



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 24, 2021

Patrice Weber  
Brighter Horizons Assisted Living Center  
11920 W. Cutler Rd  
Eagle, MI 48822

RE: Application #: AS330405979  
**Brighter Horizons Assisted Living & Memory Ctr LLC**  
**5455 S. MLK Blvd**  
**Lansing, MI 48911**

Dear Ms. Weber:

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. If 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 "Derrick L. Britton".

Derrick Britton, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909

enclosure

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

**I. IDENTIFYING INFORMATION**

|                              |   |
|------------------------------|---|
| <b>License #:</b>            | AS330405979   |
| <b>Licensee Name:</b>        | Brighter Horizons Assisted Living Center              |
| <b>Licensee Address:</b>     | 5455 S. MLK<br>Lansing, MI 48875                      |
| <b>Licensee Telephone #:</b> | (517) 643-2073  |
| <b>Administrator:</b>        | Patrice Weber   |
| <b>Licensee Designee:</b>    | Patrice Weber   |
| <b>Name of Facility:</b>     | Brighter Horizons Assisted Living & Memory<br>Ctr LLC |
| <b>Facility Address:</b>     | 5455 S. MLK Blvd<br>Lansing, MI 48911                 |
| <b>Facility Telephone #:</b> | (517) 643-2073<br>09/29/2020                          |
| <b>Application Date:</b>     |   |
| <b>Capacity:</b>             | 6   |
| <b>Program Type:</b>         | AGED<br>ALZHEIMERS                                    |

## II. METHODOLOGY

|            |  |
|------------|--|
| 09/29/2020 | On-Line Enrollment   |
| 10/01/2020 | Contact - Document Received<br>App; IRS ltr; 1326 for Patrice (LD & Admin)                   |
| 10/01/2020 | Lic. Unit file referred for background check review<br>Patrice (LD & Admin)                  |
| 10/21/2020 | Application Incomplete Letter Sent   |
| 11/20/2020 | Contact - Document Received<br>Email from Patrice Weber re: application incomplete documents |
| 03/04/2021 | Contact - Document Received<br>Email from Patrice Weber re: documents for application        |
| 03/23/2021 | Contact - Document Received<br>Email from Patrice Weber re: documents for application        |
| 05/18/2021 | Application Complete/On-site Needed  |
| 05/21/2021 | Inspection Completed On-site   |
| 06/08/2021 | Contact - Document Received<br>LLC payment confirmation                                      |
| 06/12/2021 | Contact - Document Received<br>Email from Patrice Weber re: Furnace inspection documentation |
| 06/21/2021 | Contact - Telephone call made<br>To Patrice Weber re: LLC                                    |
| 06/21/2021 | Inspection Completed On-site<br>Follow up inspection   |
| 06/21/2021 | Inspection Completed-BCAL Full Compliance  |
| 09/24/2021 | Contact- Document Received- Updated fingerprint results for<br>licensee designee             |

### **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

#### **A. Physical Description of Facility**

Brighter Horizons Assisted Living Center is a single level, ranch style structure built on a concrete slab. The facility is located on a heavily traveled road in southern Lansing, Michigan. The facility has a small front yard, but a slightly larger back yard with a covered deck for residents to enjoy. The facility has a small driveway that can provide minimal parking for visitors and staff. The home is wheelchair accessible and has at least two approved means of egress that are equipped with a ramp. Wheelchair ramps located at both the main exit/entrance and the secondary exit/entrance which are both in compliance with the licensing rules. Bedroom doors, bathroom doors, and hallways are wide enough to accommodate wheelchair users.

The home utilizes a public water supply and sewage disposal system.

The facility consists of a living area, five resident bedrooms, two full bathrooms, laundry/pantry room, and a small kitchen with a dining area. The main entrance to the facility is located near the living area and the second exit is a sliding glass door located off the dining area. This exit onto the covered deck located in the backyard. The dining area is equipped with a table large enough with adequate seating to accommodate all residents during meals. Resident Bedroom #1 is equipped for one resident, Bedroom #2 is equipped for one resident, Bedroom #3 is equipped for one resident and has a full bathroom, Bedroom #4 is equipped for two residents, and Bedroom #5 is equipped for one resident. The second full bathroom is accessible to all residents.

A new furnace was installed and approved on 10/08/2019. The furnace was inspected on 06/09/2021 and determined to be in good conditions. The furnace is located on the same level as the resident bedrooms and living space and is enclosed in a room that is constructed of drywall that has a one-hour fire resistance rating. The furnace room has a door that is 1 ¾ inch solid wood that is equipped with an automatic self-closing device and positive-latching hardware. The water heater is in the laundry room with the washer and dryer and is equipped with a relief valve.

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. Smoke detectors are in each bedroom, the living area, near the laundry room, near the furnace room. Fire extinguishers are in the hallway near the kitchen and near Resident Room #1.

