

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 23, 2019

John Kibble Quincy House Assisted Living LLC 420 W. University Drive Rochester Hills, MI 48307

> RE: Application #: AM120380652 Quincy Cottage 15 E. Liberty Street Quincy, MI 49082

Dear Mr. Kibble:

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 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 (313) 456-0380.

Sincerely,

Maktina Bubatius

Mahtina Rubritius, Licensing Consultant Bureau of Community and Health Systems 301 E. Louis Glick Hwy Jackson, MI 49201 (517) 262-8604

Enclosures

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

I. IDENTIFYING INFORMATION

License #:	AM120380652	
Applicant Name:	Quincy House Assisted Living LLC	
Applicant Address:	420 W. University Drive Rochester Hills, MI 48307	
Applicant Telephone #:	(248) 650-7266	
Administrator/Licensee Designee:	John Kibble	
Name of Facility:	Quincy Cottage	
Facility Address:	15 E. Liberty Street Quincy, MI 49082	
Facility Telephone #:	(517) 639-2600 12/02/2015	
Application Date:		
Capacity:	12	
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS	

II. METHODOLOGY

12/02/2015	Enrollment		
12/09/2015	Inspection Report Requested – Health Inv. #1025148		
12/09/2015	Inspection Report Requested - Fire		
12/09/2015	Contact - Document Sent Fire Safety Information		
12/09/2015	Contact - Document Sent Rules & Act booklets		
12/09/2015	Application Incomplete Letter Sent App Boxes 39 & 40; rec cl & FP's for Dean; rec cl for Debra		
01/11/2016	Inspection Completed-Env. Health: A		
01/11/2016	Contact - Document Received Boxes 39 & 40; rec cl's for Dean & Debra		
01/11/2016	Comment FP's for Dean S.		
01/20/2016	Application Incomplete Letter Sent		
04/21/2016	Application Incomplete Letter Sent to new designee		
05/05/2016	Inspection Completed On-site		
08/17/2016	Contact - Document Received letter		
11/09/2017	Inspection Completed On-site- Unannounced. I made face to face contact with Kim Burd. We discussed the licensing requirements and the licensing process.		
06/13/2018	Inspection Completed-Fire Safety: A		
08/15/2018	Inspection Completed On-site		
08/15/2018	Inspection Completed-BCAL Sub. Compliance		
02/06/2019	Contact - Telephone call made- Discussion with Sandy. Additional and updated information needed.		
03/28/2019	Inspection Completed On-site		
03/29/2019	Contact - Document Received- Work experience for licensee designee and administrator.		
06/12/2019	Inspection Completed On-site		

08/05/2019	Recommend License Issuance
08/05/2019	Contact - Document Received- Copy of Fire Safety Report
07/18/2019	Inspection Completed-Fire Safety: A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This investigation included a review of the application, forms, and supporting documents including but not limited to the following; corporate documents, property ownership, organizational charts, processed licensing record and medical clearances, applicant financial reports, admission, discharge, refund policies, program statement, personnel policies and procedures, job descriptions, staffing patterns, routine and emergency numbers, written emergency plan and emergency repair numbers, and on-site licensing inspections.

This facility was previously licensed as an adult foster care facility (License # AM120016220). The license was closed on April 2, 2010. The closure of this license was not as a result of a revocation/refusal to renew.

Quincy Cottage is a one-story structure built on a cement slab with a crawl space. The facility is located on the northside of Quincy, Michigan. Quincy Cottage has been remodeled. This home is wheelchair accessible. The primary entrance for the residents will be the door closest to the parking lot, on the westside of the facility. This entrance is equipped with a wheelchair ramp. The second identified exit and means of egress is accessed through a door located on the eastside of the facility. This exit is also equipped with a wheelchair ramp. In addition, there are other exits in the facility, which leads directly to the outside of the home.

The facility is constructed with the following rooms: A kitchen with a walk-in pantry for food storage, a dining room, a family room, sunroom, eight bedrooms and six bathrooms. Bedrooms #5, #6, #7, and #8 are equipped with full bathrooms. These bathrooms shall only be utilized by the occupants of those rooms. In addition, there is a laundry room, a screened porch, sitting areas, and a garage.

The mechanical room is located on the same level as the residents. The natural gas furnace and water heater, and electrical panel are in this enclosed room; which is also constructed of material that has a 1-hour-fire resistance rating. The door and frame leading to the mechanical room is fire-rated and is equipped with an automatic self-closing device and positive latching hardware. The electrical panel and service has been inspected and approved by an electrical inspector.

This facility is air conditioned through a central air conditioning unit. The facility is equipped with a washer and electric dryer.

The facility utilizes a public water supply and sewage disposal system.

The garbage service is provided by a private vendor and is removed weekly.

The facility is equipped with an interconnected, hardwired smoke detection system, with battery backup. The remodeled portion of the facility is equipped with automatic sprinkler systems, which have been inspected and approved by the appropriate officials. The system was inspected, and it is in good operating condition. Smoke and heat detectors are located throughout the facility and are in all required areas.

