



STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

June 9, 2021

Rebecca Carver
Caring Hearts Community, LLC
3942 107th Avenue
Allegan, MI 49010

RE: Application #: AS030407230
Caring Hearts Community
1212 32nd Street
Allegan, MI 49010

Dear Ms. Carver:

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 (616) 356-0183.

Sincerely,

A handwritten signature in black ink, appearing to read "Ian Tschirhart".

Ian Tschirhart, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 644-9526

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS030407230
Applicant Name:	Caring Hearts Community, LLC
Applicant Address:	3942 107th Avenue Allegan, MI 49010
Applicant Telephone #:	(269) 355-1927
Administrator/Licensee Designee:	Rebecca Carver
Name of Facility:	Caring Hearts Community
Facility Address:	1212 32nd Street Allegan, MI 49010
Facility Telephone #:	(269) 218-5005
Application Date:	01/08/2021
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODOLOGY

01/08/2021	Enrollment
02/09/2021	Application Incomplete Letter Sent App - Box 16; IRS letter; 1326, RI-030 & FPs for Rebecca (LD & Admin)
02/16/2021	Contact - Document Received IRS info
02/24/2021	Contact - Document Received \$25; ck #2480
03/08/2021	Contact - Document Received RI-030 & AFC100 for Rebecca (LD & Admin)
03/11/2021	Contact - Document Received App - Box 16; 1326 for Rebecca (LD & Admin)
03/16/2021	Inspection Report Requested - Health Inv. #1031363
03/16/2021	File Transferred to Field Office GR
04/20/2021	Contact - Document Received Ms. Carver inquired about an onsite inspection
04/20/2021	Contact - Document Sent I confirmed an onsite inspection with Ms. Carver
04/23/2021	Contact - Face to Face I made an onsite inspection
05/24/2021	Contact - Document Received I received the Environmental Health Inspection Report from Ben Williams, Sanitarian with the Allegan Health Department
06/01/2021	Contact - Document Sent I sent Ms. Carver an email for education/experience clarification
06/01/2021	Contact - Document Received I received an email response to education/experience question from Ms. Carver
06/02/2021	Contact - Document Received I sent an email to Ms. Carver

06/02/2021	Contact - Document Received I received an email from Ms. Carver
06/04/2021	Contact - Document Sent I sent Ms. Carver an email seeking further clarification
06/04/2021	Contact - Document Received I received an email response to my inquiry from Ms. Carver
06/07/2021	Contact - Document Received I sent an email to Ms. Carver regarding kitchen
06/07/2021	Contact - Document Received I received an email from Ms. Carver regarding kitchen
06/08/2021	Contact – Face to face I made a final onsite inspection

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Caring Hearts Community is located at 1212 32nd Street, Allegan, (Allegan County), Michigan, 49010. The home is owned by Five Star Real Estate Lakeshore, LLC, and is being leased by Rebecca Carver, the applicant for this Adult Foster Care (AFC) home license. The lease agreement indicates that Ms. Carver will purchase this property as soon as she obtains an AFC license. There are two buildings on the property, one contains the bedrooms, a dining room, mechanical room, and storage room, and the other has a full kitchen, larger dining area, and storage room. The buildings and property were previously used as a small hotel.

The home has a main floor and a second level. There are eight bedrooms, each with its own full bathroom that utilizes a shower stall instead of a bathtub. Two of the bedrooms will be used as common areas, one room on each floor. These two rooms will have tables, chairs, and a television instead of bedroom furniture. The common area and dining areas comprise approximately 385 square feet, meeting the living space requirement. However, as there is only 155 square feet of living space on the second floor, there can be no more than four residents on the second floor so that the living space requirement can be met. The home is wheelchair accessible for the main floor only (i.e., there is no elevator or other means for wheelchair-bound residents to get to the second floor). There is a kitchen in the building that contains the resident bedrooms, which has a sink, full-sized refrigerator, microwave, convection oven, countertop burner, and a garbage can with a tight-fitting lid. There is another full kitchen and dining area in a separate building. The food preparation, meal transportation methods, and equipment for this detached kitchen were approved by Allegan County Health Department on

03/31/2021. The Sanitarian gave this facility an “A” rating on 03/31/2021. This home utilizes private water and sewage services. The home has a multivehicle parking lot, but no garage.

The furnace, hot water heater, washer and dryer are located in the mechanical room on the first floor. This room has a 1-3/4 inch solid core door, which is equipped with an automatic self-closing device and positive latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational, which was tested upon the final inspection on 03/23/2021 and worked properly. There is at least one operable A-B-C fire extinguisher attached to the wall on each level of the building and is easily accessible. Evacuation routes are placed on the walls in conspicuous places, and emergency telephone numbers are posted next to the home’s telephone, which residents will have reasonable access to.

Resident bedrooms were measured have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11’10” X 14’6”	171	2
2	11’11” X 14’6”	171	1
3	11’10” X 14’6”	171	1
4	11’10” X 14’6”	171	1
5	11’10” X 14’6”	171	1

Total Capacity: 6

The living (common room) and the two dining areas measure a total of 385 square feet of living space. This meets the minimum of 35 square feet per resident requirement. There is additional living space; however, it is in the detached kitchen/dining room building.

The kitchen has all the necessary cooking utensils, thermometers in the freezer and refrigerator, and a garbage can with a lid.

A telephone is available for residents to use. Telephone numbers for emergency services is posted near the telephone.

All of the furniture, appliances, equipment, etc. are clean and in good condition. The overall maintenance and cleanliness of the home is good. The landscaping, driveway, and walkway are all in good condition.

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** male and/or female adults aged 50 years and older, who may be diagnosed with a

physical handicap, Alzheimer's, and/or who is aged. An acceptable Alzheimer's Statement was submitted by the applicant. 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. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

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 members, and only with the prior approval of the resident, guardian, and the responsible agency.

Caring Hearts Community will not provide transportation to residents, and any charges for such will be stated in the Resident Care Agreement. Emergency transportation needs will be fulfilled through ambulance services; all other transportation will be arranged by family members, or other service providers who offer it to the resident who live there.

C. Applicant and Administrator Qualifications

Rebecca Carver is the Licensee Designee and Administrator of this AFC home. She has submitted Medical and Record Clearances and no restrictions were noted on either, and her TB test result was negative.

The applicant 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.

The applicant 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), Identogo, and the related documents required to be maintained in each employee's record to demonstrate compliance.

The applicant 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 Ms. Carver, can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked medication cart and that daily medication logs will be maintained on each resident receiving medication.

The applicant 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 themselves and direct care staff or volunteers and the retention schedule for all of the documents contained within their and each employee's file.

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

The applicant 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. The applicant 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.

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

The applicant 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, the applicant 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.

The applicant 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

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 adult foster care small group home (capacity 6).



June 9, 2021

Ian Tschirhart
Licensing Consultant

Date

Approved By:



June 9, 2021

Jerry Hendrick
Area Manager

Date