



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 12, 2019

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

RE: Application #: AL460398057
The Fieldstone at Tecumseh
1313 Southwestern Drive
Tecumseh, MI 49286

Dear Mrs. Clauson:

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 (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 #:	AL460398057
Applicant Name:	Baruch SLS, Inc.
Applicant Address:	Suite 203 3196 Kraft Avenue SE Grand Rapids, MI 49512
Applicant Telephone #:	(616) 285-0573
Administrator	Cherish Scott
Licensee Designee:	Connie Clauson
Name of Facility:	The Fieldstone at Tecumseh
Facility Address:	1313 Southwestern Drive Tecumseh, MI 49286
Facility Telephone #:	(517) 423-1141
Application Date:	01/14/2019
Capacity:	20
Program Type:	ALZHEIMERS AGED

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) & Cherish (Admin); IRS ltr
02/08/2019	Contact - Document Received IRS ltr
02/11/2019	Contact - Document Received CI's for Connie & Cherish
02/11/2019	Contact - Document Sent Fire Safety String
03/04/2019	Application Incomplete Letter Sent
07//2019	BFS Approval – Rating A
07/24/2019	Application Complete – Onsite Inspection Needed
07/25/2019	Inspection Completed – Full Compliance Environmental Health Inspection – Rating A
08/08/2019	LSR Generated
08/08/2019	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Fieldstone at Tecumseh adult foster care large group facility in a residential area in Tecumseh, MI. The home is a single-story structure located on an eight-acre parcel of land. The facility has a paved driveway leading up to a large paved parking lot immediately adjoining the facility which also includes a large covered car port area at the facility entrance.

Upon entering the facility there is a very large great room with 24-foot vaulted ceilings where resident activities and resident dining areas are provided. Immediately to the left of the entrance is the facility office and to the right of the entrance is a room dedicated to providing salon services to the residents whom choose to purchase the services from a beautician.

Proceeding through the great room on the left side is medication room where all resident medications will be locked and stored. Immediately across the hallway from the medication room is an oxygen storage room and resident spa room. Past the medication room is a hallway where 10 resident bedrooms are located and at the end of the hallway is an exit door that leads immediately to the outside.

Returning to the great room is another hallway that leads to a stairway that leads down an alternative exit from the facility and continues down to a large basement and crawlspace under the facility.

Continuing back to the right side of the great room is a hallway that leads to a large full kitchen and adjacent to the kitchen is a large food storage area that has a separate entrance immediately off the parking lot to allow consumable deliveries to the facility without having to go through resident living space. Immediately across from the kitchen is a large laundry room. Down this hallway is a public restroom, 10 resident bedrooms and an exit door at the end of the hallway that leads directly to the outside.

The facility is licensed for 20 residents; each resident has their own private bedroom space, a handicapped accessible full bathroom, as well as individual heating and air conditioning controls so that each resident can choose the temperature that best meets their needs. Of the 20 bedrooms in the facility there are 8 studio bedrooms that measure 184 square feet of living space. There are 12 – 1 bedroom living areas that resemble a small apartment. Each of these bedrooms has a small kitchenette, a separate large living room, and a separate bedroom. These bedrooms have 315 square feet of living space. Additionally, all resident bedrooms have electronic staff devices so residents will be able to request staff assistance when they desire.

The resident dining and activity areas are in the facility great room; this room measures 3200 square feet which greatly exceeds the minimum 35 square feet per occupant requirement.

Based upon the above information, this facility can accommodate 20 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

The basement of the facility houses natural gas fired furnaces and hot water heaters for the facility; all have been installed by licensed heating contractors and have been inspected and approved for use. The doorway to the basement is equipped with an approved fire rated door with an automatic self-closing device.

The facility has been determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules. Full approval was granted to this facility by the Bureau of Fires Services on 09/26/2018.

This facility utilizes the City of Tecumseh public water and sewage disposal systems.

A private vendor with weekly pickup provides garbage service.

The facility is wheelchair accessible and can accommodate residents who regularly require the use of wheelchairs.

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 whose diagnosis is Alzheimer's Disease 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.

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.

The licensee will provide 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 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 and the administrator. The licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The licensee designee and 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 1 staff –to- 15 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.

VI. RECOMMENDATION


I recommend issuance of a temporary license to this adult foster care small/large group home (capacity 1 - 20).



Vanita C. Bouldin
Licensing Consultant

Date: 08/08/2019

Approved By:



Ardra Hunter
Area Manager

Date: 8/12/2019