. Program Description

The facility will provide 24-hour supervision, protection and personal care for six (6) male or female residents. The facility will accept residents who are both physically and mentally challenged, moderate to high functioning developmentally disabled, non-violent, non-aggressive and medically manageable mentally ill or aged adults. Residents admitted to the facility will need reminders and supervision when it comes to direct personal care. Residents admitted to the facility will be age 65 or below at the time of admission and will have full mobility, be capable of walking, exercising, taking showers/baths and oral care. The staff members at the facility are employed to provide personal care, prepare and serve meals, guidance, assistance with conflict resolution, positive structure and supervision to ensure safety and support tranquility. The facility will provide the residents with the opportunity to participate in social and recreational activities in the home as well as at least two outings and activities in the community weekly. The applicant intends to accept referrals from Community Mental Health and Tri-County Office on Aging.

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 library, local museums, parks, shopping centers, churches, YMCA, restaurants, volunteer opportunities at the Humane Society, and resources such as Michigan State University. 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 Open Arms Link, Inc., which is a “Non Profit Corporation”, established in Michigan on 6/20/16. 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 Open Arms Link have submitted documentation appointing Simbarashe Chiduma as licensee designee for this facility and Mascline Chiduma 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. Mr. Chiduma, the licensee designee provided documentation that he has approximately fifteen years of experience working with developmentally disabled, mentally ill, and aged adults. Mr. Chiduma has completed training through CEI Community Mental Health program, Baker College, and Central Michigan University. Mr. Chiduma completed CPR and First Aid training through the American Red Cross. Mrs. Chiduma, the administrator submitted documentation that she has approximately fifteen years of experience working with developmentally disabled, mentally ill, and aged adults. Mascline Chiduma provided documentation that she completed training through CEI Community Mental Health program. Mrs. Chiduma completed CPR and First Aid training through the American Red Cross. Mr. Chiduma has been the licensee designee for two additional licensed adult foster care facilities since 9/15/14 and has successfully ensured both facilities are compliant with licensing rules for adult foster care small group homes. Mrs. Chiduma has been the administrator for two additional licensed adult foster care facilities since 9/15/14 and has successfully managed the responsibility for the daily operation and management of the adult foster care small group homes. Mr. Chiduma shared that the licensee Open Arms Link, Inc. was the recipient of an award for outstanding care from CEI Community Mental Health when Open Arms Link, Inc. was named 2017 provider of the year.

The staffing pattern for this six-bed facility is adequate and includes a minimum of one staff members for six residents per shift. Mr. Chiduma 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. Mr. Chiduma has indicated that direct care staff will be awake during sleeping hours.

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 acknowledged 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 acknowledged 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(s) 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 small group home with a capacity of six residents.

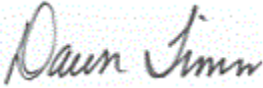


10/17/18

Leslie Barner
Licensing Consultant

Date

Approved By:



10/29/2018

Dawn N. Timm
Area Manager

Date