



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 18, 2020

Bernadette Angeles
Hand in Hand Residential Care LLC
35851 Thornton Drive
Sterling Heights, MI 48310

RE: Application #: AS500401945
Hand in Hand Residential Care
35851 Thornton Drive
Sterling Heights, MI 48310

Dear Ms. Angeles:

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,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(586) 676-2877

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS500401945

Licensee Name: Hand in Hand Residential Care LLC

Licensee Address: 35851 Thornton Drive
Sterling Heights, MI 48310

Licensee Telephone #: (586) 610-6493

Administrator/Licensee Designee: Bernadette Angeles

Name of Facility: Hand in Hand Residential Care

Facility Address: 35851 Thornton Drive
Sterling Heights, MI 48310

Facility Telephone #: (586) 610-6493

Application Date: 10/04/2019

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
ALZHEIMERS
AGED

II. METHODOLOGY

10/04/2019	On-Line Enrollment
10/17/2019	Contact - Document Sent Act booklet
10/18/2019	Contact - Document Received App; IRS; 1326 & 001 for Bernadette
10/23/2019	Contact - Document Received Licensing file received from Central office
10/31/2019	Application Incomplete Letter Sent Sent via email PDF.
02/25/2020	Inspection Completed On-site
02/25/2020	Inspection Completed-BCAL Sub. Compliance
03/17/2020	Contact - Document Received
03/17/2020	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The small adult foster care home is located in a residential area in Sterling Heights MI. The home is a single-story brick ranch built on a slab. The home has two car attached garage. The first floor of the home consists of a family room, living room, dining room, formal dining room, kitchen, three full bathroom and four bedrooms. The home is located in Warren Consolidated School and surrounded by many restaurants and recreational activities.

The furnace and hot water heater are located on the first floor and is equipped with a 1³/₄ inch solid core door equipped with an automatic self-closing device and positive latching hardware. 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 home has forced heating, natural gas, public water and central air.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	18 x 17	306	1
2	8.1 x 11.2	90.3	2
3	11.6 x 11.5	131.29	1
4	11.2 x 11.5	127.49	2

Total capacity: 6

The family room, living room, dining room and formal dining room areas measure a total of 732.85 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate **six (6)** 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 **six (6)** male or female ambulatory adults whose diagnosis is physical handicapped, Alzheimer's and Aged, in the least restrictive environment possible.

The program is designed for seniors who may require help managing incontinence, nutritional and medication routines. Hand in Hand Residential Care, LLC promotes independence, maximum function, and personal dignity. This includes persons recuperating after strokes, those who have physical limitation associated with multiple sclerosis and other diagnosis. Residents will be referred from: Michigan Society of Case Management, American Society of Case Management including Careforward and Feinberg Consulting.

The home accepts male and female residents ages 55-99. The program will include social interaction skills, personal hygiene, personal adjustment skills, public safety skills and transportation.

Hand in Hand Residential Care, LLC provides respite care, transportation and activities on and off-site. The home provides a higher level of care that includes preparing meals, housekeeping, medication management and laundry. Guardian Angel Adult Family Home is designed to bridge the gap between independent living and nursing home facilities.

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, or the responsible person.

Hand in Hand Residential Care, LLC provides care for the Alzheimer's population and has safeguards for wandering and caregivers that are trained in handling dementia behaviors. The home is in a family-like setting with private and semi-private rooms. In addition to the above program elements, it is the intent of the applicant to utilize local community resources including the public schools and library, local museums, and shopping centers. These resources provide an environment to enhance the quality of life and increase the independence of each resident.

Hand in Hand Residential Care, LLC duty is to ensure the health, safety, dignity and rights to each resident in a supportive family environment. Guardian Angel Adult Family Home services are directed toward the goals of assisting, teaching and supporting each resident to provide quality home assistance, sense of well-being, high self-esteem and individual independence.

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

Hand in Hand Residential Care, L.L.C., which is a "Domestic Limited Liability Company", was established in Michigan, on 09/06/2019. Hand in Hand Residential Care, L.L.C 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.

The Board of Directors of Hand in Hand Residential Care, L.L.C has submitted documentation appointing Bernadette Angeles as licensee designee and administrator for this facility.

A licensing record clearance request was completed with no LEIN convictions recorded for Bernadette Angeles. Bernadette Angeles submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

Bernadette Angeles has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. The applicant, Bernadette Angeles has worked in direct care for five years including in home health care environments, being exposed to multiple diagnosis and conditions, non-ambulatory, wound sufferers and severe dementia. Bernadette Angeles has a Doctor of Dental Medicine from De Ocampo Memorial College from Manila Philippines. Ms. Angeles also is the licensee for a licensed family home Angie's Residential Care.

Bernadette Angeles completed Basic Life Support from the American Safety & Health Institute. Ms. Angeles received a certificate in Adult Foster Care Administrators and Licensees-State of Michigan training October 18, 2017. The trainings were as follows: Adult Foster Care Act; Working with People: Behavioral Characteristics Associated with Diagnosis; Program and Licensing Requirements: The Physical Plant and Residential Program Development; Knowing Resident/Recipient Rights and How to Teach Them to Staff; Reporting Requirements; Documentation Integrity: Documenting Critical Incidents; Effective Financial and General Management. Nutritional Protocol in Adult Foster Care: Including Food Handling Rule Review; Health Administration and Medication Administration; Person Centered Planning; Prevention & Containment of Communicable Disease Blood Borne Pathogens; Resident Protection and Prohibited Practices: Recognizing and responding to Reports of Abuse and Neglect.

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

Bernadette Angeles 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 ratio.

Bernadette Angeles 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), L-1 Identity Solutions™ (formerly Identix ®), and the related documents required to be maintained in each employees record to demonstrate compliance.

Bernadette Angeles 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.

Bernadette Angeles 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.

Bernadette Angeles acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Bernadette Angeles indicated that it is their intent to achieve and maintain compliance with these requirements.

Bernadette Angeles t 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. Bernadette Angeles 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.

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

Bernadette Angeles 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, Bernadette Angeles 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.

Bernadette Angeles 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

Bernadette Angeles was in compliance with the licensing act and applicable administrative rules at the time of licensure.

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small/large group home (capacity 1-20).

L. Reed

03/17/2020

LaShonda Reed
Licensing Consultant

Date

Approved By:

Denise Y. Nunn

03/18/2020

Denise Y. Nunn
Area Manager

Date