



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

March 21, 2019

Scott Schrum
Residential Opportunities, Inc.
1100 South Rose Street
Kalamazoo, MI 49001

RE: Application #: AM390382556
E & F Douglas Group Living
1428 N. 30th Street
Galesburg, MI 49053

Dear Mr. Schrum:

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 12 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 blue ink that reads "Michele Streeter".

Michele Streeter, Licensing Consultant
Bureau of Community and Health Systems
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 251-9037

enclosure

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

I. IDENTIFYING INFORMATION

License Application #:	AM390382556
Applicant Name:	Residential Opportunities, Inc.
Applicant Address:	1100 South Rose Street Kalamazoo, MI 49001
Applicant Telephone #:	(269) 343-3731
Administrator:	Vicki Richardson
Licensee Designee:	Scott Schrum
Name of Facility:	E & F Douglas Group Living
Facility Address:	1428 N. 30th Street Galesburg, MI 49053
Facility Telephone #:	(269) 343-9720
Application Date:	04/27/2016
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED

II. METHODOLOGY

03/30/2016	Inspection Completed-Env. Health : A
04/27/2016	Enrollment
05/03/2016	Inspection Report Requested – Fire
05/03/2016	Contact - Document Sent- Rule/ACT books and Fire Safety String
05/03/2016	Application Incomplete Letter Sent. 1326/Fingerprint/LiveScan form for Scott Schrum and 1326 for Vicki Richardson
06/08/2016	Contact - Document Received-1326/Fingerprint/RI 030 for Scott Schrum and 1326 for Vicki Richardson
06/09/2016	Lic. Unit file referred for background check review. Red Screen - AS390243303
06/16/2016	File Transferred To Field Office Lansing
07/06/2016	Application Incomplete Letter Sent
09/21/2017	Consultation Requested/Provided- Sent Vicki Richardson a rule book and copies of the renewal worksheets in preparation of upcoming original on-site inspection.
10/10/2017	Application Complete/On-site Needed
10/10/2017	Inspection Completed On-site
01/24/2019	Inspection Completed- Fire Safety: A
02/05/2019	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

E & F Douglas Group Living is a two story, 14-bedroom home with 8 bathrooms and a large walk-out basement. The facility is situated in a wooded setting in the city of Galesburg, located in the Charter Township of Comstock. The property is owned by the applicant Residential Opportunities Inc. On file is proof of ownership. The facility's first floor is equipped with a large living room area. Off the living room, towards the back of the facility, is a large dining room. The dining room has a sliding glass door that leads to a small deck overlooking the facility's wooded backyard. Located on the right side of the facility are four resident bedrooms and two resident bathrooms. Located on the left side of the facility is a kitchen, six resident bedrooms, three resident bathrooms, a linen closet, a closet to house cleaning supplies, a small medication closet, and a large medication room/office. There are four resident bedrooms and two resident bathrooms located on the home's second floor, as well as a large storage closet. The facility is wheelchair accessible on the first floor only and there are three approved means of egress on the facility's main floor.

Two on-site inspections verified the facility is in compliance with all applicable environmental health administrative rules. On file is a Kalamazoo County Environmental Health inspection report verifying the home's private water and sewer systems were inspected and found to be in compliance with applicable environmental health administrative rules.

On file is a Bureau of Fire Services report confirming the facility is in compliance with applicable fire safety administrative rules. There is one gas-fired furnace located on the facility's main floor in the large medication room/office. This furnace is enclosed in an approved heating plant room, equipped with a solid 1 ¾ inch wooden core door. Located on both the right and left side of the facility's main floor are two entryways leading to the facility's basement. Located at the top of both entryways are solid 1 ¾ inch wooden core doors hung in fully stopped wooden frames that are equipped with automatic self-closing devices and positive-latching hardware. Located at the bottom of the facility's main staircase that leads to the basement are two doors; one that leads to the right side of the basement and another that leads to the left side of the basement. Both doors are solid 1 ¾ inch wooden core doors hung in fully stopped wood frames and are equipped with automatic self-closing devices and positive-latching hardware. On the right side of the basement is a large storage area, a separate enclosed room for

