

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

July 20, 2016

Maria-Jessica Lozano Garden of Hope Senior Living, LLC 6131 Herbmoor Street Troy, MI 48098

RE: Application #: AS630369907

Garden of Hope Senior Living, LLC

6131 Herbmoor Street

Troy, MI 48098

Dear Ms. Lozano:

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 6 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 (248) 975-5053.

Sincerely,

Kristine Cilluffo, Licensing Consultant

Bureau of Community and Health Systems

4th Floor, Suite 4B

51111 Woodward Avenue

Kristine Cillylo

Pontiac, MI 48342 (248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

1:00000#	A C C 2 O 2 C O O O 7		
License #:	AS630369907		
Applicant Name:	Garden of Hope Senior Living, LLC		
	, J		
Applicant Address:	6131 Herbmoor Street		
Applicant Address.	Troy, MI 48098		
	110y, Wii 40090		
Applicant Telephone #:	(248) 770-8683		
Applicant Telephone #.	(240) 110-0003		
Administrator/Licenses Decignes:	Maria Jassica Lazano Licensca Designas		
Administrator/Licensee Designee:	Maria Jessica Lozano, Licensee Designee		
	Maria Cristina McIntosh, Administrator		
Name of Facility:	Garden of Hope Senior Living, LLC		
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Facility Address:	6131 Herbmoor Street		
	Troy, MI 48098		
	, , , , , , , , , , , , , , ,		
Facility Telephone #:	(248) 879-0846		
rading relephone m	(210) 010 0010		
Application Date:	12/09/2014		
Application Bate.	12/00/2017		
Canacity	6		
Capacity:	U		
Program Type:	AGED		
	ALZHEIMERS		

II. METHODOLOGY

12/09/2014	Enrollment
12/11/2014	Application Complete/On-site Needed
12/11/2014	File Transferred To Field Office Pontiac.
12/11/2014	Contact - Document Sent Act & Rules.
12/19/2014	Application Incomplete Letter Sent
12/19/2014	Comment Sent technical assistant materials in regards to enrollment documents to applicant.
02/20/2015	Contact - Document Received Supportive documents received.
07/27/2015	Contact - Document Received Text received from Ms. Maria Lozano.
07/27/2015	Contact - Document Sent Text sent scheduling Preliminary Onsite inspection.
08/06/2015	Inspection Completed On-site
08/06/2015	Inspection Completed-BCAL Sub. Compliance
08/27/2015	Contact - Document Sent Confirming letter sent to Ms. Maria Jessica Lozano by email.
01/26/2016	Contact - Telephone call made Spoke with Ms. Lozano, scheduled follow-up onsite.
02/02/2016	Inspection Completed On-site Follow-up inspection for physical plant of the facility.
02/02/2016	Inspection Completed-BCAL Sub. Compliance Supportive documents are still needed. All Physical plant corrections for the home have been completed.
02/02/2016	Comment Request for possible BFS assistance in regards to location of furnace structure.

02/09/2016	Contact - Face to Face Met with Ms. Lozano and Ms. McIntosh. Reviewed all AFC required documents. Provided confirming letter for supportive documents.
02/09/2016	Comment BFS not required. Location of furnace do not require BFS inspection.
03/21/2016	Contact - Document Received Received picture of newly installed door for hot-water tank room.
03/31/2016	Contact - Document Received Message received from Ms. Lozano.
04/01/2016	Contact- Document Sent Message sent to Ms. Lozano in regards to newly installed door and corrections needed for supportive documents.
04/18/2016	Contact- Document Received Supportive documents received from Ms. Lozano.
05/13/2016	Contact- Document Received Message received from Ms. Lozano.
05/13/2016	Contact- Document Sent Message sent to Ms. Lozano. Supportive documents are still needed.
05/19/2016	Comment Enrollment reassigned from Adult Foster Care (AFC) Licensing Consultant Stephanie Williams to Kristine Cilluffo
05/20/2016	Contact- Document Received Email received from Ms. Lozano with supportive documents.
05/26/2016	Contact- Telephone call received Received message from Jessica Lozano
05/31/2016	Contact- Document Received Email from Jessica Lozano
06/02/2016	Contact- Telephone call received Received message from Jessica Lozano

06/02/2016	Contact- Document Sent Email to Jessica Lozano
06/22/2016	Contact- Document Sent Email to Jessica Lozano
06/22/2016	Contact- Document Received Email from Jessica Lozano
06/29/2016	Contact- Telephone call received Received message from Ms. Lozano
06/30/2016	Contact- Document Sent Email to Jessica Lozano
07/18/2016	Contact- Document Sent Email to Jessica Lozano

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the licensure of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1994.

A. Physical Description of Facility

This proposed facility is a single story ranch style brick dwelling with a two-car attached garage with aluminum trim, situated on well-maintained front and back yard in Troy, a suburb north of the City of Detroit. AFC Licensing Consultant Stephanie Williams completed onsite inspections of the home. The home has sliding doors which lead to a brick patio in the back yard. The facility is owned by Garden of Hope Senior Living, LLC. The proposed licensee designee is Ms. Maria Lozano and the proposed administrator is Ms. Maria McIntosh. The facility has a proposed occupancy of six adult foster care residents, the maximum occupancy permitted in an adult foster care small group home. The community is serviced by public water and sewage system. Medical, social, educational, religious, and shopping resources are located nearby within the surrounding community. The facility is located on fully landscaped front and back yard. To service residents with mobility impairments, the facility is wheelchair accessible as the front and side egress door leads directly to firm-surfaced, unobstructed concrete which allows the occupant to move a safe distance away from the building as required by Rule 400.14509(2). The facility features gas forced air unit located in the attic has been inspected by a licensed contractor and found to be in good working condition which includes the air unit as well. The kitchen and living area includes a gas fire place. AFC Licensing Consultant, Stephanie Williams advised the licensee regarding the usage of the fireplace. If the fireplace will be used an inspection and certification of the fireplace and chimney by a qualified inspection service will be

needed. Laundry facilities are located on the first floor of the facility including a gas-dryer with a solid galvanized metal duct.

