



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 9, 2022

Priscilla Espinosa
Angels Retirement Home, Corp.
108 Spruce Ave
Holland, MI 49423

RE: Application #: AS230407136
Angels Retirement Home, Corp.
10216 Royston Rd.
Grand Ledge, MI 48837

Dear Ms. Espinosa:

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,

A handwritten signature in cursive script that reads "Rodney Gill".

Rodney Gill, 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

License #:	AS230407136
Licensee Name:	Angels Retirement Home, Corp.
Licensee Address:	108 Spruce Ave Holland, MI 49423
Licensee Telephone #:	(616) 546-5567
Licensee Designee:	Priscilla Espinosa
Administrator:	Jose J. Espinosa
Name of Facility:	Angels Retirement Home, Corp.
Facility Address:	10216 Royston Rd. Grand Ledge, MI 48837
Facility Telephone #:	(616) 546-5567 01/29/2021
Application Date:	
Capacity:	6
Program Type:	AGED

II. METHODOLOGY

01/29/2021	On-Line Enrollment
02/17/2021	Contact - Document Received App; IRS ltr: 1326 & RI-030 for Priscilla; AFC100 for Jose (Admin)
02/17/2021	Licensing Unit file referred for background check review
02/22/2021	File Transferred to Lansing Field Office
03/01/2021	Application Incomplete Letter Sent
06/18/2021	Inspection Report Requested - Health
06/18/2021	Consultation Requested/Provided
06/18/2021	Application Complete/On-site Needed
06/21/2021	Inspection Completed On-site Amended Application. Requested Environmental.
08/03/2021	Inspection Completed On-site
08/10/2021	Inspection Report Requested - Health 1031842
09/16/2021	Inspection Completed-Env. Health: A
01/11/2022	Contact - Telephone call made Spoke with Licensee about license status. She needs to install fire door and send title
02/08/2022	Inspection Completed On-site- Original
02/10/2022	Inspection Completed-BCAL Sub. Compliance
02/10/2022	Contact - Document Sent Confirming Letter emailed to Licensee
02/11/2022	Contact - Telephone call received Licensee Designee and Administrator called with questions regarding the Confirming Letter.
02/28/2022	Contact - Telephone call made Contacted Licensee via phone to gather additional information, request more documentation, and set up a date and time for a

final on-site inspection. Final on-site inspection scheduled for 03/01/2022.

03/01/2022 Inspection Completed On-site

03/01/2022 Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Angels Retirement Home, Corp. is a ranch style structure built on a concrete slab sitting on an acre of property. The facility sits far back from the road on a large lot in a rural neighborhood in Grand Ledge, Michigan, which is in Eaton County. The front of the facility and the main entrance face the street and can be accessed from the driveway. The front entrance to the facility has a large deck where residents can sit outside during clement weather. The front entrance also has a wheelchair accessible ramp available for residents and visitor to use as needed. The second exit is located at the end of the resident hallway and is at grade. The facility has a long driveway and an area to the left of the walkway that provides sufficient parking for visitors and staff members. The facility is wheelchair accessible and utilizes a private water supply and sewage disposal system.

The facility is on one level which consists of four resident bedrooms, living area, activity/dining room, kitchen, two full bathrooms, and laundry area. The facility had a garage that is in the process of being converted into living space. This living space is currently being utilized as the Licensee and Administrator's bedrooms and bathroom. The Licensee plans to renovate this area of the home eventually to better accommodate the residents by adding one additional resident bedroom. Residents will not utilize nor have access to this unfinished area of the home. The unfinished area is fully enclosed with windows installed in required rooms as an appropriate means of egress.

There is a furnace and water heater in the facility. The furnace is located off the dining room and is enclosed in a room that is constructed of material which has a one-hour fire resistance and a fire-rated door that is equipped with automatic, self-closing and positive latching hardware. The door is hung in a fully stopped wooden frame. The facility had the furnace inspected on February 11, 2022, and the unit was found to be operating within manufacture specifications.

The water heater is in the laundry room off the kitchen area in a room constructed of material which has a one-hour fire resistance and a fire-rated door that is equipped with automatic, self-closing device and positive latching hardware. The facility has interconnected smoke detectors located in all sleeping areas, dining room/kitchen, and living areas. The facility has heat detectors in the kitchen and laundry area. The facility

is equipped with fire extinguishers in the kitchen and hallway between the resident bedrooms.

