



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 18, 2020

Achal Patel
Divine Life Assisted Living Center 1, LLC
2045 Birch Bluff Drive
Okemos, MI 48864

RE: Application #: AM190404916
Divine Life Assisted Living Center 1 LLC
607 Turner Street
DeWitt, MI 48820

Dear Mr. Patel:

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 11 is issued conditional upon approval from the Mid-Michigan District Health Department.

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,

A handwritten signature in cursive script that reads "Leslie Herrguth".

Leslie Herrguth, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 256-2181

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM190404916
Licensee Name:	Divine Life Assisted Living Center 1, LLC
Licensee Address:	607 Turner Street DeWitt, MI 48820
Licensee Telephone #:	(517) 898-2431
Licensee Designee:	Achal Patel
Administrator:	Achal Patel
Name of Facility:	Divine Life Assisted Living Center 1 LLC
Facility Address:	607 Turner Street DeWitt, MI 48820
Facility Telephone #:	(517) 277-0544
Application Date:	06/30/2020
Capacity:	11
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODOLOGY

06/30/2020	On-Line Application Received - Original
06/30/2020	On-Line Application Incomplete Letter Sent App; IRS ltr; 1326, RI-030, AFC 100, FPs for Achal
06/30/2020	On-Line Fee Received - Original
06/30/2020	On-Line Enrollment
07/20/2020	Contact - Document Received IRS ltr & AFC 100 for Achal (LD & Admin)
07/23/2020	Comment FPs for Achal (LD & Admin)
07/27/2020	File Transferred To Field Office Lansing
09/29/2020	Inspection Completed-Fire Safety : A See license number AM190309116
09/30/2020	Application Incomplete Letter Sent
10/15/2020	Contact - Document Received admission policy, budget, responsible person designation, discharge policy, floor plans, lease. medical release for admin/LD, organizational chart, permission to inspect, program statement, standard and routine procedures, staffing pattern, TB test result for admin/LD, personnel policies, job descriptions, Alzheimer's statement, applicant training and competencies
10/19/2020	Contact - Document Received updated program statement, admission policy, and fee/refund policy.
10/19/2020	Contact - Document Received new application, letter confirming no change in tax ID #, certificate of amendment to the articles or organization and filing endorsement for name change
10/21/2020	Contact - Document Received zoning approval
10/28/2020	Inspection Report Requested - Health
10/28/2020	Inspection Completed On-site virtual due to potential COVID 19 exposure

10/28/2020 Inspection Completed-BCAL Sub. Compliance

11/09/2020 Inspection Completed – Environmental Health: A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

Divine Life Assisted Living Center is a ranch style structure partially built on a concrete slab with a finished basement on the north side of the facility. A second story addition was built onto the north side of the building only. The small second level has a walk-out deck and stairs leading to a two-car carport. The facility is positioned on a corner lot in a residential neighborhood in downtown DeWitt, Michigan, which is in Clinton County. The front of the facility and the main entrance to the facility face away from the street and is accessed after opening two separate outdoor gates. The front yard of the facility is surrounded by a chain-linked fence and has a deck where residents can sit and enjoy the outdoors. The facility has a semi-circular driveway which provides ample parking space for visitors and staff members. The facility has smooth flooring which is easily traversed in wheelchairs along with individual bedroom colors, chimes on all exits that alert staff members if a door inside the facility is open, and gates outside the facility.

The main level of the facility consists of seven resident bedrooms, living area, activity/dining area, kitchen, small dining area, two full bathrooms, one half bathroom, a salon area, and laundry area. The northern end of the facility has a second level addition which will be used by staff members as a lounge or office space. The second story addition has a small kitchenette and full bathroom. This area will not be used or accessed by residents. Also, at the northern end of the facility is a finished basement which will not be accessed by residents.

The main entrance of the facility is at grade and can be easily accessed by a resident who uses a wheelchair. The second exit located off the activity/dining area has a wheelchair ramp that is the required slope and width.

The facility is equipped with two hot water heaters and two furnaces which are all powered by natural gas. One furnace and water heater is located on the main level of the home and is enclosed in a room that is constructed of material which has a one-hour fire resistance and a fire-rated metal door that is equipped with an automated self – closing device and positive latching hardware. The door is hung in a fully stopped wooden frame. The second furnace and water heater are located in the basement. Floor separation between this flame – producing equipment is created by a 1 ¾ inch solid wood door that is hung in a fully stopped metal frame and is equipped with an automated self – closing device and positive latching hardware.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational and

is fully sprinkled. The facility has been determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules on 09/29/2020.