The interior of the home includes a living room, common/recreational area, four bedrooms, bathroom#1 is a full bath and bathroom #2 has a shower stall only (located in bedroom #4). The kitchen will share a dining area and the home has no basement. The fire alarms are interconnected throughout the home. The home has adequate living space and meets the requirement of 35 square feet per person. The living room measures 19' x 11' 3" plus 12'9" x10'8" for a total of 352 square feet.

The four bedrooms in the home are sized as follows

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	16'2" x 13'6"	218.3	2
2	13'1" x 10'2"	133	2
3	9'8" x 10'	97	1
4	14'1" x 5'3" plus 5'2" x 8	115.4	1

B. Program Description

The admission policy, discharge policy, program statement and refund agreement have been submitted. Garden of Hope Senior Living is a small group adult foster care home with the capacity to provide services for six residents. The home is wheelchair assessable. The program is able to care for residents with Alzheimer's disease and dementia. The program statement indicates that their philosophy of care if to practice person- centered care striving to create an environment that honors each individual resident's life history, supports their strengths and maintains their dignity. Garden of Hope Senior Living will provide care, support and activity programs that value independence and offer the residents of the facility the opportunity to make choices based on their abilities. Diminished abilities or stage of disease that would require transfer or discharge from the program include aggressive violent behavior, resident completely refusing to eat causing health problems and/or resident consistently violating house rules. Programs and services provided at Garden of Hope include programming based on specific health and behavioral care needs, planned activities tailored to resident abilities, activities daily and on weekends, transportation arrangements, family member participation in care plan, safe wandering area, regular assessments by interdisciplinary staff and environment that is easy to navigate. The home will have a minimum of one direct care staff to six residents at all times.

Garden of Hope Senior Living, LLC is a limited liability corporation formed on 11/05/2014. Maria Jessica Lozano has been appointed by the board of directors to be the licensee designee for the home. Maria Cristina McIntosh has been appointed as the administrator. Ms. Lozano and Ms. McIntosh have submitted educational, training and employment documentation.

Ms. Lozano has demonstrated competency to be licensee designee by her caregiving experience and training verification provided. A letter was received by her employer, Maple Health Care, indicating that she is the current Director of Nursing and Alternative Administrator for Maple Health Care LLC since 10/29/2014. Her duties and responsibilities include direct patient care, medication administration, management and administrative staff training. Ms. Lozano is a registered nurse with a Bachelor's degree in nursing. She received her degree from the St. Rita Hospital College of Nursing in Manila, Philippines in 1992. She received her high school diploma from Manila Cathedral School in the Philippines in 1986. Ms. Lozano has worked as a nurse at Maple Home Care, St. John Macomb Hospital, Medilodge of Sterling Heights and Ospital ng Maynila Medical Center Manila. She provided verification that she has completed the following trainings: Alzheimer's Disease and other dementias, ACLS Provider and Healthcare Provider training.

Ms. McIntosh has demonstrated competency to be administer by her caregiving experience and training verification provided. She received her high school diploma from the Lady Mediatrix Institute in the Philippines. Ms. McIntosh has been employed as an Alternative Administrator/Direct Care Staff from 02/20/2015 to present at the Bramham Foster Home. Her responsibilities include providing assistance and support to patients with Alzheimer's Disease and dementia, administering treatments, making beds, cooking meals, laundry, errands, buying groceries and noticing any change in health care conditions. Ms. McIntosh worked as a Direct Care Staff at the Cherish Foster Home from 2014-2015, and as a Nursing Assistant at the Medilodge of Rochester Hills from 2007-2008. She provided verification that she has completed the following trainings: Home Health and Hospice Aid, Certified Patient Care Technician, Nurse Assistant, Heartsaver AED, Certified EKG, ECG Technician, Alzheimer's Disease and Other Dementias and CPR/First Aid training.

Licensing record clearances have been received and processed for Ms. Lozano and Ms. McIntosh verifying good moral character. Ms. Lozano submitted a medical statement dated 11/17/2015 indicating that she has no physical/mental conditions or health conditions that would limit her ability to work with or around dependent adults. She had a negative TB test on 01/10/2015. Ms. McIntosh submitted a medical statement dated 01/16/2015 indicating that she has no physical/mental conditions or health conditions that would limit her ability to work with or around dependent adults. She had a negative TB test on 01/14/2015.

C. Rule/Statutory Violations

The applicant was found to be in substantial compliance with the licensing act and applicable administrative rules.

IV. RECOMMENDATION

Area Manager

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).

Kristine Cillufo	07/18/2016
Kristine Cilluffo Licensing Consultant	Date
Approved By:	
Denice G. Munn	07/20/2016
Denise Y. Nunn	Date