



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 14, 2019

Sami Al Jallad
Turning Leaf Residential Rehabilitation Srvcs Inc.
P.O. Box 23218
Lansing, MI 48909

RE: Application #: AL390392504
Birch Cottage II
13326 N. Boulevard St.
Vicksburg, MI 49097

Dear Mr. Al Jallad:

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 (517) 284-9720.

Sincerely,

A handwritten signature in black ink that reads "Cathy Cushman".

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 615-5190

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL390392504
Applicant Name:	Turning Leaf Residential Rehabilitation Srvcs Inc.
Applicant Address:	621 E. Jolly Rd. Lansing, MI 48909
Applicant Telephone #:	(517) 393-5203
Administrator	Sami Al Jallad
Licensee Designee:	Sami Al Jallad
Name of Facility:	Birch Cottage II
Facility Address:	13326 N. Boulevard St. Vicksburg, MI 49097
Facility Telephone #:	269-585-8762
Application Date:	02/07/2018
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

02/07/2018	Enrollment
02/07/2018	Inspection Report Requested - Fire
02/07/2018	Contact - Document Sent Rule & ACT Books and Fire Safety String
02/07/2018	Lic. Unit file referred for background check review 1326 for Sami Al Jallad - Self confession
02/07/2018	File Transferred To Field Office Lansing
03/06/2018	Application Incomplete Letter Sent
07/23/2019	Contact - Document Received Received facility documentation relating to app incomplete letter.
08/05/2019	Contact - Document Received Received updated program statement, letter rescinding Alzheimer's special program, and statement specifying Sami Al Jallad as the LD.
08/20/2019	Contact - Document Received Received via email the training verification for Administrator and Licensee Designee.
08/20/2019	Contact - Face to Face Met with licensee designee, administrator, and fire inspector to do a preliminary walk through of the facility.
09/12/2019	Inspection Completed On-Site
09/16/2019	Contact – Document Received Received facility's telephone number via email from licensee designee, Mr. Al Jallad.
09/18/2019	Confirming Letter Sent
09/20/2019	Contact – Document Received Received documentation in response to confirming letter.
09/24/2019	Contact – Document Received Received email correspondence from licensee designee, Sami Al Jallad, containing a picture of the directional signage on the main entrance door identifying the two separate facilities. Mall

	City Mechanical activated bathroom fan system, which is now operating.
10/03/2019	Contact – Document Received Received certificate of occupancy from licensee designee.
10/23/2019	Contact – Document Received Received documentation appointing new administrator.
11/06/2019	Inspection Completed - Fire Safety: A
11/08/2019	Inspection Completed On-site
11/08/2019	Inspection Completed– BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility’s original building was a former 40,000 square foot hospital and has been renovated to accommodate two, adult foster care facilities, including Birch Cottage I and Birch Cottage II. Bronson Hospital’s Family Medicine of Vicksburg remains on the property and is connected to the facility by an outdoor breezeway. Birch Cottage I is located on the East side of the building, while Birch Cottage II is on the North side of the building. Birch Cottage II is located within a mile of downtown Vicksburg where there are local restaurants and stores, walking distance to Sunset Lake, and just a few miles from local parks, including Prairie View County Park. The Village of Vicksburg is located just 15 minutes South of Portage, Michigan and 30 minutes South of Kalamazoo, Michigan. The facility utilizes the Village of Vicksburg’s public water and septic system.

Visitors to Birch Cottage II will check into the facility through a main entrance on the East side of the building. This space consists of a lobby/reception area, a large conference room, several office rooms, storage, and a long hallway accessed from the North side of the facility where only direct care staff and other employees can enter the building.

