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GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 9, 2022

Kathleen Swantek
Blue Water Developmental Housing, Inc.
Ste 1
1600 Gratiot
Marysville, MI 48040

RE: Application #: AS500409309

County Manor

53880 County Line Rd. New Baltimore, MI 48047

Dear Mrs. Swantek:

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,

Stephanie Gonzalez, LCSW

Stephanie Lonzalez

Adult Foster Care Licensing Consultant Bureau of Community and Health Systems Department of Licensing and Regulatory Affairs

Cadillac Place, Ste 9-100

Detroit, MI 48202 Cell: 248-514-9391 Fax: 517-763-0204

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500409309	
Licensee Name:	Blue Water Developmental Housing, Inc.	
Licensee Address:	Ste 1	
	1600 Gratiot	
	Marysville, MI 48040	
	(2.12) 222 1222	
Licensee Telephone #:	(810) 388-1200	
Adadada		
Administrator:	Kathleen Swantek	
Licences Decigned	Kathleen Swantek	
Licensee Designee:	Katilleen Swantek	
Name of Facility:	County Manor	
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Facility Address:	53880 County Line Rd.	
,	New Baltimore, MI 48047	
Facility Telephone #:	(586) 725-0829	
Application Date:	06/30/2021	
Capacity:	6	
	DEVELOPMENTALLY BLOADLER	
Program Type:	DEVELOPMENTALLY DISABLED	

II. METHODOLOGY

06/30/2021	On-Line Application Incomplete Letter Sent 1326 for Kathleen, AFC100 for Admin
06/30/2021	On-Line Enrollment
07/01/2021	Contact - Document Sent 1326 & AFC100
07/28/2021	Contact - Document Received 1326 & AFC100 for Kathleen
08/11/2021	Application Incomplete Letter Sent
10/01/2021	Contact - Document Received Application documents received
10/09/2021	Contact - Document Received Application documents received.
01/03/2022	Application Complete/On-site Needed
01/21/2022	Inspection Completed On-site
01/21/2022	Inspection Completed-BCAL Full Compliance

II. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a ranch-style home located in the city of New Baltimore, Michigan. The main floor of the home has four resident bedrooms, two full-size resident bathrooms, a living room, activity room, dining room, kitchen and laundry room. Upon entering the home, there is an entry way that leads to the dining room and kitchen area. To the right of the kitchen is the living room area and an exit door leading to the backyard. To the right of the dining room is a hallway that leads to two resident bedrooms and one full-size bathroom. To the left of the kitchen area is a hallway that leads to the laundry room, activity room and a door that leads to the basement area. The home is wheelchair accessible and has two approved means of egress that are equipped with ramps from the first floor. The home utilizes a public water supply and sewage disposal system.

The home utilizes a gas furnace and gas water heater system, which are both located in the basement of the home. The furnace and hot water heater are equipped with a 13/4

inch solid core door with an automatic self-closing device and positive latching hardware.

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 and have been installed near sleeping areas, on each occupied floor of the home, in the basement and near all flame or heat-producing equipment.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12' 2" x 11' 6"	139	2
2	12' 2" x 11' 6"	139	1
3	14' 10" x 8' 6"	126	1
4	11' 11" x 11' 8"	139	2

Total capacity: 6

The indoor living and dining areas measure a total of 818 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/or female residents who are developmentally disabled. The program will include social interaction, training to develop personal hygiene, personal adjustment, public safety and independent living skills, opportunity for involvement in educational or day programs or employment, and transportation. The applicant intends to accept referrals from Macomb County DHS, Macomb CMH, Veterans Administration, or residents with private sources for payment.

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.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including the public schools and library, local museums, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life and increase the independence, if applicable, of residents.

C. Applicant and Administrator Qualifications

The applicant is Blue Water Developmental Housing, L.L.C., a "Domestic Limited Liability Company", established in Michigan on 6/25/1976. 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 Blue Water Developmental Housing, L.L.C. have submitted documentation appointing Kathleen Swantek as licensee designee and administrator of the facility.

A criminal history background check of Ms. Swantek was completed, and she was determined to be of good moral character to provide licensed adult foster care. Ms. Swantek submitted a statement from a physician documenting her good health and current negative tuberculosis test results.

Ms. Swantek provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Swantek has a bachelor's degree in Psychology and a master's degree in Management. Ms. Swantek has been working within the field of adult foster care for 41 years. Ms. Swantek's experience includes providing direct care to residents as well as management positions. Ms. Swantek is currently the executive director and licensee designee for multiple licensed adult foster care facilities within the State of Michigan. Ms. Swantek provided documentation to confirm she is knowledgeable in adult foster care licensing rules, nutrition, recipient rights, CPR/First Aid, communicable disease, and fire safety.

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. Ms. Swantek acknowledged that the staff to resident ratio may need to be 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. Ms. Swantek has indicated that direct care staff will be awake during sleeping hours.

Ms. Swantek 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. Swantek acknowledged an understanding of the responsibility to assess the good moral character of employees. Ms. Swantek acknowledged the requirement for obtaining criminal record checks of employees and contractors who have <u>regular</u>, <u>ongoing</u> "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (<u>www.miltcpartnership.org</u>) and the related documents required to demonstrate compliance.

Ms. Swantek 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 Ms. Swantek 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.

Ms. Swantek 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, Ms. Swantek 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.

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

Ms. Swantek 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.

Ms. Swantek acknowledged the 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. Swantek acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Swantek 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.

Ms. Swantek 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. Ms. Swantek indicated the intent to respect and safeguard these resident rights.

Ms. Swantek 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.

Ms. Swantek 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.

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

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.

III. RECOMMENDATION

Stephanie Dongaloge

Area Manager

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

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Stephanie Gonzalez Licensing Consultant	Date
Approved By:	
Denice G. Hum	03/09/2022
Denise Y. Nunn	Date