



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

November 16, 2021

Shella Minor  
RSR Creek LLC  
25591 Abbey Dr  
Novi, MI 48374

RE: Application #: AS740408376  
**Sandalwood Creek III**  
**5485 Smiths Creek**  
**Kimball Twp., MI 48074**

Dear Ms. Minor:

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place, Ste 9-100  
Detroit, MI 48202  
(586) 676-2877

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS740408376
<b>Licensee Name:</b>	RSR Creek LLC
<b>Licensee Address:</b>	5485 Smiths Creek Kimball TWP, MI 48074
<b>Licensee Telephone #:</b>	(734) 576-1365
<b>Administrator/Licensee Designee:</b>	Shella Minor/Shella Minor
<b>Name of Facility:</b>	Sandalwood Creek III
<b>Facility Address:</b>	5485 Smiths Creek Kimball TWP, MI 48074
<b>Facility Telephone #:</b>	(810) 367-4060
<b>Application Date:</b>	04/28/2021
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED ALZHEIMERS

## II. METHODOLOGY

04/28/2021	On-Line Enrollment
04/29/2021	Inspection Report Requested - Health Invoice No: 1031487
04/29/2021	Contact - Document Sent 1326, RI030, AFC100
04/29/2021	Contact - Document Received AFC100 for Shella Minor
05/27/2021	Application Incomplete Letter Sent
05/27/2021	Application Complete/On-site Needed
09/22/2021	Inspection Completed On-site
09/22/2021	Inspection Completed-BCAL Full Compliance

## II. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the licensure of adult foster care small group homes (0-6), licensed or proposed to be licensed after 05/24/1994.

### A. Physical Description of Facility

Sandalwood Creek III is currently operating as a licensed small adult foster under the license name Wadhams Creek III (license number AS740308018) which is, located in Kimball Township, MI in St. Clair County. The current licensee is D and J Home Care, Incorporated and was originally licensed on 08/20/2010. RSR Creek LLC has applied to become the licensee for Sandalwood Creek III. There is currently a management agreement in place between D and J Home Care, Incorporated and RSR Creek LLC. There are also additional two active licenses at the same location as Sandalwood Creek III/Wadhams Creek III which are, Sandalwood Creek 1/Wadham Creek and Sandalwood Creek II/Wadhams Creek II. There are also new licensing applications for Sandalwood Creek 1/Wadham Creek and Wadhams Creek II/Sandalwood Creek II.

Shella Minor is the current Licensee Designee and Administrator and will remain under the new licenses. Co-owner Monika Sarin provided a copy of the purchase agreement dated 09/27/2020. Owners Rahul Naphade, Sanjay Sarin and Raman Sawhray are purchasing the property from the current owner, David Lau. On 08/23/2021, I received a letter from Ms. Sarin giving permission for licensing to inspect the facility. The facility has private water and sewer. An environment inspection was completed on 06/22/2020 and was satisfactory.

Sandalwood Creek III has a great room, sitting room, kitchen, laundry room, furnace room and three bedrooms. There are two common bathrooms and one bathroom attached to bedroom number one. The great room has dining area seating to accommodate six residents. The great room and sitting room, area offers a total of 450.50 square feet of living space which meets the required square feet per person for six residents.

The three bedrooms in the facility measures as follows:

<b>Bedroom #</b>	<b>Room Dimensions</b>	<b>Total Square Footage</b>	<b>Total Resident Beds</b>
1	13'11" X 26'4"	366.47	2
2	11'9" X 17'9"	208.56	2
3	14'11" X 15'6"	231.21	2

**Total capacity: 6**

All bedrooms have adequate bedding, space, storage, and a window that opens. The bedroom and bathroom doors have non-locking against egress hardware. The water was measured with a digital thermometer and found to be between 105 to 120 degrees Fahrenheit. Medications will be kept in a locked medication cart. Thermometers were found in refrigerators and freezers.

## **B. Program Description**

Sandalwood Creek III will provide care for six residents. The facility will provide room, board and personal care for residents who are aged and/or have Alzheimer's, dementia, physically handicapped, aged or related conditions and people with intellectual disabilities. The facility is wheelchair accessible. There are two exits wheelchair ramps. The facility has handicapped accessible showers. The facility will assist residents with activities of daily living as needed in a safe environment. The program will oversee the administration of resident's comprehensive care plans, medications and diets as needed. The facility will also offer supervised activities in a stimulating environment to promote interaction among residents and guided outings in the community. In addition, the program will encourage family involvement and participation in resident focused programs.

A copy of the staffing pattern was provided for the facility. Sandalwood Creek III will have two staff on day, afternoon, and evening shift. Shella Minor will act as the licensee designee and administrator for the facility. Ms. Minor has been fingerprinted and previously approved as a licensee designee and administrator. She currently holds these positions for D and J Home Care Inc.'s. Ms. Minor provided a medical statement dated 05/03/2021 which indicates that she has no physical/mental or health conditions that would affect her ability to work around adults. She also provided a copy of negative TB test dated 02/03/2021.

Shella Minor has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Minor has been previously qualified as a licensee designee and administrator.

Ms. Minor 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.

Ms. Minor acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, or 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](http://www.miltcpartnership.org)) and the related documents required to be maintained in each employee's record to demonstrate compliance.

Ms. Minor acknowledged 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 designee can administer medication to residents. In addition, Ms. Minor acknowledged that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Ms. Minor acknowledged her responsibility to obtain all required 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, Ms. Minor acknowledged her responsibility to maintain all required documentation in each employee's record for each licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Ms. Minor acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Ms. Minor acknowledged her 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. Ms. Minor will update and complete those forms and obtain new signatures for each resident on an annual basis.

Ms. Minor acknowledged her 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.

Ms. Minor acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. 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 resident's personal money transactions that have been agreed to be managed by the licensee designee.

Ms. Minor acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights.

Ms. Minor acknowledged 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.

Ms. Minor acknowledged her responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Ms. Minor acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

Ms. Minor acknowledged she has a copy of the licensing rule book for AFC small group homes.

### C. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

### III. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).



11/08/2021

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LaShonda Reed  
Licensing Consultant

Date

Approved By:



11/16/2021

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Denise Y. Nunn  
Area Manager

Date