



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 2, 2019

Connie Clauson
Baruch SLS, Inc.
3196 Kraft Avenue SE, Suite 203
Grand Rapids, MI 49512

RE: Application #: AL460398058
Blissfield Place
301 N. Quick Street
Blissfield, MI 49228

Dear Mrs. Clauson:

Attached is the Original Licensing Study Report for the above referenced facility. You have submitted an acceptable written corrective action plan covering the violations cited in the report. 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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink that reads "Vanita Bouldin".

Vanita C. Bouldin, Licensing Consultant
Bureau of Community and Health Systems
22 Center Street
Ypsilanti, MI 48198
(734) 395-4037

Enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL460398058
Applicant Name:	Baruch SLS, Inc.
Applicant Address:	Suite 203 3196 Kraft Avenue SE Grand Rapids, MI 49512
Applicant Telephone #:	(616) 285-0573
Administrator/Licensee Designee:	Connie Clauson
Name of Facility:	Blissfield Place
Facility Address:	301 N. Quick Street Blissfield, MI 49228
Facility Telephone #:	(517) 682-1500
Application Date:	01/14/2019
Capacity:	20
Program Type:	AGED ALZHEIMERS

II. METHODOLOGY

01/14/2019	Enrollment
01/22/2019	Contact - Document Sent Act booklet
01/22/2019	Application Incomplete Letter Sent CI's for Connie (LD) & Amy (Admin); IRS letter
02/08/2019	Contact - Document Received CI for Amy (Admin); IRS later
02/08/2019	Contact - Document Received IRS letter
02/11/2019	Contact - Document Received CI for Connie
02/11/2019	Contact - Document Sent Fire Safety String
03/04/2019	Application Incomplete Letter Sent
07/02/2019	Application Complete/On-site Needed
07/11/2019	Inspection Completed-BCAL Full Compliance
07/15/2019	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Blissfield Place adult foster care large group facility is located in a residential area in Blissfield, MI. The facility is a single-story structure located on five acres of land. It has a concrete driveway with two vehicle entrances and ample parking for both residents and visitors. The facility has a covered resident drop off area at the main entrance. The facility has a basement that houses a large store area and three hot water heaters.

The facility is equipped with a small beauty shop and a very large community living area consisting of the dining room and living room. The dining area (31' X 30' = 930 sq. ft.) has vaulted ceilings and provides ample dining space for all residents. The living room area (27' X 28' = 757 sq. ft.) contains various sofas and chairs, television, and a piano. Through this living area is a large (10' X 27' = 270 s. ft.) sitting porch with surrounding windows that leads to an outside patio area.

Off the dining room is a very large kitchen that contains all the necessary appliances for providing meals to the residents. Off the kitchen area is a large food storage room that has its own exit for deliveries. Immediately across from the dining room is a medication dispensing room where all resident medications will be stored and locked. On the other side of the medication room is a dedicated room used only for resident oxygen storage. On the other side of this room is a spa room for resident use. A staff office is located off the dining room area and contained within the staff office area is a hospitality suite with full bedroom, bathroom and dining area. The hospitality suite will be used for resident visitors.

There are 20 individual resident living areas in the facility that are in the north and south wings, both of which are located off the community living area. Each wing contains 10 individual resident living areas. Each of these resident living areas has a living room (13'6" X 19' 6" = 262 sq. ft.), large bedroom (11' 6" X 12' 6" = 144 sq. ft.) and a large handicapped bathroom. Also, each resident living area has a call alert buttons, a sink, a small refrigerator, a microwave oven, and storage area for consumables. Close to the end of the hallway in each wing is a small sitting area for resident use. There are three restrooms for public use in the facility.

Sanitation:

A public sewer and water system through the City of Blissfield services the facility.

A private vendor with weekly pickup provides garbage service.

Fire Safety:

The facility has a hard-wired smoke detection system and is sprinkled throughout. The Bureau of Fire and Safety gave a full approval on 07/11/2019.

The living, dining, and sitting room areas measure a total of 1,957 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement. The facility is wheelchair accessible and can accommodate residents who require the use of a wheelchair.

Based on the above information, it is concluded that this facility can accommodate **twenty (20)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

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 adults 50 years and older who may have a need for a wheelchair accessible facility. Each resident will have a pre-admission assessment and on-going assessments to develop a care plan to meet their identified needs in the areas of daily living, nutrition, religion, social, recreation, health and personal safety. The facility will not accept individuals who require specialized behavioral intervention services. Residents may choose their own physician. The facility will not provide general transportation services for such things as resident medical appointments.

Resident medications will be stored and locked in the medication dispensing room. This room will be locked.

Emergency medical transportation services will be provided by the City of Blissfield emergency response. Hospital services are available through local hospitals in Lenawee County, or through hospitals in the City of Toledo.

The facility will make provision for a variety of leisure and recreational equipment.

C. Applicant and Administrator Qualifications

The applicant is Baruch SLS, Inc., which is a "Non-Profit Corporation" was established in Michigan, on 10/01/1997. 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.

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

The licensee designee/administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

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.

The applicant 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.

The applicant 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.

The applicant 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, 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 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 the documents contained within each employee’s file.

The applicant 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.

The applicant 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. The applicant 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.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their 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, the applicant acknowledges their 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.

The applicant 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.

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).



Vanita C. Bouldin
Licensing Consultant

Date: 07/19/2019

Approved By:



Ardra Hunter
Area Manager

Date: 07/31/2019