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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 21, 2020

Elena Lopez
Nothing But Us Care
Suite 212
31700 W 13 Mile Rd
Farmington Hills, MI 48334

RE: Application #: AS630401982
Nothing But Us Care
5887 N Course Place
West Bloomfield, MI 48323

Dear Ms. Lopez:

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 "Sheena Bowman".

Sheena Bowman, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630401982
Applicant Name:	Nothing But Us Care
Applicant Address:	Suite 212 31700 W 13 Mile Rd Farmington Hills, MI 48334
Applicant Telephone #:	(248) 667-2164
Administrator/Licensee Designee:	Elena Lopez
Name of Facility:	Nothing But Us Care
Facility Address:	5887 N Course Place West Bloomfield, MI 48323
Facility Telephone #:	(248) 667-2164
Application Date:	10/08/2019
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED

II. METHODOLOGY

04/18/2019	Contact - Document Sent Fire Safety String
04/18/2019	Inspection Report Requested - Fire
04/18/2019	Inspection Report Requested - Fire Originally requested for AM630399327
10/08/2019	Enrollment
10/14/2019	Contact - Document Received Licensing file received from Central office
10/23/2019	Application Incomplete Letter Sent
12/16/2019	Contact Document Received I received some of the required documents from the applicant.
02/04/2020	Contact Document Received I received some of the required documents from the applicant.
03/04/2020	Contact Document Received I received some of the required documents from the applicant.
05/01/2020	Response Letter Sent A continue interest letter was emailed to Elena Lopez. A copy of the letter will also be mailed to Ms. Lopez.
05/29/2020	Response Letter Sent A continue interest letter was emailed to Elena Lopez. Ms. Lopez was informed that she has until 06/19/20, to provide the remaining required documents or her application will be withdrawn.
06/05/2020	Contact Document Received I received some of the required documents from the applicant via email.
06/10/2020	Contact Document Received I received some of the required documents from the applicant via email.
06/15/2020	Contact Document Received I received some of the required documents from the applicant via email.

06/19/2020	Contact Document Sent I sent a letter to the applicant regarding missing documents and corrections that are needed for the documents that have been received.
06/30/2020	Contact Document Received I received revised documents from the applicant via email.
07/02/2020	Contact Document Received I received some of the required documents from the applicant via email.
07/06/2020	Contact Document Received I received the final copies of the required documents from the applicant via email.
07/23/2020	Application Complete/On-site Needed
07/23/2020	Inspection Completed On-site
07/23/2020	Inspection Completed-BCAL Sub. Compliance
07/28/2020	Application Incomplete Letter Sent A confirming letter was sent to the applicant, Elena Lopez via email.
08/19/2020	Inspection Completed On-site A follow up inspection was completed to verify compliance.
08/19/2020	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a brick colonial two story home in West Bloomfield, Michigan. There are five bedrooms and four bathrooms. The main level consists of a kitchen, a living room, laundry room, one half bathroom, one full bathroom, and one resident bedroom. There is an open space consisting of the dining area and a den area. There is also a fire place located in the living area which contains a lock for safety. The second level consists of four resident bedrooms, one full bathroom located in the hallway, and one full bathroom located in the master bedroom (bedroom number five). The bathroom located in the master bedroom will not be used by the residents and will remain locked; due to the bathroom door not being in compliance with licensing rules. This facility is not

wheelchair accessible. The facility has two approved means of egress that are equipped with positive-latching and non-locking against egress hardware. The bedroom and bathroom doors are equipped with positive-latching and non-locking against egress hardware. The facility has city water and sewage. There is parking available on the street as well as in the driveway of the home.

The furnace and the water heater are located in the basement. The furnace and water heater are enclosed in a room with a solid core door with an automatic self-closing device and positive-latching hardware. The furnace was inspected on 08/04/20. The inspection report did not indicate any safety hazard concerns. The basement will not be used for resident activities. There is also a boiler located in the garage. There are smoke detectors located in the kitchen, in the upstairs hallway, and in the basement. The smoke detectors were tested and are working properly. There are fire extinguishers located on each floor. The refrigerator and freezer are equipped with thermometers. The home has a locked cabinet in the kitchen for medications. During the follow up onsite inspection, I observed the home to be in substantial compliance with rules pertaining to maintenance and sanitation.

The bedrooms have adequate space, linen, and an easily openable window with a screen installed. The bedrooms have a chair, mirror, dresser, and closet.

