



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 10, 2022

Jennifer Burgess
3329 Westwood Ave
Lansing, MI 48906

RE: Application #: AF330411512
Golden Hearts
3329 Westwood Ave
Lansing, MI 48906

Dear Ms. Burgess:

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 and special certification with a maximum capacity of 3 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 #:	AF330411512
Licensee Name:	Jennifer Burgess
Licensee Address:	3329 Westwood Ave LANSING, MI 48906
Licensee Telephone #:	(517) 574-3749
Licensee:	Jennifer Burgess
Administrator:	N/A
Name of Facility:	Golden Hearts
Facility Address:	3329 Westwood Ave Lansing, MI 48906
Facility Telephone #:	(517) 574-3749 01/24/2022
Application Date:	
Capacity:	3
Program Type:	AGED MENTALLY ILL DEVELOPMENTALLY DISABLED

II. METHODOLOGY

01/24/2022	On-Line Application Incomplete Letter Sent 1326/Fingerprint/RI 030 for Licensee and AFC 100 for Responsible Person
01/24/2022	On-Line Enrollment
02/08/2022	Contact - Document Received 1326/RI 030 for Jessica Burgess and AFC 100 for Responsible person
02/09/2022	Lic. Unit received background check file from review BITS ISSUE, J. Burgess NO HIT on FP results, continue to process
02/09/2022	PSOR on Address Completed
02/09/2022	File Transferred To Field Office- Lansing via SharePoint
03/09/2022	Contact - Telephone call made- The applicant was contacted via phone to discuss her recent request to open an AFC Family Home.
03/11/2022	Application Incomplete Letter Sent
05/09/2022	Contact - Document Received- Licensee Jennifer Burgess emailed and requested an update on documentation she still needs to provide and to schedule the onsite inspection.
05/12/2022	Contact - Document Received- Licensee Jennifer Burgess emailed and requested an update on documentation she still needs to provide and to schedule the onsite inspection.
05/12/2022	Contact - Telephone call made to licensee Jennifer Burgess and provided an update regarding documentation still needed. An original onsite inspection was scheduled for 05-19-2022.
05/12/2022	Application Complete/On-site Needed
05/19/2022	Inspection Completed On-site
05/19/2022	Inspection Completed-BCAL Sub. Compliance
05/24/2022	Application Incomplete Letter Sent
06/03/2022	Contact - Document Received- Received an email from licensee Jennifer Burgess updating me on the progress made toward bringing her AFC family home into full compliance.

06/16/2022	Inspection Completed On-site
06/21/2022	Contact - Document Sent- emailed licensee Jennifer Burgess a link to the ongoing trainings for licensees and an example of a Special Certification Application.
06/30/2022	Contact - Document Received- Licensee Jennifer Burgess emailed a completed Health Care Appraisal form for one of her Residents.
08/02/2022	Contact - Telephone call made to licensee Jennifer Burgess to discuss her pending license.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Golden Hearts is a well-maintained ranch style home built in 2008 with five bedrooms and two bathrooms in the Horsebrook subdivision located on the northwest side of the city of Lansing, MI. The house sits on a quarter acre lot with mature trees lining the north and west side, and is the last home situated on the westside of Westwood Avenue giving it a peaceful, safe, and country feel. The home is conveniently located in walking distance of several restaurants, convenience stores, and gas stations.

The AFC family home physical plant layout is a ranch style and features an open floor plan with 10-foot ceilings and a finished basement. There are three bedrooms located on the main level of the home, two of which will be utilized for residents, and a master bedroom and bathroom which will be occupied by the licensee. There is also a full resident bathroom situated directly across from the resident bedrooms. The main level of the home also has a kitchen, living area and dining space for residents to enjoy. The kitchen/dining and living area are adjacent to one another and provide ample space for daily living.

The basement has been finished and consists of a large open living space, two resident bedrooms, and an unfinished utility room where the gas furnace and water heater are located behind a fire door, equipped with a 1-3/4-inch solid core door with an automatic self-closing device and positive latching hardware. The basement has two egress windows installed adjacent to each of the bedrooms allowing three ways to exit in case of fire.

The five-bedroom home has four bedrooms that are designated for resident's private space. Each resident will have their own room. Each room will have a full-size bed, dresser, chair, mirror, television, any other necessities needed.

The home is not wheelchair accessible and none of the residents will be physically handicapped nor require any special physical accommodations.

The home utilizes public water and sewer disposal system. There is an electric water heater and natural gas furnace located in the basement of the home. The furnace was last inspected on 06/14/2022 and was found to be in good working condition.

The home is equipped with battery-powered, single-station smoke detectors which have been installed near sleeping areas, on each occupied floors 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	13.11 x 11.40	149.45	1
2	14.4 x 10.11	145.58	1
3	19.4 x 14.11	273.73	0
4	15.10 x 10.10	151.50	1
5	15.10 x 15.50	234.05	1

The indoor living and dining areas measure a total of 205.92 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 three (3) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Licensee Jennifer Burgess intends to provide 24-hour supervision, protection, and personal care to three male residents who are aged, mentally ill, and/or developmentally disabled.

Golden Hearts focus is to provide a setting that is as close to home as possible for each resident. No common areas are restricted, and residents will have as much freedom to do things outside of the home if it is deemed safe. Residents will be allowed to have visitors, choose the food they eat, and activities they want to do. Golden Hearts will provide three outings per week per resident and all outings will be documented. The objective goal is to allow each resident the opportunity to make decisions regarding their overall care and to be a part of the community. Each resident will be encouraged and supported as they meet new people in the community as well as keeping connections with family and friends.

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. Ms. Burgess intends to accept referrals from Community Mental Health Authority of Clinton, Eaton, Ingham Counties, 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 Ms. Burgess to utilize local community resources for recreational activities. Ms. Burgess plans on using resources and activities such as the senior center, library, schools, museums, zoo, shopping centers, churches, etc. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Responsible Person Qualifications

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

Ms. Burgess 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.

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

The supervision of residents in this family home licensed for three 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.

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

Ms. Burgess stated she is the only care provider currently working at the home. She acknowledged an understanding of the responsibility to assess the good moral character of employees. Ms. Burgess 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.

Ms. Burgess acknowledged an understanding of the administrative rules regarding medication procedures and assured only those responsible people who have received medication training and have been determined competent by licensee Ms. Burgess will administer medication to residents, when necessary, in the future. In addition, Ms. Burgess indicates that resident medication will be stored in a locked cabinet and daily medication logs will be maintained on each resident receiving medication.

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

Ms. Burgess acknowledged the responsibility to obtain the required written assessment, 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. Burgess acknowledged the responsibility to maintain a current resident record on file in the home for each resident and retain all the documents required to be maintained within each resident's file. Ms. Burgess acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

Ms. Burgess 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 the residents' personal money transactions that have been agreed to be managed by the applicant.

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

Ms. Burgess 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.

Ms. Burgess acknowledged the home is not wheelchair accessible nor constructed in a manner conducive to meeting the needs of physically handicapped residents. Ms. Burgess agreed to only allow residents without mobility issues to reside at the home.

D. Rules or 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 and special certification to this adult foster care family home with a capacity of three residents.



08/02/2022

Rodney Gill
Licensing Consultant

Date

Approved By:



08/10/2022

Dawn N. Timm
Area Manager

Date