The facility has a private well and septic system. The facility was inspected by the Barry-Eaton District Health Department on 09/16/2021 and found to be in full compliance with applicable environmental health rules.

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

Location	Dimensions	Square Footage	Capacity
Bedroom #1	9'9 x 13'5	133.65	1 Resident
Bedroom #2	11'6 x 11'6	134.56	1 Resident
Bedroom #3	13'5 x 13'5	182.25	2 Residents
Bedroom #4	11'6 x 11'6	134.56	2 Residents
Livingroom	13'2 x 22'3	294.36	

The living area measures a total of 294.36 square feet of living space. This exceeds the minimum of 35 square feet per resident requirements. Based on the above information, it is concluded that this facility can accommodate six (6) residents.

B. Program Description

The facility will provide 24-hour supervision, protection, and personal care for six (6) female and male residents over the age of fifty-five. The program will provide a home-like setting and a comfortable environment. The program will provide residents with opportunities to be actively involved in activities which include arts and crafts, social gatherings, and community activities. The applicant plans on incorporating the residents' interests into daily activities whenever possible and to encourage family and friends to visit and participate in social events.

The applicant plans to provide on-going training to direct care staff members to better help them understand the needs of elderly residents. The applicant purchased this facility from Royston Ridge, Inc. and has changed the name to Angels Retirement Home, Corp. The applicant submitted a monthly and annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Licensee Designee and Administrator completed criminal history clearances and no criminal convictions were found. A criminal history clearance was also completed for direct care staff members and no criminal convictions were found.

The Licensee Designee, Administrator, and direct care staff members submitted medical clearances documenting that no physical or mental health conditions exist that would limit their ability to work with or around dependent adults. The Licensee

Designee, Administrator, and direct care staff members also submitted negative TB test results.

I reviewed the personnel policies, job descriptions, admission/discharge policies, program statement, refund policy, financial projections, required employee documents, and required paperwork for resident files with the Licensee Designee. The Licensee Designee has worked with the elderly population most of her adult life. She worked with this population for many years as a certified nursing assistant. The Licensee Designee also has experience working as a dialysis technician and office assistant for a home health agency. She completed trainings sponsored by the Michigan Assisted Living Association pertaining to memory loss and dementia, behavioral health, the impact of COVID-19 on the aged, nutrition, using technology to solve training challenges, and training on how to be a good employer. The Licensee Designee completed CPR, AED, and First-Aid training through the National CPR Foundation. She plans on being at the facility daily to maintain a working knowledge of the needs of the residents and to assist with daily care of the residents as needed.

The applicant provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules.

The staffing pattern provided for the original license of this six (6) bed facility is adequate and includes a minimum of one (1) staff for six (6) residents per shift. The applicant said it is her intention to employ a second staff member to assist with activities and outings as needed. The applicant acknowledged that the staff to resident ratio may need to be increased 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 indicated that direct care staff will not be awake during sleeping hours initially, but that it is her intention to eventually have a direct care staff member awake, ready, and able to provide all care necessary to meet the needs of the Residents.

The applicant acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff members 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, resident information, or both utilizing the Michigan Workforce Background Check website (miltcpartnership.org) and 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 Med-Bin Medication Cart 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 member working directly with residents. In addition, the applicant acknowledged the responsibility to maintain all required documentation in each employee's record for the administrator and each direct care staff member 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 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 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 to residents, residents guardians, and/or placing agencies with a letter acknowledging there are cameras located in the common areas at Angels Retirement Home, Corp. The applicant will ensure that the letters are signed by a responsible person and placed in the Residents files.

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.

C. Rule/Statutory Violations

Compliance with the physical plant rules has been determined. All items cited for correction have been verified by visual inspection. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via on-site inspections.

IV. RECOMMENDATION

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

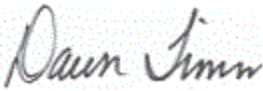


03/03/2022

Rodney Gill
Licensing Consultant

Date

Approved By:



03/09/2022

Dawn N. Timm
Area Manager

Date