



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 13, 2022

Rachel Fauth
4735 W Ludington Dr.
Farwell, MI 48622

RE: Application #: AF180411913
Country Care Assisted Living
4735 W Ludington Dr.
Farwell, MI 48622

Dear Mrs. Fauth:

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,

Bridget Vermeesch

Bridget Vermeesch, Licensing Consultant
Bureau of Community and Health Systems
1919 Parkland Drive
Mt. Pleasant, MI 48858-8010
(989) 948-0561

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF180411913
Applicant Name:	Rachel Fauth
Applicant Address:	4735 W Ludington Dr. Farwell, MI 48622
Applicant Telephone #:	(989) 588-2052
Name of Facility:	Country Care Assisted Living
Licensee:	Rachel Fauth
Facility Address:	4735 W Ludington Dr. Farwell, MI 48622
Facility Telephone #:	(989) 588-2052
Application Date:	02/28/2022
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED

II. METHODOLOGY

02/28/2022	Enrollment
03/03/2022	Inspection Report Requested - Health 1032472
03/04/2022	Application Incomplete Letter Sent 1326/Fingerprint/RI 030 for Rachel Fauth & AFC 100 for Zachary Fauth
03/15/2022	Inspection Completed-Env. Health : A
03/24/2022	PSOR on Address Completed
03/24/2022	Contact - Document Received 1326/RI 030 for Rachel Fauth & AFC 100 for Zachary Fauth
03/24/2022	Application Incomplete Letter Sent SOS address discrepancy for Rachel
04/04/2022	Contact - Document Received SOS address change for applicant
04/04/2022	File Transferred To Field Office- Lansing via SharePoint
04/20/2022	Application Incomplete Letter Sent
05/31/2022	Application Complete/On-site Needed
05/31/2022	Inspection Completed On-site Review of physical plant, resident files, water temps, medications.
05/31/2022	Inspection Completed-BCAL Full Compliance
05/31/2022	Inspection Completed On-site- Physical Plant inspection, medications, resident files, and water temperatures.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Country Care Assisted Living is a split-level family home located in rural Clare County, on Hwy 10 west of Farwell, Michigan. The upper level of the home is the private living area of the licensee and includes a large living room, master bedroom and full

bathroom. The main level of the home has a large dining area, sitting area, kitchen, and full bathroom for resident use. A single-occupancy resident bedroom is located near a full bathroom. Then around the corner on the main level are two additional single-occupancy bedrooms with a full bathroom across the hall that includes a walk-in shower. The main level of the home has three egresses out, one egress has a wheelchair ramp while the other two exits. The lower level of the home has two bedrooms with egress windows, one private bedroom and one semi-private bedroom for residents, a full bath, and small living area. The lower level has an egress out, with stairs up to the ground level. The stairs to get to the lower level has an electric chair on the staircase. The licensee is aware that physically handicapped residents using any form of assistive device cannot be placed in the lower-level bedrooms. The main level of the home is wheelchair accessible with a wheelchair ramp egress in and out of the home.

The home is heated with propane, forced air, has air conditioning and a generator. The home has two furnaces, and a hot water heater which are located in the crawlspace with a 1-3/4-inch solid core door equipped with an automatic self-closing device and positive latching hardware. The home is also equipped with electric heat as backup.

The facility is equipped with an interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. All were inspected on 04/11/22 and found in safe and good working condition. The home has smoke detectors installed near sleeping areas, on each occupied floor of the home, in the basement, near all flame- or heat-producing equipment and has fire extinguishers on each level. This consultant determined the home to be in compliance with applicable fire safety rules. The home passed inspection by Environmental Health on 03/15/22 and was determined to be in full compliance with all applicable environmental health rules.

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

Bedroom	Measurements	Square Footage	# of Beds
#1 Main Level	11'10" X 10'	111 Sq. Ft	1
#2 Main Level	13'4" X 8'5"	113.9 Sq. Ft	1
#3 Main Level	9'2" X 10'	92 Sq. Ft	1
#4 Lower Level	10'9" X 14'3"	155.87 Sq. Ft	2
#5 Lower Level	10'9" X 14'3"	155.87 Sq. Ft.	1
Main Level Dining/Living Room	20'3" X 25'	507.5 Sq. Ft.	
Main Level Sitting Area	13'3" X 9'8"	130.3 Sq. Ft	
Lower-Level Living Room	16'3" X 14'	228.2 Sq. Ft	

The living, dining, and sitting room areas measure a total of 866 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, it is concluded that this facility can accommodate six (6) 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 aged-55 years old and above plus physically handicapped. The licensee is aware that physically handicapped residents can only reside on the main living level due to this area having the only ramped means of egress and walk-in shower. The program will include social interaction, personal hygiene, personal adjustment, public safety and independent living skills and public transportation. The applicant intends to accept referrals from DHHS, Medicaid Waiver, Veterans Administration, or residents with private sources for payment.

If required, behavioral management programs will be identified in the assessment plans. These programs shall be implemented only by trained staff and only with the prior approval of the resident, guardian, designated representative, or the responsible agency.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including local movie theaters, churches, and shopping centers in Clare and Mt. Pleasant. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Responsible Person Qualifications

Criminal history background checks of the applicant Rachel Fauth and responsible person Zachary Fauth were completed and they were determined to be of good moral character to provide licensed adult foster care. The applicant, Ms. Fauth, and responsible person, Mr. Fauth, submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Rachel Fauth has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents along with outside employment.

Rachel Fauth acknowledged the requirement that the licensee of an adult foster care family home must reside in the home in order to maintain this category of adult foster care licensure.

The supervision of residents in this family home licensed for six residents will be the responsibility of the family home applicant, 24 hours a day, seven days a week. A responsible person will be on call in an emergency situation for up to 72 hours.

Rachel Fauth acknowledged that the number of responsible persons on duty in the home may need to increase in order to provide level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. Rachel Fauth acknowledged an understanding of the qualification and suitability requirements for the responsible person providing care to residents in the home.

Rachel Fauth acknowledged an understanding of the responsibility to assess the good moral character of employees. Rachel Fauth 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) and the related documents required to demonstrate compliance.

Rachel Fauth acknowledged an understanding of the administrative rules regarding medication procedures. In addition, Rachel Fauth indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Rachel Fauth acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Rachel Fauth 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.

Rachel Fauth acknowledged the responsibility to maintain a current resident record on file in the home for each resident and retain all of the documents required to be maintained within each resident’s file. Rachel Fauth acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

Rachel Fauth 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.

Rachel Fauth acknowledged an understanding of the administrative rules regarding informing residents of their resident rights and providing them with a copy of those rights. The applicant indicated intent to respect and safeguard these resident rights.

Rachel Fauth acknowledged an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-day discharge written

notice to a resident as well as issuing a discharge before a 30-day written discharge notice.

Rachel Fauth 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.

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care family home with capacity of six residents.

Bridget Vermeesch

06/08/2022

Bridget Vermeesch
Licensing Consultant

Date

Approved By:

Dawn Timm

06/13/2022

Dawn N. Timm
Area Manager

Date