Resident bedrooms and living/dining areas were measured during the on-site inspection and have the following dimensions:

| Bedroom #   | Room Dimensions | Total Square Footage | Total Resident Beds |
|-------------|-----------------|----------------------|---------------------|
| Bedroom #1  | 9'5" x 11'6"    | 108.29 square feet   | 1 Resident          |
| Bedroom #2  | 12'7" x 11'7"   | 145.75 square feet   | 1 Resident          |
| Bedroom #3  | 11'7" x 9'9"    | 112.94 square feet   | 1 Residents         |
| Bedroom #4  | 11'5" x 22'     | 251.16 square feet   | 2 Resident          |
| Bedroom #5  | 11'9" x 13'8"   | 160.58 square feet   | 1 Resident          |
| Living Area | 11'8" x 15'6"   | 180.83 square feet   |                     |
| Dining Area | 17'5" x 11'6"   | 108.29 square feet   |                     |

The indoor living and dining areas measure a total of 289.12 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate six 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 and female residents who are aged, developmentally disabled, or who have Alzheimer's Disease or related conditions. The applicant has provided a detailed description of services for residents with Alzheimer's Disease, in accordance with Rule 400.726b from Public Act 218. The applicant intends to accept referrals from Tri-County Guardianship or residents with private sources for payment. The program will include impromptu social gatherings, board games, crafts, exercise opportunities, and movies/television. Outdoor activities such as gardening, planting flowers and enjoying nature will be offered during the warmer months. The applicant also plans to incorporate the residents' personal interests into the daily activities whenever possible and will encourage family members and friends to visit as often as possible. The facility will also utilize local community resources and supportive services, such as churches, the local library, shopping centers, public transportation services, and local outdoor recreational areas, to assist residents in becoming more independent, self-sufficient, and involved in the community.

A detailed program statement was provided and documented the following:

We offer the following care for our Residents:

- Assistance with activities of daily living, such as grooming, dressing, eating, and toileting as needed
- In-house physical, occupational and speech therapy services
- Assistance with medication management and administration if needed
- Daily activity programming
- Monthly Activities like bingo, bowling, crafts or going to the movies

- Assistance with showers
- Cable television, internet, and telephone service
- Assistance with personal funds
- Coordination of transportation and medical appointments
- In-house doctor visits
- On-site barber and beautician services
- Comfortable common areas for reading, watching television and visiting with others
- Pharmacy Services

#### HOSPICE/RESPITE CARE

Our facility will provide, when appropriate, hospice and respite care for the same resident population type that we currently serve. Contracts are in place with area agencies to coordinate this service.

#### SMOKING

Is not allowed in the center but is allowed outside on the covered back deck.

#### GETTING ALONG WITH OTHERS

For many, living with several other people is a new experience. Courtesy and respecting the privacy of others is key to forming new friends and having happy, meaningful relationships. If disagreements occur, our Director will help resolve the matter to the best of her ability.

#### YOUR HEALTH

The facility will assist in monitoring of each resident's health. Each new admission must have a health examination to identify health problems and to screen for communicable diseases. A registered nurse, doctor, physician assistant or nurse practitioner can conduct this examination. The examination must take place within 90 days before admission or within 7 days after admission. The screening for communicable diseases shall include a TB skin test and a visual screening for other clinically apparent communicable diseases. Each resident shall, at a minimum, have a follow-up health examination annually unless a physician is seeing the resident on a regular basis (every 6 months). The facility will monitor and arrange for any needed medical or mental health services on an ongoing basis.

#### TRANSPORTATION

If a resident requires transportation to their medical appointment, the resident's guardian or primary contact will be notified to arrange for this. We do offer in-home care by skilled nursing, visiting physicians and on-site care such as x-rays and screenings.

#### FAMILY VISITING

We encourage the families to remain involved in the care and lives of their loved ones. If family members are located out of town, we are able to provide monthly or bi-monthly updates via email that includes updates on all medical visits and activities the resident is involved with at the center.

## MEDICATIONS

We take care of all medication administering and management. We keep a medication log for each resident and work with a local pharmacy that delivers the medications the first of every month.

## FIRE/EMERGENCY/DRILLS

Our facility is equipped with a smoke detectors and fire detection system. From time to time the facility conducts emergency fire drills for your continued safety.

## LAUNDRY AND HOUSEKEEPING

Staff will maintain all housekeeping and laundry for the residents. We do encourage the residents to stay active and help with their own personal space to the best of their abilities.

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.

## **C. Applicant and Administrator Qualifications**

The applicant is Brighter Horizons Assisted Living & Memory Center L.L.C., a “Domestic Limited Liability Company”, established in Michigan on 06/18/2021. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of Brighter Horizons Assisted Living & Memory Center, L.L.C. have submitted documentation appointing Patrice Weber as licensee designee and administrator of the facility.

Criminal history background checks of Patrice Weber were completed on 10/01/2020, and she was determined to be of good moral character to provide licensed adult foster care. Patrice Weber submitted statements from a physician documenting her good health (03/23/2021) and current negative tuberculosis test results (03/12/2019).

The applicant/administrator has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Patrice Weber, previous licensee designee/administrator of the facility from May 2011 through October 2019, also owns a successful large twenty-bed AFC facility servicing age, Alzheimer’s, and developmentally disabled residents. Mrs. Weber is certified as a Dementia Practitioner and provided documentation of completion of other dementia care

workshops as well. She has also provided care to individuals with diabetes/brittle diabetes. Previously, Mrs. Weber worked in the medical field running a large internal medical facility.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of one staff for six residents per shift. The applicant acknowledged that the staff to resident ratio may need to be increased/decreased 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 acknowledges 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](http://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 designee 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 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 of the resident's 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.

#### **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 will be assessed during the temporary license period.

#### **IV. RECOMMENDATION:**

I recommend issuance of a temporary license to this AFC adult small group home with a capacity of six residents.



09/24/2021

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Derrick Britton  
Licensing Consultant

Date

Approved By:



09/24/2021

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Dawn N. Timm  
Area Manager

Date