During business hours all visitors will be asked to check in at the main lobby/reception area which is designated by signage on the door and directional signage in the parking lot. After visitors check in at the main entrance lobby area, they will be directed to drive to the building’s designated “North Entrance” where they will be greeted by staff and provided access to Birch Cottage II. During non-business hours, all visitors will be directed to “check in” at the North Entrance at Birch Cottage II. If a visitor is requesting to see someone in Birch Cottage I they will then be directed to drive to an employee only entrance where they will be greeted by a staff member and escorted directly into

Birch Cottage I via that unit's main entrance. Visitors will not be given access to either Birch Cottage I or Birch Cottage II as a means to gaining access to the other separately licensed program. Each of the two distinctly licensed programs will be unique and treated separately in the interest of the safety, supervision, and privacy of the individuals being served. Each guest entrance to the building will have signage designating the following:

Birch Cottage I - Main Entrance
Birch Cottage II - North Entrance

Upon entering Birch Cottage II, there is a small conference room, a large multipurpose room, a potential beauty or barber shop, a serenity/meditation room, a "wellness" space where clinicians can meet with residents, and a small facility store where residents can purchase small food or miscellaneous items. Directly past the multipurpose room are two wheelchair accessible bathrooms; however, only one of the bathroom contains a shower while the other is just a toilet. Down the hall from these common space rooms are several resident bedrooms. The facility's commercial kitchen is located on the right-hand side of the hallway, which also includes the facility's dining room area. The facility's outdoor patio and fenced in courtyard is accessible from the dining room, as well. The courtyard is surrounded with a six foot privacy fence. Past the dining room area are several more resident bedrooms, an area for direct care staff, the medication room and another resident bathroom with a shower located east of the nurse's station. The third resident shower is also located across from the nurse's station on the south side.

Many of the resident bedrooms have bathrooms within the bedrooms, which include sinks and toilets, except the "studio" bedrooms across from the facility's living room. There are also several bedrooms that share Jack and Jill style bathrooms. The applicant acknowledged there will never be more than three residents sharing these Jack and Jill style bathrooms and all the residents will be of the same sex.

The facility's living room is located at the end of the facility's hallway on the south end. The living room is directly across from three single studio bedrooms. The facility does not have any non-resident bedrooms. The facility's living room marks the end of Birch Cottage II as double doors mark the entrance to the building's "maintenance block", which is a space containing the chiller and boiler room, clinical supply room and additional storage areas for both Birch Cottage I and Birch Cottage II. This area will not be accessible to residents.

There are additional two double doors located just beyond the nurse's station to the east. These double doors mark the end of Birch Cottage II and create accessibility to Birch Cottage I; however, they will always be locked and are only accessible by utilizing a keypad. These doors will be utilized to move food prepared in Birch Cottage II's commercial kitchen into Birch Cottage I's working kitchen.

The facility is wheelchair accessible due to it being a former hospital. The facility's two approved means of egress are through the main entrance of the building and through the mechanical room off the South side of the facility. There is a third evacuation route through the facility's courtyard off the dining room and down the hall from the nurse's station. Ramps are not needed as the facility is not elevated above grade level.

The heating system consists of a boiler system. The boiler and hot water heater are located on the main floor in a space directly off Birch Cottage II in a room that is constructed of materials that provide a 1-hour-fire-resistance rating with a 1-3/4 inch solid core door in a fully stopped frame, equipped with an automatic self-closing device and positive-latching hardware. This space will not be accessible to residents. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. The facility is equipped with an approved pull station alarm system and a sprinkler system installed throughout the entire facility, including area not accessible to residents. The facility received an "A" fire rating on 11/06/2019 from the Bureau of Fire Services indicating the facility was in compliance with all fire safety rules.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
201	(16'2" x 11'1") + (11'1" x 10')	291 sq. ft.	1
202	(8'8" x 16'2") + (8'8" x 9'11")	228 sq. ft.	1
203	(16'1" x 9'3") + (9'3" x 9'3")	242 sq. ft.	1
233 A/B	12'1" x 17'3"	209 sq. ft.	1 or 2
234 A/B	11'5" x 14'9"	169 sq. ft.	1 or 2
235 A/B	11'5" x 19'11"	228 sq. ft.	1 or 2
236 A/B	11'6" x 14'10"	170 sq. ft.	1 or 2
250	11'8" x 9'6"	111 sq. ft.	1
251	11'8" x 9'7"	112 sq. ft.	1
252	11'5" x 9'6"	109 sq. ft.	1
253 A/B	11'5" x 19'11"	228 sq. ft.	1 or 2
255	11'5" x 9'4"	107 sq. ft.	1
257	11'6" x 9'3"	107 sq. ft.	1
258 A/B	11'4" x 20'	228 sq. ft.	1 or 2
259 A/B	11'6" x 19'11"	229 sq. ft.	1 or 2
260 A/B	12' x 19'11"	239 sq. ft.	1 or 2
261 A/B	11'6" x 15'7"	180 sq. ft.	1 or 2

