



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 11, 2020

Matthew Sufnar
Randall Residence of Sterling Heights, LLC
13400 19 Mile Rd
Sterling Heights, MI 48313

RE: Application #: AL500402687
Randall Residence of Sterling Heights I
13400 19 Mile Rd
Sterling Heights, MI 48313

Dear Mr. Sufnar:

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 (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 #:	AL500402687
Licensee Name:	Randall Residence of Sterling Heights, LLC
Licensee Address:	13400 19 Mile Rd Sterling Heights, MI 48313
Licensee Telephone #:	(772) 492-5002
Administrator/Licensee Designee:	Matthew Sufnar/Matthew Sufnar
Name of Facility:	Randall Residence of Sterling Heights I
Facility Address:	13400 19 Mile Rd Sterling Heights, MI 48313
Facility Telephone #:	(248) 606-5664
Application Date:	12/09/2019
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODOLOGY

12/09/2019	On-Line Enrollment
12/10/2019	Contact - Document Received App & IRS letter
12/10/2019	Contact - Document Sent Act booklet
12/11/2019	Contact - Document Received 1326 for Matthew Sufnar licensee designee/administrator (LD & Admin).
12/11/2019	Lic. Unit file referred for background check review Matthew Sufnar licensee designee/administrator (LD & Admin)
12/11/2019	Contact - Document Sent Fire Safety
12/16/2019	Contact - Document Received Licensing file received from Central office
01/07/2020	Application Incomplete Letter Sent
02/07/2020	Inspection Completed-Fire Safety: A A fire safety inspection was completed this date. Deficiencies noted in our last inspection have been satisfactorily corrected.
06/22/2020	Application Complete/On-site Needed
07/14/2020	Inspection Completed On-site Virtual inspection conducted via FaceTime via with Matt Sufnar.
07/14/2020	Inspection Completed-Env. Health: A
07/14/2020	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Randall Residence of Sterling Heights I is a large adult foster care home located in a residential area in Sterling Heights, MI. The facility is low rise multiple dwelling housing for the elderly. The facility is a total of 206,196.57 square feet on 4.73 acres. The facility is one of four facilities located on the property.

The facility has 20 single resident bedrooms with individual bathrooms and a small living area in each unit. It has a separate dining area, large living room area, and two common/public restrooms (one has a wheelchair accessible shower) and a covered porch area in front of the building. There are also several storage rooms, a laundry room, a medication room, an employee break room, hair salon and a staff office. The facility has a courtyard and shares an industrial kitchen with another facility within Randal Residence of Sterling Heights, LLC.

There are currently 10 residents living in the facility. Randall Residence of Sterling Heights, LLC is taking over the facility from Harbor Chase of Sterling Heights, Inc.

The maximum capacity is restricted to twenty (20) residents. The facility is wheelchair accessible. All entrances are at ground level. The heating plan and hot water tank are in a mechanical rom adjacent to the dining room area. There is no basement.

The facility is on a paved thoroughfare with adequate paved parking and off-street parking in front of the building.

The following bedroom dimensions are according to Rule 400.15409 (2):

Bedroom #	Total Square Footage	Total Resident Beds
1	297	1
2	297	1
3	318	1
4	297	1
5	298	1
6	313	1
7	214	1
8	298	1
9	313	1
10	319	1
11	298	1
12	298	1
13	298	1
14	314	1
15	298	1
16	298	1
17	297	1
18	297	1
19	314	1
20	298	1

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.

According to Rule 400.15405 (1), the following areas were measured for square feet living space.

<u>Living Space</u>	<u>Square Feet</u>
Living Room	216
Living Room	225
Living Room	459
Dining Room	709

The living rooms and dining room areas measure a total of 1609 square feet of living space. This exceeds the minimum of 700 square feet per 20 residents. requirement.

Fire Safety

The Bureau of Fire Services inspection report date 02/07/2020 reported no deficiencies with the facility sprinkler system, fire alarms, fire extinguishers and kitchen hood.

Sanitation

The facility utilizes public water and sewage system. All garbage will be kept in a leak proof nonabsorbent container with a tight-fitting lid. Poison, caustics, and other dangerous material will be stored and a safeguarded in non-food preparation storage areas.

B. Program Description

Randall Residence of Sterling Heights I is a memory care facility that provides care and in a warm secure environment. Randall Residence of Sterling Heights provides personalized care by a professionally trained team that treats each resident at their level of care. The memory care team provides care holistically by supporting each resident by nourishing their mind, body and soul.

Randall Residence of Sterling Heights I comprehensive services will provide health care needs and status monitored by Licensed Nurses, personal care services, three nutritious meal and snacks, weekly housekeeping & laundry service, monthly calendar of activities and events, scheduled transportation and access to visiting care professionals.

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 and/or non-ambulatory adults whose diagnosis is aged, physically handicapped or Alzheimer's disease in the least restrictive environment possible. 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 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

Randall Residence of Sterling Heights, L.L.C., which is a "Domestic Limited Liability Company", was established in Michigan, on 08/01/2019. Randall Residence of Sterling Heights, 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 Randall Residence of Sterling Heights, L.L.C has submitted documentation appointing Matthew Sufnar as Licensee Designee and Administrator for the facility.

Mr. Sufnar was appointed as the licensee designee and administrator in April 2019 for Harbor Chase of Sterling Heights in which, he continues to maintain this position. Mr. Sufnar's education background is as follows: Medical Assistant Certificate in 2007; Certified Red Cross Instructor in C.P.R./First Aide/Blood Borne Pathogens; Certificate of completion from the National Assisted Living Manager Gold Seal. Mr. Sufnar has experience as a medical assistant, personal home care independent contractor, assistant director of an assisted living facility, office manager, Director of Human Resources and Business Office Manager.

A licensing record clearance request was completed with no LEIN convictions recorded for Matthew Sufnar licensee designee/administrator. Mr. Sufnar submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

Matthew Sufnar has 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 1:15 during waking hours and 1:20 per sleeping hours at full capacity residents per shift. All staff shall be awake during sleeping hours.

Mr. Sufnar 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 1–to-15 resident ratio.

Mr. Sufnar 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.

Mr. Sufnar 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, Mr. Sufnar 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.

Mr. Sufnar 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, Mr. Sufnar 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.

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

Mr. Sufnar 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. Mr. Sufnar 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.

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

Mr. Sufnar 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, Mr. Sufnar 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.

Mr. Sufnar 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.

C. 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 AFC adult large group home (capacity 1-20).

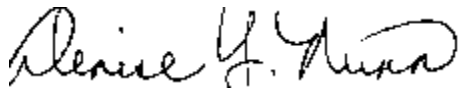


07/30/2020

LaShonda Reed
Licensing Consultant

Date

Approved By:



08/11/2020

Denise Y. Nunn
Area Manager

Date