Bedroom	Room	Total Sq. Footage:	Total Resident
#:	Dimensions:		Beds:
1	15'8" x 15'9"	247 sq. ft.	2
2	13'8" x 13'10"	189 sq. ft.	2
3	12'1" x 14'1"	170 sq. ft.	1
4	14'6" x 13'	188 sq. ft.	1
5	14'6" x 15'9"	228 sq. ft.	2
6	14'6" x 10'4"	150 sq. ft.	2
7	11'3" x 17'9"	200 sq. ft.	1
8	12'10" x 19'4"	248 sq. ft.	1

Resident bedrooms have the following dimensions:

The indoor living and living areas measure a total of 1,276 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based upon the information provided above, this facility can accommodate 12 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to male or female residents who are aged (60 years or older), physically handicapped, or have Alzheimer's. According to the mission statement, Quincy Cottage "is dedicated to giving each person, fully independent or those needing any level of assistance, the support they need to lead fulfilling and vibrant lives. We do this by helping residents have a meaningful relation and stimulating activity. We are passionate about helping people remain as independent as possible, and strongly believe each person, despite limitations, can continue making a contribution to those around them.

We train our staff to work with all types of adult diseases, including the needs of our residents with Alzheimer or related conditions. We work very closely with your medical provider to make sure we can provide and carrying out the specific plan of care." Quincy Cottage has "put in special processes and criteria to make sure our medical assessment meets or exceeds each resident and family's expectations. The admission process is completed by staff and our specially trained medical professionals. We have designed our facilities for the needs and function of these types of residents."

Quincy Cottage "provides the highest standards of quality service, environment, facilities and care to residents and their families while providing value and accountability to all. We will always work to serve the needs of the whole person: physical, mental, and spiritual. We are committed to providing a positive reinforcing work environment that recognizes the value of all staff and fosters individual growth and improvement."

The program will provide a setting for the care of adults requiring assistance in the activities of daily living, socialization, nutritious meals, and the supervision of prescribed medications and treatments. Quincy Cottage strives to provide the least restrictive environment possible that will maximize the social and psychological growth of its residents. The applicant intends to accept individuals with private sources of payment.

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.

C. Applicant and Administrator Qualifications

The applicant is Quincy House Assisted Living, LLC, and it is a "Domestic Limited Liability Company" which was formed on February 12, 2013. A review of this company on the State of Michigan, Department of Licensing and Regulatory Affairs' website demonstrates it has an active status and that Edward M. Olson is the Resident Agent. 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 Owner and CEO of the company has stated in writing, the appointment of John Kibble, as the Licensee Designee and the Administrator for the facility.

A criminal background check of John Kibble was completed, and he was determined to be of good moral character to provide licensed adult foster care. Mr. Kibble has submitted a statement from his physician documenting his good health and current negative tuberculosis test results. In 1987, Mr. Kibble received his Bachelor of Science degree, majoring in Sports Medicine, from the University of Michigan. In 1989, he received a Master of Arts degree, majoring in Sports Medicine, from the University of Michigan.

Mr. Kibble has an extensive work history. He has worked as the Director of Medical Diagnostic Imaging and Sports Medicine, Vice President of Operations, Director, Physician Practice Development and Management, Vice President of Business Development and Strategy, Chief Operating Officer, Director of Business Development and Associate Administrator, and President and CEO of JK Healthcare Consulting.

In these roles, some of Mr. Kibble's responsibilities included but not limited to the following: starting and developing a Sports Medicine program, he oversaw clinical operations, patient satisfaction, quality improvement, budget, strategic planning, data analyses, business development, and evaluating and developing policies and procedures for medical group operations. He has been responsible for all clinical and non-clinical operations of 40 hospital-based bariatric surgery programs, managed business protocols and contracts, and served as a main speaker to sell business to new hospitals. He oversaw system-wide initiatives, including emergency transportation and physician contracting, and worked with a complex reporting matrix of hospital President/CEOs, while reported to corporate office. He used data analytics to develop market intelligence and market share information. He also oversight of operations for inpatient and outpatient areas and worked for a national company that offered a broad range of clinical specialties, including treatment of catastrophic injuries, traumatic brain and spinal cord injuries, ventilator, G-tube and tracheotomy care, wound care, infusions, and services including care and treatment of patients with Alzheimer's and Dementia.

Mr. Kibble's expertise includes building solid partnerships, integrating delivery systems, designing strategic platforms, developing leadership and championing culture change, and spearheading growth for hospital and service line turnarounds. He has experience in population health management.

Additional professional affiliations for Mr. Kibble include that he is a member of MGMA and the American College of Healthcare Executives.

Mr. Kibble has experience working with the populations that will be served in this home. Mr. Kibble has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. He has also been trained in First Aid and Cardiopulmonary Resuscitation and provided a certification of completion.

The staffing pattern for the original license of the 12-bed facility is adequate and includes a minimum of 2 staff for 12 residents on each shift. The applicant acknowledged that the staff to resident ratio may need to be increased 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 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. The applicant was provided with information regarding the process of obtaining criminal history record clearances 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 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, 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 valuable and intends to comply. The applicant 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.

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 medium group home (capacity 1-12).

Mahtina Bubatius

8/05/2019

Mahtina Rubritius Licensing Consultant Date

Approved By:

8/12/2019

Ardra Hunter Area Manager Date