the storage of oxygen tanks, and a second gas-fired furnace. This furnace is located inside an approved heating plant room, equipped with a solid 1 ¾ inch wooden core door. On the left side of the basement is a large area for resident activities, one bathroom, and additional storage space. Also located on the left side of the basement is a third gas-fired furnace, as well as one gas-fired hot water heater. Both the furnace and hot water heater are located inside an approved heating plant room, equipped with a solid 1 ¾ inch wooden core door. The basement is equipped with three approved means of egress, one of which leads directly outside. On file is verification from a qualified inspection service verifying the facility's three gas-fired furnaces and gas-fired hot water heater are in good working condition. 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 sprinkled.

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

First Floor- Right Side

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	14'2" X 11'5" 9' X 4'	199.3	1
2	14'2" X 11'5" 9' X 4'	199.3	1
3	14'2" X 11'5" 9' X 4'	199.3	1
4	14'2" X 11'5" 9' X 4'	199.3	1

Second Floor

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
5	14'2" X 11'5" 9' X 4'	199.3	1
6	14'2" X 11'5" 9' X 4'	199.3	1
7	14'2" X 11'5" 9' X 4'	199.3	1
8	14'2" X 11'5" 9' X 4'	199.3	1

First Floor- Left Side

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
9	10' X 11'	110	1
10	11' X 14'4"	158.4	1
11	11'3" X 11'	124.3	1

12	11'3" X 9' 11"	102.9	1
13	9'2" X 11'4"	104.9	1
14	9' X 12'	108	1

The indoor living and dining areas measure a total of 618 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this home can accommodate 12 residents. The applicant requested all 14 resident bedrooms be approved for resident occupancy, so that residents may have options when choosing a bedroom of their preference. Although 14 resident bedrooms have been approved for occupancy, it is the licensee's responsibility not to exceed the facility's licensed capacity of 12.

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to 12 male and/or female residents who are developmentally disabled. The facility's Program Statement indicates the facility will provide services in a home-like atmosphere utilizing the philosophies of Person-Centered Planning and Self-Determination. The facility's program will include social interaction, training to develop personal hygiene, personal adjustment, public safety and independent living skills, opportunities for involvement in educational and day programs and/or employment and will also include transportation. The applicant intends to accept referrals from Kalamazoo County Community Mental Health and Substance Abuse Services and/or residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the residents' 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 schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life of the residents and increase their independence.

C. Applicant and Administrator Qualifications

The applicant is Residential Opportunities, Inc., a non-profit corporation, established in Michigan. The applicant submitted a financial statement, as well as an established annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Board of Directors of Residential Opportunities Inc. has submitted documentation appointing Scott Schrum as licensee designee and Vicki Richardson as the administrator of the facility.

Criminal history background checks of Mr. Schrum and Ms. Richardson were completed, and they were determined to be of good moral character to provide licensed adult foster care. Mr. Schrum and Ms. Richardson submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Mr. Schrum and Ms. Richardson have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative licensing rules. Mr. Schrum began working at Residential Opportunities, Inc. in 1983 and was promoted to his current position as Chief Executive Officer in 1988. Mr. Schrum currently acts as licensee designee for Residential Opportunities, Inc.'s other licensed adult foster care group homes. Ms. Richardson began working at Residential Opportunities, Inc. as a Program Coordinator in 1987 and has extensive experience working with the mentally ill and/or developmentally disabled population.

The staffing pattern for the original license of this 12 bed facility is adequate and includes a minimum of 2 staff for 12 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 per the facility's administrator's permission, staff may sleep during resident 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 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 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 residents' 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 licensing rules related to physical plant have been determined. Compliance with administrative licensing rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care family home with a capacity of 12.

Michele Struter

03/20/2019

Date

Licensing Consultant

Approved By:

Dawn Timm

03/21/2019

Date

Area Manager