The five resident bedrooms were measured during the onsite inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12'0" x 11'6"	138	1
2	12'0" x 16'7"	198.96	1
3	10'7" x 13'3"	140.18	1
4	12'5" x 9'8"	119.97	1
5	12'5" x 16'7"	205.92	2

Total Capacity: 6

The living room, dining area, and den area offer a total of 730.38 square feet of living space; which exceeds the minimum requirement of 35 square feet of living space for six residents.

Based on the above-mentioned measurements, it is concluded that this facility can accommodate six residents. It is the licensee designee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

A copy of the program statement, admission policy, discharge policy, refund policy, job descriptions, personnel policies, and standard procedures were reviewed and accepted as written. Nothing But Us Care will provide 24-hour supervision, protection, and personal care to six male and/or female residents. Nothing But Us Care will provide services tailored to the aged and physically handicapped. The residents will reside in a home setting and receive assistance with daily living according to their physical, medical, mental, dietary, and emotional needs. The facility intends to accept residents from their other agency, Nothing But Us Care LLC home health care services as a referral source. The facility intends to hire a CNA to check the resident's vitals on a weekly basis, administer nail care, ensure AFC care plan corroborates with the resident medical instructions, monitor the residents progress, and support the facility policies and procedures.

Nothing But Us Care has a contract with Medical Transportation Management, Inc. to provide non-medical transportation services. Nothing But Us Care will provide transportation to medical appointments, the pharmacy, physical therapy, and social outings at no additional cost to the resident. Transportation will also be provided for family gatherings for free within a distance of 30 miles from the facility. Transportation fees will apply for family gatherings that exceed a distance over 30 miles from the facility. Nothing But Us Care will also make provisions for a variety of leisure and recreational activities such as; outdoor exercising, movie nights, music nights, bingo, board games, arts and crafts, and educational outings.

C. Applicant and Administrator Qualifications

The licensee for the home is Nothing But Us Care. Ms. Elena Lopez will act as the licensee designee and administrator. Ms. Lopez will be residing in the basement of the home. I received a copy of the deed for the home. The home is owned by Hans Lindor. Mr. Lindor provided authorization for the home to be inspected and licensed as an adult foster care home.

Nothing But Us Care submitted a proposed budget and bank statements 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 Ms. Lopez. Ms. Lopez submitted a medical clearance request with statements from a physician documenting her good health and current TB negative test results.

Ms. Lopez has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Lopez is trained in nutrition, first aid, CPR, foster care, safety and fire prevention, financial and administrative management, knowledge of the needs of the population to be served, resident rights, and prevention and containment of communicable diseases. Ms. Lopez provided two reference letters from relatives of parents she worked for as a caregiver

through her other agency, Nothing But Us Care LLC home health care services. Ms. Lopez has at least one-year experience with working with the aged and physically handicapped population. Ms. Lopez has experience with providing assistance with bathing, dressing, housekeeping, and preparing meals.

The staffing pattern for the original license of this six-bed facility is adequate and includes two staff members for the morning and afternoon shift and; one staff member for the midnight shift.

Ms. Lopez 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.

Ms. Lopez acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, or 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.

Ms. Lopez acknowledged 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 designee can administer medication to residents. In addition, Ms. Lopez indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Ms. Lopez acknowledged her responsibility to obtain all required 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, Ms. Lopez acknowledged her responsibility to maintain all required documentation in each employee's record for each licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. Lopez 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.

Ms. Lopez acknowledged her responsibility to obtain the required 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. Ms. Lopez also agrees to update and complete those forms and obtaining new signatures for each resident on an annual basis.

Ms. Lopez acknowledged her 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.

Ms. Lopez acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Lopez 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 licensee designee.

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

Ms. Lopez 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. Ms. Lopez indicated her intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Ms. Lopez acknowledged her responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Ms. Lopez acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

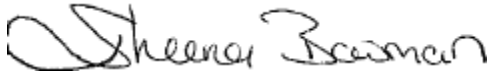
Ms. Lopez acknowledged she has a copy of the licensing rule book for AFC small group homes. The licensing consultant provided a copy of the adult foster care licensing group home and physical plant worksheets, and a binder containing copies of the required forms that must be completed for each resident to Ms. Lopez.

D. Rule/Statutory Violations

Nothing But Us Care was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

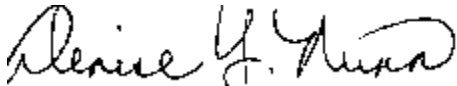
I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6). The temporary license will be in effect for a six-month period. A licensing renewal will be conducted following the six-month period.



Sheena Bowman
Licensing Consultant

08/20/20
Date

Approved By:



Denise Y. Nunn
Area Manager

08/21/2020
Date