



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

October 27, 2020

Megan Fry  
MCAP Clare Opco, LLC  
Suite 115  
21800 Haggery Rd  
Northville, MI 48167

RE: Application #: AL180404676  
**Prestige Place I**  
**684 Ann Arbor Trail**  
**Clare, MI 48617**

Dear Ms. Fry:

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,

*Bridget Vermeesch*

Bridget Vermeesch, Licensing Consultant  
Bureau of Community and Health Systems  
1919 Parkland Drive  
Mt. Pleasant, MI 48858-8010  
(989) 948-0561

enclosure

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

**I. IDENTIFYING INFORMATION**

**License #:** AL180404676

**Applicant Name:** MCAP Clare Opco, LLC

**Applicant Address:** Suite 115  
21800 Haggery Rd  
Northville, MI 48167

**Applicant Telephone #:** (248) 773-4600

**Licensee Designee:** Megan Fry

**Administrator:** Chelsea Blain

**Name of Facility:** Prestige Place I

**Facility Address:** 684 Ann Arbor Trail  
Clare, MI 48617

**Facility Telephone #:** (989) 386-7524

**Application Date:** 05/15/2020

**Capacity:** 20

**Program Type:** PHYSICALLY HANDICAPPED  
AGED  
ALZHEIMERS

## II. METHODOLOGY

05/15/2020	Enrollment
06/04/2020	Application Incomplete Letter Sent 1326, ri030 for Megan Fry and AFC 100 for Chelsea Blain
06/10/2020	Contact - Document Sent- Fire safety string
06/18/2020	Contact - Document Received- 1326 & RI030 For Megan
07/15/2020	Inspection Completed-Fire Safety: A Uses BFS inspection from renewal of Life House.
09/25/2020	Contact - Document Received- IRS letter
10/05/2020	Contact - Document Received- AFC 100
10/05/2020	Lic. Unit file referred for background check review e-mailed Candace Pilarski
10/14/2020	Application Complete/On-site Needed
10/14/2020	Inspection Completed On-site Physical plant inspection and required paperwork received.
10/14/2020	Inspection Completed-BCAL Full Compliance
10/14/2020	Inspection Completed- Environment Health: A

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The property located at 684 Ann Arbor Trail, Clare, Michigan 48617 is owned by MCAP Clare Propco, LLC and leased to MCAP Clare Opco, LLC. The facility is located on a large lot within the City of Clare next to the Clare High School sport complex. The facility is attached to another licensed AFC twenty-bed facility which is nearly identical in design. The facility is a single story ranch style built on a cement slab with vinyl siding and brick accent. The facility is in the shape of an 'L' with the main entrance being a large, enclosed breezeway with a sitting area. This arrangement allows each licensed building to have their own separate entrance which is achieved by single fire rated door. Prestige Place I entrance is to the left upon entering into the breezeway. Prestige Place I has a commercial kitchen, large combined dining and living room, laundry room, office/conference room, boiler room, eight private bedrooms, six semi-private bedrooms, and four full resident bathrooms. The residents in Prestige Place I may if desired utilized the licensed beautician and hair salon located in Prestige Place II.

Prestige Place I is heated with natural gas, cooled with window air-conditioning, and serviced by public utilities water/sewage plant. Prestige Place I boiler is located in a room that is constructed of material that has a 1-hour-fire-resistance rating and further protected by a fire rated door of 1 ¾ inch solid core door equipped with an automatic self-closing device and positive latching door hardware. The capacity of this facility will enable 20 residents to utilize street level bedrooms with four exit doors at ground level, leading onto a sidewalk in which connects to the parking lot for safe evacuation. This facility is barrier free and wheelchair accessible with assurances of appropriate staffing.

Prestige Place I is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. The facility is also fully sprinkled as required. Fire extinguishers and emergency evacuations routes have been posted throughout the facility. The facility has been determined by the Bureau of Fire Services to be in full compliance with the applicable fire safety administrative rules on July 15, 2020.

An inspection pertaining to the administrative rules governing environmental health was conducted on 10/14/2020 by this consultant and the facility was found to be in substantial compliance with administrative rules pertaining to environmental health.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	8'2" X 12'2"	100.04 sq. ft	1
2	8'2" X 12'2"	100.04 sq. ft	1
3	12'6" X 12'2"	153.72 sq. ft	2
4	12'6" X 12'2"	153.72 sq. ft	2
5	12'6" X 12'2"	153.72 sq. ft	2
6	12'6" X 12'2"	153.72 sq. ft	2
7	12'6" X 12'2"	153.72 sq. ft	2
8	12'6" X 12'2"	153.72 sq. ft	2
9	12'6" X 12'2"	153.72 sq. ft	1
10	12'6" X 12'2"	153.72 sq. ft	1
11	12'6" X 12'2"	153.72 sq. ft	1
12	12'6" X 12'2"	153.72 sq. ft	1
13	9'3" X 11'5"	106.95 sq. ft	1
14	13'10" X 11'5"	150.65 sq. ft.	1

The living and dining rooms measure 1,155 square feet of living space and the conference room measures 184.80 square feet of living space. This exceeds the minimum of 35 square feet of common space per resident requirement. Based on the above information, it is concluded that this facility can accommodate 20 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

The applicant intends to provide 24-hour supervision, protection, and personal care to 20 male and female residents who are aged 55 years and above, physically handicapped, and/or those who have been diagnosed with Alzheimer's Disease or related conditions. The program will include social interaction through activities at the facility, communal dining, and community day programs. The applicant intends to accept referrals from Veterans Administration, Hospital, MI Choice-Medicaid Waiver and residents with private sources for payment. The facility will assure all direct care staff members are trained to provide care for those residents diagnosed with Alzheimer's Disease or related conditions and receive updated training as required.

**If needed by residents**, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local and nearby community resources for recreational activities including the public library, local museums, shopping centers, churches, and local festivals. Clare Michigan is 15 miles from Mt. Pleasant Michigan who offers large city activities such as a casino, concerts, parks, and shopping centers. These resources provide an environment to enhance the quality of life and increase the independence of residents.

## **C. Applicant and Administrator Qualifications**

The applicant is MCAP Clare Opco, LLC, a "For Profit Corporation", established in Michigan 02/24/2020. 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.

The Board of Directors of MCAP Clare Opco, LLC. has submitted documentation appointing Megan Fry as licensee designee for this facility. Chelsea Blain has been appointed as the administrator of the facility.

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 have 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. Ms. Fry been a licensee designee of a facility for one year, was an administrator for one and a half years and an activities director for one and a half years. Ms. Blain has seven years' experience as a direct care staff/medication technician and two and a half years as an administrator.

The staffing pattern for the original license of this 20 bed facility is adequate and includes a minimum of two staff for 20 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 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. The applicant acknowledge the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing “direct access” to residents or resident information or both utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee designee will 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 the 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 the 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 adult foster care home.

The applicant acknowledged the 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 as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

The applicant acknowledged the 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 requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

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

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

#### **D. Rule/Statutory Violations**

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult large group home with a capacity 20 residents.

*Bridget Vermeesch*

10/20/2020

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Bridget Vermeesch  
Licensing Consultant

Date

Approved By:

*Dawn Timm*

10/27/2020

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Dawn N. Timm  
Area Manager

Date