

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

July 1, 2021

Pamela Johnsen Dearing Homes 9471 Ridge Rd Goodrich, MI 48438

> RE: Application #: AS250405117 Nathan's Place 2444 Oakridge Dr. Flint, MI 48507

Dear Ms. Johnsen:

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 (517) 284-9730.

Sincerely,

Barna

Christina Garza, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (810) 240-2478

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250405117	
Licensee Name:	Dearing Homes	
Licensee Address:	9471 Ridge Rd Goodrich, MI 48438	
Licensee Telephone #:	(810) 853-2995	
Administrator/Licensee Designee:	Pamela Johnsen	
Name of Facility:	Nathan's Place	
Facility Address:	2444 Oakridge Dr. Flint, MI 48507	
Facility Telephone #:	(810) 410-4012	
Application Date:	07/22/2020	
Capacity:	6	
Program Type:	AGED ALZHEIMERS	

II. METHODOLOGY

Inspection Completed-Env. Health : A	
On-Line Enrollment	
Contact - Document Sent forms sent	
File Transferred To Field Office Flint Contact - Telephone call made Spoke to Authorized Representative, Jody and advised all paperwork should reference Dearing Homes and not Nathans Place LLC	
Application Incomplete Letter Sent	
Contact - Document Received Received documents; financial statements, policies, floor plan	
Application Complete/On-site Needed	
Inspection Completed On-site	
Contact - Document Received Received furnace inspection, medical clearance/TB test for Administrator/LD	
Inspection Completed-BCAL Full Compliance	
Recommend License Issuance	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Nathans Place is a five bedroom home located at 2444 Oakridge Drive, Flint, MI 48507 in Genesee County. The home is located in a well-established neighborhood on a large maturely landscaped lot. The physical plant is a one-story ranch with a large unfinished basement. The main floor consists of a formal living room area, a sitting area, a dining room, kitchen, and five resident bedrooms. The home has two full bathrooms located in each bedroom area. Each bedroom has a closet or wardrobe. The facility has adequate storage areas. There is a driveway with adequate parking for staff and visitors. Johnsen Holdings, LLC owns the property and permission to inspect the facility was provided.

The home has a furnace, which is located in the attic. The hot water heater is located in the basement. Floor separation is achieved by a $1\frac{3}{4}$ inch solid core door equipped with an automatic self-closing device and positive latching hardware. The laundry facilities are located on the main floor. 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.

The facility has a private water and municipal sewer system. The facility was inspected by the Genesee County Health Department on June 25, 2020. A furnace inspection and approval was completed on June 16, 2021. The facility was determined to be in substantial compliance with all applicable rules.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1 Northeast	17' 6" x 11' 10"	207	2
2 Southeast	12' 8" x 10'	127	1
3 South	7' 10" x 11' 9"	92	1
Central			
4 Southwest	11' 7" x 11' 8"	135	1
5 Northwest	9' x 13' 2"	118	1

The maximum capacity of bedroom square footage for residents in the home is (6) six.

The dining area measures 11'5" x 15, which is 171 square feet. This area can comfortably seat six residents. The living room measures 402 square feet of living space. The sitting area measures 145 additional square feet of living space. The total living space is 547 square feet, which exceeds the minimum of 35 square feet per resident requirement.

Compliance with Rule 400.14410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were nicely furnished, clean, and met all applicable rules relating to environmental and fire safety requirements.

The home has two separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30 inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width. The facilities approved egresses terminate at ground level, making the facility wheelchair accessible.

The home has fire extinguishers, which meets the requirements of R 400.14506. The bedrooms have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R

400.1502, R 400.14503, and R 400.14504.

Based on the above information, it is concluded that this facility can accommodate **six** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The facility has the capacity to provide 24-hour supervision, protection and personal care for up to **six** female ambulatory or non-ambulatory adults who are ages 50 and over with a diagnosis of Aged and Alzheimer's in the least restrictive environment possible. Residents will receive social and emotional support, positive guidance, supervision, and protection, from dedicated, compassionate and honest staff. The facility will provide a clean and caring environment enabling the residents to live, learn, and grow as individuals. Facility staff will meet the basic needs of each individual, as well as those who require more individualized attention. Residents will be provided and encouraged to participate in social activities and events.

C. Applicant and Administrator Qualifications

Dearing Homes is the applicant and Pamela Johnsen has been assigned as the Licensee Designee and Administrator of the facility. A criminal history background check was completed for Ms. Johnsen and she has been determined to be of good moral character. Ms. Johnsen submitted statements from a physician documenting good health and current TB-tine negative results.

The applicant has sufficient resources to provide for the adequate care of the residents as evidenced by projected income for AFC residents along with other financial resources.

The supervision of residents in this small group home licensed for (6) residents will be the responsibility of the applicant 24 hours a day, 7 days a week. The applicant has indicated that for the original license of this 6-bed small group home, there is adequate supervision with 1 direct care staff on-site for six (6) residents. The applicant acknowledges that the number of direct care staff on-site to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents.

The applicant acknowledges an understanding of the training and qualification requirements for the responsible person or volunteers providing care to residents in the home.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, 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), 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 the licensee can 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 acknowledges their responsibility to establish good moral character and suitability, obtain and maintain documentation of good physical and mental health status, maintain documentation of all required trainings, and obtain all required documentation and signatures that are to be completed prior to direct care staff and volunteers working directly with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, or volunteer staff, and the retention schedule for all of the documents contained within each employee's file.

The applicant acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges their responsibility to obtain the required written assessment, 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 the required forms and signatures to be completed for each resident on an annual basis.

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 an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-day discharge written notice to a resident, as well as, when a resident can be discharged before the issuance of a 30-day discharge written notice.

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 an accident involving 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 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 6 service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and administrative rules related to the physical plant. 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 small group home (capacity 1-6).

7/1/2021

Christina Garza Licensing Consultant

Approved By:

7/1/2021

Mary E Holton Area Manager Date

Date