

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 31, 2020

John Winden Close To Home Assisted Living, Saginaw LLC 1805 South Raymond Bay City, MI 48706

RE: Application #: AL730398655

Close to Home Assisted Living Saginaw Side 1

2160 N. Center Rd Saginaw, MI 48603

Dear Mr. Winden:

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) 284-9730.

Sincerely,

Kathryn A. Huber, Licensing Consultant Bureau of Community and Health Systems

Kathrys Habe

411 Genesee P.O. Box 5070 Saginaw, MI 48605 (989) 293-3234

enclosure

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

### I. IDENTIFYING INFORMATION

98655	
Home Assisted Living, Saginaw LLC	
1805 South Raymond	
, MI 48706	
0.0575	
8-2575	
nden	
nden	
ildeli	
Home Assisted Living Saginaw Side	
Training to agriculture	
2160 N. Center Rd	
, MI 48603	
8-2575	
10	
19	
ALLY HANDICAPPED	
PMENTALLY DISABLED	
ATICALLY BRAIN INJURED	

## II. METHODOLOGY

03/06/2019	Enrollment		
03/08/2019	Inspection Report Requested - Fire		
03/08/2019	Contact - Document Sent Fire Safety String		
03/08/2019	Application Incomplete Letter Sent AFC 100 and 1326 for john		
08/28/2019	Contact - Document Sent Ten Day Inactive Letter		
09/06/2019	Contact - Telephone call received Called Stating they were still interested		
09/06/2019	Application Incomplete Letter Sent 1326 and AFC100 for John		
09/06/2019	Application Incomplete Letter Sent 14-day app incomplete, 13226, RI030 & AFC100 for John		
09/12/2019	Contact - Document Received 1326, RI030 & AFC100 for John		
09/27/2019	Application Incomplete Letter Sent		
03/03/2020	Inspection Completed On-site		
03/03/2020	Inspection Completed-BCAL Sub. Compliance		
03/03/2020	Inspection Completed On-site		
03/03/2020	Inspection Completed-Env. Health: A		
03/12/2020	Inspection Completed-Fire Safety: A		
03/27/2020	Inspection Completed-BCAL Full Compliance		
03/27/2020	Recommend License Issuance		

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

Close to Home Assisted Living Side 1 is a 20-bed facility, that will be part of a three 20-bed licensed facility. The facility is a single-story solid brick building, in a circular shape, which was previously a nursing home and has been redesigned by DeShano Builders. The property is owned by John Winden, Jamie Beson, Gary DeShano and Neil DeShano. The facility is connected through corridors to Close to Home Assisted Living Side 2 and Side 3, which are not yet ready to be licensed. Close to Home Assisted Living Side 1 is located at 2160 North Center Road in the Township of Saginaw, MI 48603. Saginaw Charter Township Zoning Authority gave approval to Close to Home Assisted Living Side 1 on May 2, 2019. Close to Home Assisted Living Side 1 is a ranch style built on a slab and there is ample parking for visitors.

Close to Home Assisted Living Side 1 has 20-private bedrooms. There is an individual forced air gas furnace in each room that will allow staff to regulate the room temperature to the preference of each resident. Staff will monitor the temperature in each room. The facility is within blocks of shopping, medical care and a variety of services. The facility does provide transportation for scheduled appointments and activities. Bus service is also available. Close to Home Assisted Living Side 1 is street level and has two exit routes from the building.

The furnace and hot water heater are located in the maintenance room. The maintenance room has a self-closing, 1-3/4-inch solid core door and is constructed of material that has a 1-hour-fire-resistance rating. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational. The Office of Fire Safety gave Close to Home Side 1 a full approval, 'A' rating, on March 12, 2020.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
101	13' 8" X 15' 3"	211.14	1
102	13' 8" X 15' 3"	211.14	1
103	13' 8" X 15' 3"	211.14	1
104	13' 3" X 15' 3"	203.49	1
105	12' 5" X 15'3"	191.25	1
106	16'5" X 18' 8"	310.2	1
107	16'5" X 18'8"	310.2	1
108	16'5" X 18'8"	310.2	1
109	16'5" X 18'8"	310.2	1
110	16'5" X 18'8"	310.2	1
111	16'5" X 18'8"	310.2	1
112	16'5" X 18'8"	310.2	1

113	16'5" X 18'8"	310.2	1
114	16'5" X 18'8"	310.2	1
115	12'5" X 15'3"	191.25	1
116	13'3" X 15'3"	203.49	1
117	13'8" X 15'3"	211.14	1
118	16'2" X 15'3"	247.86	1
119	13'8" X 15'3"	211.14	1
120	13'8" X 15'3"	211.14	1

The living, dining, and sitting room areas measure a total of 1038 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement. This facility is wheelchair accessible. There are eight full bathrooms that connect 16 of the rooms. There are four private bathrooms in the other rooms.

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, ages 18 and above, whose diagnosis is developmentally disabled, traumatic brain injured, physically handicapped or aged in the least restrictive environment possible. Wheelchair users will be accepted. 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. Residents will be referred from local hospitals, Region 7, and nursing homes.

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.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

#### C. Applicant and Administrator Qualifications

The applicant is Close to Home Assisted Living Saginaw LLC, which is a For Profit Corporation was established in Michigan, on 10/01/2018. The applicant submitted a

financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

A licensing record clearance request was completed with no lein convictions recorded for the John Winden, the licensee designee and administrator. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

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

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 1-staff-to10 residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification 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 resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have <u>regular</u>, <u>ongoing</u>, "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 (<u>www.miltcpartnership.org</u>), L-1 Identity Solutions<sup>TM</sup> (formerly Identix ®), and the related documents required to be maintained in each employees 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 acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee's file.

The applicant acknowledges 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 acknowledges 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 acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their responsibility to obtain all of the required 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 the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The applicant acknowledges 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. Rule/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 temporary license to this adult foster care large group home (capacity 1 - 20).

Kathrys Habe 03/31/2020

Kathryn A. Huber Date

Licensing Consultant

Approved By:

03/31/2020

Mary E Holton Area Manager Date