



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 30, 2022

Mitchell Naegele  
Frances Specialized Residential, LLC  
2304 W. Frances Rd.  
Mt. Morris, MI 48458

RE: Application #: AM250411036  
Frances Specialized Residential  
2304 W. Frances Rd.  
Mt. Morris, MI 48458

Dear Mr. Naegele:

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 12 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 blue ink that reads "Kent W. Gieselman".

Kent W Gieselman, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 931-1092

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM250411036
<b>Licensee Name:</b>	Frances Specialized Residential, LLC
<b>Licensee Address:</b>	2304 W. Frances Rd. Mt. Morris, MI 48458
<b>Licensee Telephone #:</b>	(810) 288-2226
<b>Licensee Designee:</b>	Mitchell Naegele
<b>Administrator:</b>	Katrina Bailey
<b>Name of Facility:</b>	Frances Specialized Residential
<b>Facility Address:</b>	2304 W. Frances Rd. Mt. Morris, MI 48458
<b>Facility Telephone #:</b>	(810) 288-2226
<b>Application Date:</b>	12/02/2021
<b>Capacity:</b>	12
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODOLOGY

06/08/2021	Inspection Completed-Fire Safety : A
12/02/2021	On-Line Enrollment
12/20/2021	Inspection Report Requested - Fire
12/20/2021	Contact - Document Sent Fire Safety String
12/21/2021	File Transferred To Field Office Flint via SharePoint
01/03/2022	Application Incomplete Letter Sent
03/01/2022	Application Complete/On-site Needed
03/22/2022	Inspection Completed Env. Health- A
03/23/2022	Inspection Completed On-site
03/23/2022	SC-Application Received - Original
03/23/2022	SC-ORR Response Requested
03/23/2022	SC-ORR Response Received-Approval
03/23/2022	SC-Inspection Completed On-Site
03/23/2022	SC-Inspection Full Compliance
03/23/2022	SC-Recommend MI and DD
03/23/2022	Inspection Completed-BCAL Full Compliance
03/23/2022	Exit Conference

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

## A. Physical Description of Facility

This facility is a single level building, located in a residential area in the City of Mt. Morris, MI. This facility is located in close proximity to numerous community businesses and resources. This facility is owned by Frances Specialized Residential LLC, the applicant. This facility is currently licensed under AM250086017 and has been continuously licensed since 9/18/99. A new license is being issued due to a change in ownership of this facility.

There are two (2) furnaces and two (2) hot water heaters located in the basement with a 1<sup>3</sup>/<sub>4</sub> inch solid core door equipped with an automatic self-closing device and positive latching hardware creating floor separation. The basement is constructed of material that has a 1-hour-fire-resistance rating. The furnaces and hot water heaters were inspected and approved on 3/24/22. A fire safety inspection was conducted on 6/8/21 by the Bureau of Fire Services and an A approval rating was issued. 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 laundry room is located on the main floor of the home. This facility is wheelchair accessible.

The facility utilizes a private well and public sewer services. The facility was determined to be in substantial compliance with all applicable licensing rules pertaining to environmental health effective 03/01/22. There are two full bathrooms and one half bathroom located on the ground level for resident use. All of the resident bedrooms are located on the ground level of this facility. The bedrooms are as follows:

<b>Bedroom #</b>	<b>Total Sq. Ft.</b>	<b>Resident Beds</b>
1	105 sq. ft.	1
2	96 sq. ft.	1
3	84 sq. ft.	1
4	100 sq. ft.	1
5	120 sq. ft.	1
6	110 sq. ft.	1
7	132 sq. ft.	2
8	132 sq. ft.	2
9	99 sq. ft.	1
10	99 sq. ft.	1

The main living area of this facility measures 250 sq. ft. with an additional sitting area measuring 252 sq. ft. This facility also contains a medication room, staff office, full kitchen with dining area large enough for all 12 residents. This facility contains a laundry room adequate to meet the needs of 12 residents.

Compliance with Rule 400.15410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were clean, neat, and met all applicable rules relating to environmental and fire safety requirements.

The facility has four 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. 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 bedrooms have the proper means of egress as required by R 400.15408. The interior of the facility 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 400.15401, R 400.15402, R 400.15403, R 400.15405, R 400.15406, and R 400.15407.

Based on the above information, it is concluded that this facility can accommodate 12 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

The applicant, Frances Specialized Services LLC., submitted a copy of the required documentation. This is a Michigan Limited Liability Corporation in good standing founded on 11/29/21. Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection, and personal care to 12 male or female ambulatory adults, age 18 or older, whose diagnosis is physically handicapped, mentally ill, or developmentally disabled in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The applicant will ensure that the resident's transportation for program and medical needs are met. The applicant will also provide transportation to transport residents to access community-based resources and services.

In addition to the above program elements, the facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

## **A. Applicant and Administrator Qualifications**

The applicant is Frances Specialized Services LLC, which is a “Domestic Limited Liability Company”, was established in Michigan on 11/29/21. 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 Board of Directors of Frances Specialized Services LLC has submitted documentation appointing Mitchell Naegele as Licensee Designee and Katrina Bailey Administrator of the facility.

A licensing record clearance request was completed and approved for the licensee designee/administrator. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting her good health and current TB-test negative results.

The licensee designee/ administrator has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 1 staff-to-15 residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification 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 and contractors who have regular, ongoing, “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)), L-1 Identity Solutions™ (formerly Identix®), 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 obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to

maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer 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 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 and accident involving a 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 their responsibility to obtain all of the required 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. In addition, 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 their 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 and Statutory Violations**

The applicant was in compliance with the licensing act and applicable administrative rules related to the physical plant at the time of licensure. 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 and special certification to this AFC adult medium group home (capacity 7-12).



03/30/2022

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Kent W Gieselman  
Licensing Consultant

Date

Approved By:



03/30/2022

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Mary E Holton  
Area Manager

Date