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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 #: AS370079292
McBride Rainbow House
Unit A
1407 Elm St
Mt Pleasant, MI 48858

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,

A handwritten signature in black ink that reads "Diane L. Stier".

Diane L Stier, Licensing Consultant
Bureau of Community and Health Systems
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 #:	AS370079292
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 Rainbow House
Facility Address:	Unit A 1407 Elm St Mt Pleasant, MI 48858
Facility Telephone #:	(989) 772-4788
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. Purpose of Addendum

The purpose of this addendum is to modify the license of McBride Rainbow House to include the home's DD (Developmental Disability) program in the facility's Special Certification.

III. Methodology

01/24/2020	Receipt of <i>Request for Modification of the Terms of the Registration/License and Application for Certification</i> .
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 Rainbow House be modified to include services to persons with mental illness and/or developmental disability.



Diane L Stier
Licensing Consultant

January 24, 2020

Date



Dawn Timm
Area Manager

01/27/2020

Date