



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 15, 2021

Brett Wiley
8912 Otter Dr.
Farwell, MI 48622

RE: Application #: AS180407234
Gunden 1
16 N. Kapplinger Dr.
Farwell, MI 48622

Dear Mr. Wiley:

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 issued to include a special certification license.

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 "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 #:	AS180407234
Applicant Name:	Brett Wiley
Applicant Address:	8912 Otter Dr. Farwell, MI 48622
Applicant Telephone #:	(989) 588-6769
Administrator/Licensee Designee:	Brett Wiley
Name of Facility:	Gunden 1
Facility Address:	16 N. Kapplinger Dr. Farwell, MI 48622
Facility Telephone #:	(989) 588-6769 01/28/2021
Application Date:	
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED

II. METHODOLOGY

01/28/2021	Enrollment
02/09/2021	Application Incomplete Letter Sent 1326, afc100, Fps, Ri030, updated app
02/09/2021	Contact - Document Sent- forms sent via e-mail
03/01/2021	Contact - Document Received- AFC 100,updated app,RI030
03/05/2021	Contact - Document Received- 1326
04/24/2021	Inspection Completed-Env. Health: A
04/26/2021	Application Incomplete Letter Sent
04/26/2021	Inspection Report Requested - Health 2nd Request, CMDHD did not receive original request.
05/07/2021	SC-Application Received - Original
06/08/2021	Application Complete/On-site Needed
06/08/2021	Inspection Completed On-site Review of physical plan, files for staff, licensee, residents, medications, water temps, funds.
06/08/2021	Inspection Completed-BCAL Full Compliance
06/08/2021	SC-Inspection Completed On-Site
06/08/2021	SC-Inspection Full Compliance
06/10/2021	SC-ORR Response Requested
06/10/2021	SC-ORR Response Received-Approval Karen Bassett, CMMH currently contracts with Gunden 1 and will continue to contract with new licensee.
06/10/2021	SC-Recommend DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Gunden 1 is currently licensed and is changing ownership. The facility is a two-story farmhouse with vinyl and wood siding, has a steel roof that sits on approximately five acres in rural Farwell Michigan, Clare County. The front of the facility has a full covered porch, which includes stairs to enter the porch. The covered porch has furniture for residents to enjoy the outdoors. The facility has a three-car attached garage which houses a 12-passenger van for resident transportation. The facility is five miles from Clare, Michigan and 20 miles from Mt. Pleasant Michigan which both towns provide hospital care, museums, public libraires, shopping, restaurants, and community events for the residents to utilize. The living quarters of the residents includes both the main floor which has a kitchen, dining room, living room, full bathroom, and two private resident bedrooms. On the main floor, off the kitchen is a breezeway that has storage closets, laundry facility, and stairs to a Michigan basement (which does not provide any living space for residents) and egress to the outside and garage. There are also two additional exits to the outside on the main floor. These exits are located by the resident bedrooms and office space, which is behind the living room, down a hallway. The second story is divided into two sections, with separate staircases used to enter each section. The west end of the upstairs has a full bathroom and two private resident bedrooms. The east end of the upstairs has a half bathroom-with sink and toilet and four bedrooms, two of which are private bedrooms for residents and the other two are used for storage. This side has egress to outside with a set of stairs leading to the ground level. Gunden 1 AFC is **NOT** wheelchair accessible so residents who require the regular use of a wheelchair or other assistive device to assist with mobility cannot be admitted into the facility. Gunden 1 utilizes private water supply and sewage disposal system which was inspected and found to be in full compliance with applicable environmental health rules by Central Michigan District Health Department on April 24, 2021.

The facility uses a natural gas boiler system for heat, which was inspected and certified by the State of Michigan-Department of Licensing and Regulatory Affairs on August 15, 2019 and expires on August 15, 2022. The boiler and hot water heater are located in the basement which is equipped with a 1-3/4-inch solid core door with an automatic 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. This system was inspected by Summit Fire Protection on April 12, 2021 and found to be in compliance and full working condition.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
Bedroom #1 (downstairs off of living room)	9'2" X 12'5"	115 sq. ft.	1
Bedroom #2 (downstairs next to office)	8'10" X 20'5"	101.25 sq. ft.	1
Bedroom #3 (upstairs, east side, right of stairs)	15'9" X 11'9"	189.21 sq. ft.	1
Bedroom #4 (upstairs, east side, across from stair-by bathroom)	10'4" X 9'7"	100.88 sq. ft.	No residents-storage
Bedroom #5 (upstairs, east side, next to bathroom)	10'4" X 9'7"	100.88 sq. ft.	No residents-storage
Bedroom #6 (upstairs, east side, across from bedroom 3)	10'4" X 13'6"	141.44 sq. ft.	1
Bedroom #7 (upstairs, west side, left end of hallway)	16'9" X 15'2"	256.88 sq. ft.	1
Bedroom #8 (upstairs, east side, right end of hallway)	13'2" X 12'	158.4 sq. ft.	1
Living Room	26'10" X 16'6"	433.26 sq. ft.	
Dining Room	14'6" X 12'9"	188.34 sq. ft.	

The indoor living and dining areas measure a total of 621.6 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 6 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 six male residents who are developmentally disabled. The program will include social interaction by taking the residents on vacations, day trips, and attending festivals in the community to allow residents to interact with others. The facility will encourage their residents to continue developing their independent living skills through educational programs, day programs and employment. The facility will continue to encourage and assist residents to be independent with personal hygiene, personal adjustment, and public safety. The facility provides transportation. The applicant intends to accept referrals from community mental health (CMH).

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 community resources for recreational activities including attending local festivals, day trips around the state, going fishing, local library, local museums, shopping centers, and churches. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Administrator Qualifications

The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by income from current care for AFC residents and expenses. Mr. Brett Wiley, licensee has current credit score of 706 and is in good current credit standing.

Criminal history background checks of the applicant and administrator were completed and they were determined to be of good moral character to provide licensed adult foster care. The applicant and administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

The applicant and administrator have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mr. Brett Wiley is the applicant and administrator of Gunden 1 and has worked at the facility as a home manager since March of 2013 providing direct care to residents diagnosed with developmental disabilities, managing required paperwork, training new direct care staff, and has completing required trainings.

The staffing pattern for the original license of this six bed facility is adequate and includes a minimum of 1 staff for 6 residents per shift. The applicant acknowledged that the staff to resident ratio may need to be increased 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 acknowledged 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 the licensee 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 resident 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 has been determined and will be re-evaluated during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license and special certification be issued to this AFC adult small group home, capacity of six residents.



06/10/2021

Bridget Vermeesch
Licensing Consultant

Date

Approved By:



06/15/2021

Dawn N. Timm
Area Manager

Date