



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 13, 2019

Paula Martin
Stay At Home Senior Care1 LLC
21725 Ulrich
Clinton Twp, MI 48036

RE: Application #: AS500395860
Our Place Senior Assisted Living Glenwood
22410 Glenwood
Clinton Twp., MI 48036

Dear Ms. Martin:

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, 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 #:	AS500395860
Applicant Name:	Stay At Home Senior Care1 LLC
Applicant Address:	21725 Ulrich Clinton Twp., MI 48036
Applicant Telephone #:	(586) 625-2231
Administrator/Licensee Designee:	Paula Martin
Name of Facility:	Our Place Senior Assisted Living Glenwood
Facility Address:	22410 Glenwood Clinton Twp., MI 48036
Facility Telephone #:	(586) 625-2231
Application Date:	08/13/2018
Capacity:	6
Program Type:	AGED ALZHEIMERS

II. METHODOLOGY

08/13/2018	Enrollment Online enrollment
08/20/2018	Contact - Document Sent Rule & Act booklets
08/20/2018	Application Incomplete Letter Sent Rec cl, RI-030 for Paula; rec cl for admin; IRS letter
09/18/2018	Contact - Document Received App; IRS letter; cl, RI-010, med cl, TB for Paula (LD & Admin)
09/20/2018	Contact - Document Received Licensing file received from Central office
11/06/2018	Application Incomplete Letter Sent
02/04/2019	Contact - Document Received Required licensing documents received.
02/04/2019	Inspection Completed On-site
02/04/2019	Inspection Completed-BCAL Sub. Compliance Physical Plant corrections & missing required documentations.
02/18/2019	Contact - Document Received Received licensing documentations.
02/22/2019	Application Complete/On-site Needed
02/22/2019	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single-family brick ranch-style home. The home is wheelchair accessible. The home is in a residential neighborhood in Clinton Township, a suburb north of the city of Detroit. The home and community are serviced by public water and sewage systems. Medical, educational, and social resources are located within proximity to the home in the surrounding community.

Our Place Senior Assisted Living Glenwood features an interconnected smoke detection. Fire extinguishers have been installed and mounted as required in the home. The home is heated by a gas, forced-air heating system located on the first floor of the home with a solid-core door equipped with a self-closing device as required by

R400.14511. The home also features central air conditioning. The facility's heating, cooling, and electrical systems have been inspected by qualified inspectors and certified as being in good operating condition.

The sitting area is located near the entrance of the home and the family room is next to the kitchen/dining area. The residents' dining area is shared with the common area. The laundry room is near the kitchen area. The home features two full baths in the hallway by the bedrooms. I measured all the community living space and bedrooms within the home to determine occupancy limits.

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	15'5" x 15'8"	242 sq. ft.	1
Bedroom #2	11'6" x 8'11"	103 sq. ft.	1
Bedroom #3	8'9" x 11'6" plus 2' x 2'10"	106 sq. ft.	1
Bedroom #4	12' x 9'3" plus 4'10" x 6'5"	142 sq. ft.	1
Bedroom #5	15'8" x 15'5"	242 sq. ft.	2

Total capacity: 6

The dining, sitting room, and family room areas measure a total of **785** 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 six (6) 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

Stay At Home Senior Care 1, LLC submitted an original application for licensure on August 2018. The intended population is male and female adults 55 years of age or older who require foster care due to being aged and Alzheimer's in the least restrictive environment possible. The facility is also able to accommodate any individual that may use a wheelchair.

Our Place Senior Assisted Living Glenwood is committed to providing the highest quality of service and care in a compassionate, nurturing surrounding. Our Place Senior Assisted Living Glenwood is dedicated to creating a supportive, safe, clean, and home-like environment for the residents. Our Place Senior Assisted Living Glenwood will encourage residents to stay active and maintain positive social skills. Our Place Senior Assisted Living Glenwood will provide full assistance with personal care and daily activities, medication management, meals, daily housekeeping and laundry

services, 24-hour monitoring for safety and responding to health needs to coordinate medical care. Our Place Senior Assisted Living Glenwood will also meet the needs of their residents that have been identified with Alzheimer's by coordinating with medical professionals, and with the family/legal guardian to meet their specific needs.

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.

C. Applicant and Administrator Qualifications

The applicant is Stay At Home Senior Care 1, LLC, and was established in Michigan on January, 2015. 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 Stay At Home Senior Care 1, LLC has submitted documentation appointing Paula Martin as Licensee Designee for this facility. Ms. Martin has direct experience and knowledge in working with the aged and Alzheimer's population. Ms. Martin worked as a nutrition assistant for three years and then two years as a Food Service Director of Operations in a nursing home. Ms. Martin is currently the owner of in-home care services, Stay at Home Senior Care, and has been operating for ten years. Ms. Martin completed high school and received an Associate Degree from the Art Institute of Pittsburgh in 1983.

A licensing record clearance request was completed with no LEIN convictions recorded for Ms. Martin. Ms. Martin submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results.

Ms. Martin has 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 6-bed facility is adequate and includes 1-2 staff to 6 residents per day and afternoon shifts, as well as midnight shifts, depending on the needs of the residents. All staff shall be awake during sleeping hours.

Paula Martin, the licensee designee, acknowledges her 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. Martin acknowledges her 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 the documents contained within each employee's file. Ms. Martin 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.

Ms. Martin acknowledged an understanding of the responsibility to assess the good moral character of employees, volunteers, 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 employee record to demonstrate compliance.

Ms. Martin 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, Ms. Martin 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.

Ms. Martin acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Ms. Martin indicated that it is her intent to achieve and maintain compliance with these requirements consistent with Rules 400.14304.

Paula Martin 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. Ms. Martin has indicated her 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.

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

Paula Martin acknowledges her responsibility to obtain all 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. Martin acknowledges her responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all the documents contained within each resident’s file consistent with Rule 400.14316(1)(a) through (2).

Paula Martin acknowledges her 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 small group home (6 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 small group home (capacity 1-6).

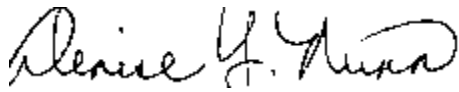


2/25/2019

Linda Pavlovski
Licensing Consultant

Date

Approved By:



03/13/2019

Denise Y. Nunn
Area Manager

Date