



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

February 25, 2020

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

RE: Application #: AL390392502
Birch Cottage I
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 #:	AL390392502
Applicant Name:	Turning Leaf Residential Rehabilitation Svcs Inc.
Applicant Address:	621 E. Jolly Rd. Lansing, MI 48909
Applicant Telephone #:	(517) 393-5203
Administrator	Zeta Francosky
Licensee Designee:	Destiny Saucedo-Al Jallad
Name of Facility:	Birch Cottage I
Facility Address:	13326 N. Boulevard St. Vicksburg, MI 49097
Facility Telephone #:	269-585-8761
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
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 letter identifying 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 phone number for the facility from the 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
02/04/2020	Inspection Completed On-Site – BCAL Full Compliance Inspected stove and additional shower

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 I 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.

The facility is accessed through the main entrance on the East side of the building. This additional 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, but will not be readily accessible to residents. Directly past the office rooms are doors that lead directly into Birch Cottage I.

During business hours all visitors will be asked to check in at the Main Lobby/Reception which is designated by signage on the door and directional signage in the parking lot. Guests that have arrived to visit a resident in Birch Cottage I will be directed and buzzed thru the main entrance of the Birch Cottage I secured unit and staff will be advised that a guest has been checked in. Guests that check in at the Main Entrance to visit with a

Birch Cottage II resident during business hours will be directed to drive to the designated “North Entrance” where they will be greeted by staff and provided access to Birch Cottage II. During Non-Business hours all guests are directed to “check in” at the North Entrance for Birch Cottage II. If that guest is requesting to see someone in Birch Cottage I they will be directed to drive to the Employee Entrance where they will be greeted by a staff member and escorted directly into Birch Cottage I via that unit’s main entrance. No guests or visitors will 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 I, there is a small staff bathroom, a small conference room, the facility’s program manager’s office and a potential facility store where residents can purchase small items. Right beyond the program manager’s office is the facility’s living room, which also has access to the facility’s store. A hallway north of the living room leads to additional areas including the medication room, a “wellness” space where clinicians can meet with residents, and a resident room that can be utilized as a quiet/meditative space. This north hallway leads to additional doors accessing space which will be utilized for overflow of resident belongings. Residents will not have direct access to this space.

Across the hallway from the living room is access to the facility’s dining room and small kitchen area. The facility’s commercial kitchen area will be in Birch Cottage II where the facility’s meals will be prepped, cooked and subsequently transported to the working kitchen in Birch Cottage I and provided to residents. The working kitchen in Birch Cottage I contains all the large kitchen appliances such as a microwave, refrigerator, and stove. Residents can access Birch Cottage I’s courtyard from the dining room, as well. The courtyard is only accessible through the dining room. The courtyard is also surrounded with a six-foot privacy fence.

Past the living and dining rooms are ten resident bedrooms, which will all be utilized as double bedrooms. Each resident bedroom has a half bathroom consisting of a toilet and a sink, except bedroom 168 A/B, which has no sink, shower, or toilet. Directly past the resident bedrooms, located on the north side of the hallway, are two wheelchair accessible showers each with a sink and toilet. On the South side of the hallway is another stand up shower for residents. The laundry facilities are located passed the standup shower. The facility does not have any non-resident bedrooms.

Two double doors are located directly passed the facility’s bathrooms, which marks the end of Birch Cottage I. These two double doors create accessibility to Birch Cottage II; however, they will always be locked; 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 being a former hospital. The facility's two approved means of egress are through the main entrance of the building and through the courtyard off the dining room. 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 area 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 the unlicensed areas. 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
160 A/B	11'3" x 14'11"	169 sq. ft.	1 or 2
161 A/B	11'5" x 15'	171 sq. ft.	1 or 2
162 A/B	11'5" x 14'11"	171 sq. ft.	1 or 2
163 A/B	11'5" x 15'	171 sq. ft.	1 or 2
164 A/B	11'4" x 14'11"	171 sq. ft.	1 or 2
165 A/B	11'4" x 15'	171 sq. ft.	1 or 2
166 A/B	11'5" x 14'11"	171 sq. ft.	1 or 2
167 A/B	11'5" x 15'	171 sq. ft.	1 or 2
168 A/B	11'5" x 11'6"	132 sq. ft.	1 or 2
169 A/B	11'5" x 14'10"	170 sq. ft.	1 or 2

The living, dining, and sitting room areas measure a total of **1,154** 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 **twenty (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 handicapped, aged, and/or traumatically brain injured in the least restrictive environment possible. The program statement provided by the applicant indicated the facility *will not* admit residents who are registered sex offenders in order for the facility to maintain its special permit use 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 04/05/1989. 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 Destiny Saucedo-Al Jallad as Licensee Designee and Zeta Francosky as the Administrator.

Criminal history background checks of the licensee designee and administrator were completed and they were determined to be of good moral character to provide licensed adult foster care. The licensee designee and administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative

rules. The Licensee Designee, Destiny Saucedo-Al Jallad, has a Bachelor's degree in Psychology, as well as, active certification with the Michigan Department of Education as a School Psychologist. Mrs. Saucedo-Al Jallad has worked at Turning Leaf Residential Rehabilitation Services, Inc. since 2011 as Administrator to fourteen of the licensee's facilities and as the Director of Operations. These positions have allowed Mrs. Saucedo-Al Jallad to oversee the licensee's programs such as residential treatment, community housing, day treatment and community integration programs for adults with severe and persistent mental illness, developmental disabilities, co-occurring substance use, personality disorders, and medical complexities. In holding these positions, Mrs. Saucedo-Al Jallad has ensured organizational efficiency and efficacy on a day to day basis. She also provides leadership to agency staff through facilitation of leadership, clinical and general supervision of meetings. These positions have also provided Mrs. Saucedo-Al Jallad with extensive experience in meeting Adult Foster Care Licensing Rules, as well as, adhering to requirements for the Commission on Accreditation of Rehabilitation Facilities (CARF). Finally, Mrs. Saucedo-Al Jallad has extensive experience with admitting and discharging residents within the licensee's programs.

The Administrator, Zeta Francosky, has her Bachelor's degree in Social Work. Ms. Francosky has over six years of experience working with young adults who have experienced severe physical, mental and/or emotional abuse, and who have struggled with behavioral/cognitive impairments. She has experience in developing, implementing and evaluating behavioral management procedures and treatment goals.

The staffing pattern for the original license of this 16 bed facility is adequate and includes a minimum of two direct care staff for 16 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. This change will be notated on the facility's staff schedule.

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 acknowledges 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 their 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 their 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.



02/07/2020

Cathy Cushman
Licensing Consultant

Date

Approved By:



02/25/2020

Dawn N. Timm
Area Manager

Date