

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 25, 2021

Linda Kramer 707 Clinton Ave. Grand Haven, MI 49417

RE: Application #: AF700409421

Ivy Nest

707 Clinton Ave.

Grand Haven, MI 49417

Dear Ms. Kramer:

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 4 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) 356-0100.

Sincerely,

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 #:	AF700409421	
Applicant Name:	Linda Kramer	
Applicant Address:	707 Clinton Ave.	
	Grand Haven, MI 49417	
Applicant Telephone #:	(616) 218-0921	
Administrator/Licensee Designee:	N/A	
Name of Facility:	Ivy Nest	
Facility Address:	707 Clinton Ave.	
	Grand Haven, MI 49417	
Facility Telephone #:	(616) 218-0921	
A 11 41 B 4	00/04/0004	
Application Date:	06/21/2021	
Consoitu	4	
Capacity:	4	
Program Type:	PHYSICALLY HANDICAPPED	
Program Type.	DEVELOPMENTALLY DISABLED	
	MENTALLY ILL	
	AGED	
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II. METHODOLOGY

06/21/2021	Enrollment
07/08/2021	Application Incomplete Letter Sent Add'l \$20 fee and 1326/Fingerprint/RI 030 for Linda Kramer
07/21/2021	Contact - Document Received 1326 for Linda Kramer and AFC 100 for Sammy Kramer
07/22/2021	PSOR on Address Completed
07/26/2021	Contact - Document Received \$20 ck# 143
08/02/2021	Contact - Document Received RI 030/Fingerprints for Linda Kramer
08/05/2021	Lic. Unit file referred for background check review Linda Kramer prints
08/05/2021	Lic. Unit file referred for background check review Red Screen DF030253292
08/05/2021	File Transferred To Field Office GR via SharePoint
08/05/2021	Contact - Document Sent I sent an email to Linda Kramer with a letter attached requesting the necessary documents
08/16/2021	Contact - Document Received I received the necessary documents in an email from Linda Kramer
08/20/2021	Inspection Completed On-site
08/24/2021	Inspection Completed On-site Follow up inspection
08/25/2021	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Ivy Nest is located at 707 Clinton Avenue, Grand Haven, (Ottawa County), Michigan, 49417. The home is under a Land Contract agreement between Grand River Farms, Inc., the seller, and Linda Kramer, the buyer. It is a colonial-style home that has a hair salon attached and the whole 2nd floor is rented out as an apartment.

Not including the 2nd floor apartment, which has its own entrance and will not be part of the Adult Foster Care home, there are two bedrooms, one full and one half bathroom, a kitchen, dining room, living room, laundry room, and a small office. The living quarters of the licensee consists of a bedroom, large living area, bathroom, and kitchen. Access to the basement is through this area. The door to the licensee's living quarters is in a fully enclosed short corridor. The ceiling in the licensee's living quarters has ceiling tiles that are rated Class A materials. Documentation of this was submitted by the licensee. The home is not wheelchair accessible. There is an attached garage that was converted into storage space and the garage door was replaced with a wall with a standard exterior door in it. There is ample parking in the driveway and in the street. The home utilizes public water and sewer services.

The furnace and three water heaters are in two places the basement, each are enclosed from the rest of the house with 1-3/4 inch solid core door, which is equipped with an automatic self-closing device and positive latching hardware. One of the water heaters supplies the hair salon, one supplies the 2nd floor apartment, and one supplies lvy Nest. The owners, employees, and patrons of the hair salon and the renter of the 2nd floor apartment cannot access the basement, which is locked off from their access.

The home is equipped with several 10-year lithium battery-powered smoke detectors, that have a remote system, which enables them all to sound when any one of them sounds. This system was tested by the licensing consultant on 08/20/2021 and was fully operational. 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	11'6" X 12'	138	2
2	9'8" X 14'	135	2

Total Capacity: 4

The living and dining room areas measure a total of 468 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The kitchen has all the necessary cooking utensils, 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

The applicant has submitted all the required documents; and all of them were approved. The applicant intends to provide 24-hour supervision, protection and personal care to **four** male and/or female adults aged 40 years and older. The licensee will encourage the residents in practicing social interaction skills, personal hygiene, personal adjustment skills, and public safety skills, and other daily living tasks. An Assessment Plan will written and implemented that addresses 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.

Ivy Nest will not provide transportation to residents. If this changes, the applicant understands that any charges for transporting residents 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 residents who live there.

C. Applicant and Administrator Qualifications

Linda Kramer is the Licensee 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.

Ms. Kramer has submitted in writing that Sam Kramer will be the designated Responsible Person who will operate this home in her absence for up to 72-hours.

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 Linda Kramer 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

Area Manager

I recommend issuance of a temporary license to this adult foster care family home (capacity 4).

Man 2	August 25, 2021
Licensing Consultant	Date
Approved By:	August 25, 2021
Jerry Hendrick	 Date