The living, dining, and sitting room areas measure a total of **2,127** square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, it is concluded that this facility can accommodate **20 (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 or non-ambulatory adults whose diagnosis is developmentally disabled, mentally impaired, physically disabled, aged or traumatically brain injured in the least restrictive environment possible. The program statement provided by the applicant indicated the facility would not admit residents who are registered sex offenders in order to maintain its special use permit provided by the Village of Vicksburg zoning committee.

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. The applicant intends to accept residents from Community Mental Health (CMH) agencies, the Department of Health and Human Services (DHHS), and/or residents with private sources for payment.

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.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including public schools and library, local community events, shopping centers, churches, local parks, etc. These resources provide an environment to enhance the quality of life and increase the independence, if applicable of residents.

C. Applicant and Administrator Capabilities

The applicant is Turning Leaf Residential Rehabilitation Services, Inc., a "For Profit Corporation", established in Michigan on 4/5/1989. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the corporation's financial capability to operate this adult foster care facility.

The Board of Directors of Turning Leaf Residential Rehabilitation Services, Inc. has submitted documentation appointing Sami Al Jallad as Licensee Designee and the Administrator.

Criminal history background checks of the applicant and Administrator were completed

and they were determined to be of good moral character to provide licensed adult foster care. The applicant and Administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

The applicant and administrator have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. The Licensee Designee, Sami Al Jallad, has a Bachelor of Arts in Business Administration, Master's degree in Public Administration and has complete college courses towards a Doctoral degree in Health Administration. Mr. Al Jallad has been working at Turning Leaf Residential Rehabilitation Services, Inc. since 2003 as both an Executive Director and Licensee Designee and currently is the Licensee Designee for eighteen adult foster care facilities in Michigan. Over the last 16 years, Mr. Al Jallad has gained knowledge, training and expertise in the area of adult foster care and attends trainings provided by Community Mental Health and the National Council for Community Behavioral Health. He also serves as the licensee's Executive liaison to the Commission on the Accreditation of Rehabilitation Facilities (CARF).

The staffing pattern for the original license of this 20 bed facility is adequate and includes a minimum of two direct care staff for 20 residents per shift. The applicant acknowledged that the staff to resident ratio may need to be changed 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 that at no time will this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facility's staff to resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledged if "roaming" or "float" staff are scheduled they will be scheduled with specific support duties and considered, in addition to, the staffing ratio for each facility. Birch Cottage I and Birch Cottage II staff will be scheduled and assigned to a designated facility per shift. In the event there is a call in, "roaming" or "float" staff can be reassigned to a designated facility for their shift and no longer be considered as a designated floating staff member.

Traffic between Birch Cottage I and Birch Cottage II by staff will be limited to programmatic or operational support reasons such as; meal delivery or pick up, delivery distribution, meetings, etc. Each of the two distinctly licensed programs will be unique and treated separately in the interest of the safety, supervision, and privacy of the individuals being served.

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 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) and the related documents required to be maintained in each employee’s record to demonstrate compliance.

The applicant acknowledged 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 acknowledged their 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 their 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 home for adult foster care.

The applicant acknowledged their 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 valuables 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 resident’s personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledged 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 acknowledged 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 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. Rules/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 six-month temporary license to this large adult foster care group home with a capacity of 20 residents.



11/14/2019

Cathy Cushman
Licensing Consultant

Date

Approved By:



11/14/2019

Dawn N. Timm
Area Manager

Date