The facility has a public sewage disposal system and private water supply. As of 11/08/20 the home was in compliance with all applicable environmental health standards based on an inspection completed a sanitarian from the Mid-Michigan District Health Department.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	5' 5" X 9' 8" + 4' 4" X 6' 7"	81	1
2	9' 8" X 10' 0"	97	1
3	8' 5" X 9' 9"	82	1
4	13' 9" X 8' 0" + 3' 0" X 7' 2"	132	2
5	21' 0" X 6' 10"	143	2
6	7' 2" X 9' 10" + 9' 3" X 7' 0"	135	2
7	7' 6" X 7' 0" + 14' 3" 7' 6"	159	2
Living area	13' 2" X 19' 0'	250	
Activity/Dining area	18' 8" X 14' 10"	276	

The indoor living area measured 34" X 29' 2" and dining area measured 15' 8" X 32' 11" for a total of 1,500 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 11 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 11 male and/or female residents age 45+ who have a physical handicap or are aged or who have Alzheimer's disease or related conditions. The objectives of the program are to provide high-quality care in a clean, friendly and inviting environment, to maintain or improve residents' functional skills and quality of life, to foster social interaction and activity to promote cognitive stimulation, to offer safety and to provide an appetizing menu. The applicant expressed an intent to provide security by keeping things simple and routine, encouraging interaction, and communication with smiles and humor. The admission policy indicated criteria for placement in or transfer or discharge from a program for residents with Alzheimer's disease or related conditions. The applicant intends to utilize the resident health care appraisal, interview and observation of the resident prior to admission, and information from the referring agency or family to

determine if the facility is appropriate to meet the residents' needs. The applicant has determined the facility can accommodate residents who are aggressive, act out sexually, exit seek, or require assistance from two staff members for mobility or other activities of daily living.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. The applicant intends to assess each resident personally to determine the required level of care. All interventions will be implemented only by staff trained in the intervention techniques. Staff will be trained initially and on an ongoing basis on proper ways to care for residents with Alzheimer's disease and similar conditions by the applicant or designated representative.

Residents will be engaged in daily activities designed specifically for their needs. Memory games, word puzzles, and targeted conversation will be used to help residents remain engaged in daily living. Residents will be able to participate in physical activities such as chair exercises with balls and beanbags daily. The applicant intends to provide other daily activities, such as music, crafts, movies, pet therapy, or spa day.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life of residents.

The applicant intends to accept referrals from Tri-County Office on Aging, Program Of All Inclusive Care for the Elderly (PACE), or residents with private sources for payment. No supplemental fees will be charged for services provided to patients or residents with Alzheimer's disease or related conditions.

C. Applicant and Administrator Qualifications:

The applicant is Divine Life Assisted Living Center 1, LLC a "Domestic Limited Liability Company", established in Michigan on 02/21/2020. 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 members of Divine Life Assisted Living Center 1, LLC have submitted documentation appointing Achal Patel as licensee designee and administrator for this facility.

Criminal history background checks of the applicant and administrator were completed and he was determined to be of good moral character to provide licensed adult foster care. Mr. Patel submitted statements from a physician documenting his good health and current negative tuberculosis test results dated 10/09/2020.

Mr. Patel provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mr. Patel currently operates one

licensed AFC group homes and has successfully done so since 9/18/2018. Mr. Patel currently provides care to men and women who are aged and who have numerous other physical health diagnoses including Alzheimer's disease and/or various stages of dementia. Mr. Patel has experience caring for residents diagnosed with physical handicaps in his currently licensed facility. Mr. Patel holds a doctorate degree in physical therapy from Des Moines University. Mr. Patel holds a degree in sports medicine and sports physical therapy. Mr. Patel has performed home care for the middle – aged and geriatric population as a licensed physical therapist for 19 years.

The staffing pattern for the original license of this 11-bed facility is adequate and includes a minimum of one staff member for 11 residents per shift. The applicant acknowledged that the staff to resident ratio may need to be decreased 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 and also due to the arrangement of the physical setting. 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 acknowledges 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) 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 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 acknowledge 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 residents' 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, though the facility is one level.

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 six-month temporary license to this adult foster care group home with a capacity of 11 residents.

Leslie Herrguth

11/18/20

Leslie Herrguth
Licensing Consultant

Date

Approved By:

Dawn Timm

11/18/2020

Dawn N. Timm
Area Manager

Date