

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 27, 2020

Kent VanderLoon McBride Quality Care Services, Inc. P.O. Box 387 Mt. Pleasant, MI 48804-0387

RE: License #: AS370011303

McBride #7 501 N. Coldwater Weidman, MI 48893

Dear Mr. VanderLoon:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

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) 284-9730.

Sincerely,

Diane L Stier, Licensing Consultant Bureau of Community and Health Systems

Drane F. Stier

1919 Parkland Drive Mt. Pleasant, MI 48858-8010

(989) 948-0560

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS370011303

Licensee Name: McBride Quality Care Services, Inc.

Licensee Address: 3070 Jen's Way

Mt. Pleasant, MI 48858

Licensee Telephone #: (989) 772-1261

Administrator/Licensee Designee: Kent VanderLoon, Designee

Name of Facility: McBride #7

Facility Address: 501 N. Coldwater

Weidman, MI 48893

Facility Telephone #: (989) 644-3627

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

II. Purpose of Addendum

The purpose of this addendum is to modify the license of McBride #7 to include serving persons with mental illness (MI) in addition to persons with developmental disability (DD), and to include the MI program in the facility's Special Certification.

III. Methodology

01/24/2020	Receipt of Request for Modification of the Terms of the Registration/License and Application for Certification.
01/24/2020	Receipt of statement from Licensee Designee attesting to training of all staff in CenTrain training for both MI and DD populations.
01/24/2020	Receipt of Program Statement including both MI and DD populations/programs.

IV. Description of Findings and Conclusions

Licensee Designee and Administrator Kent VanderLoon is a college graduate with over 15 years' experience working with persons with both mental illness and developmental disability. Mr. VanderLoon has demonstrated his ability to provide care to both populations in numerous AFC facilities licensed to McBride Quality Care, Inc.

The licensee submitted a Program Statement which includes both DD and MI programs, the *Request for Modification*, and the *Application for Certification* – modification noting the programs for both MI and DD populations.

According to training records maintained by the licensee, all staff in the facility have completed CenTrain Group Home Curriculum from CMH for Central Michigan, which includes training for both MI and DD populations.

V. Recommendation

I recommend that the license and Special Certification for McBride #7 be modified to include services to persons with mental illness and/or developmental disability.

Diane L Stier
Licensing Consultant

January 24, 2020 Date

01/27/2020

Dawn Timm Area Manager Date