



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 23, 2022

Daniela Marit
Selah Senior Living LLC
1825 Hiller Rd
West Bloomfield, MI 48324

RE: Application #: AS630410571
Selah Senior Living LLC
760 Robar Circle
White Lake, MI 48324

Dear Mrs. Marit:

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,

A handwritten signature in cursive script that reads "Stephanie Gonzalez".

Stephanie Gonzalez, LCSW
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 #:	AS630410571
Applicant Name:	Selah Senior Living LLC
Applicant Address:	1825 Hiller Rd West Bloomfield, MI 48324
Applicant Telephone #:	(248) 860-3101
Administrator	Daniela Marit
Licensee Designee:	Daniela Marit
Name of Facility:	Selah Senior Living LLC
Facility Address:	760 Robar Circle White Lake, MI 48324
Facility Telephone #:	(248) 860-3101
Application Date:	10/04/2021
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODOLOGY

10/04/2021	Enrollment
10/13/2021	Application Incomplete Letter Sent Tax ID Letter, 1326 for Daniela, AFC100 for admin
10/13/2021	Contact - Document Sent 1326 & AFC100
10/13/2021	Contact - Document Received 1326 for Daniela, AFC100 for Raluca, Tax ID Letter
10/19/2021	Application Incomplete Letter Sent
01/12/2022	Contact - Document Received Application documents received
01/25/2022	Contact - Document Received Application documents received
03/02/2022	Contact - Document Received Application documents received
03/21/2022	Contact - Telephone call made I spoke to Mrs. Marit; We discussed the remaining documents still needed
04/11/2022	Contact - Document Received Application documents received
05/03/2022	Contact - Telephone call made I spoke to Mrs. Marit regarding application documents still needed.
05/11/2022	Contact - Document Received Received additional application documents via email from Mrs. Marit.
05/23/2022	Contact - Document Sent I emailed Mrs. Marit to request scheduling of the onsite inspection
05/24/2022	Application Complete/On-site Needed
05/26/2022	Inspection Completed On-site

06/17/2022	Contact - Telephone call made I spoke to Mrs. Marit regarding her relationship with her spouse, specific to the disciplinary action of spouse.
06/17/2022	Contact - Document Received Mrs. Marit emailed me a copy of the property tax statement
06/21/2022	Contact - Document Received I received an email from Mrs. Marit, including a letter stating Mr. Marit will have not involvement in the business
06/22/2022	Contact - Document Sent I sent an email to Mrs. Marit, requesting additional information and documentation to determine Mr. Marit's ownership interest and involvement in the proposed business.
07/11/2022	Contact - Document Received I received a letter via email in response to my 6/22/22 request, from Mrs. Marit's lawyer, David Shea
09/12/2022	Contact – Document Received I received an email from Mrs. Marit's attorney, David Shea

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a ranch-style home located within the city of White Lake, Michigan. The home has six bedrooms, two full-size bathrooms, two half-bathrooms, a dining room, kitchen, laundry room and basement. Upon entering the home, there is a hallway on the right, that leads to one resident bedroom, a half-bathroom, and the laundry room. To the left of the entryway are three resident bedrooms and on full-size bathroom. Directly past the entryway of the home are the kitchen, dining room and living room areas. Past the living room is a hallway that leads to two additional resident bedrooms, a full-size bathroom and one half-bathroom. To the left of the living room are double doors that lead to the exterior deck which has a wheelchair accessible ramp that leads to the ground level. The home is wheelchair accessible and has two approved means of egress that are equipped with a ramp from the first floor. The home a utilizes public water supply and sewage disposal system.

The home utilizes a gas furnace and gas water heater system. The furnace and hot water heater are located in the basement of the home and are equipped with a 1-3/4 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	11' 8" x 11' 8"	136	1
2	10' 10" x 11' 10"	128	1
3	10' 10" x 11' 11"	129	1
4	12' 6" x 12' 7"	157	1
5	12' 6" x 12' 7"	157	1
6	11' 4" x 13' 7"	153	1

Total capacity: 6

The indoor living and dining areas measure a total of 519 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 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 6 male and/or female residents who are aged, physically handicapped or who have Alzheimer's Disease or related conditions. 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 Oakland County DHS, Oakland County 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 Selah Senior Living, L.L.C., a “Domestic Limited Liability Company”, established in Michigan on 10/7/2021. 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 Selah Senior Living, L.L.C. have submitted documentation appointing Daniela Marit as licensee designee and administrator for this facility.

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

Mrs. Marit provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mrs. Marit has a bachelor’s degree in social work and has been working in the field of social work for nine years. Over the last nine years, Mrs. Marit has worked as direct care worker, providing personal care, protection, and safety to the adult foster care population. Mrs. Marit meets the qualifications to be appointed licensee designee and administrator for the facility.

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. Mrs. Marit 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. Mrs. Marit has indicated that direct care staff will be awake during sleeping hours.

Mrs. Marit 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.

Mrs. Marit acknowledged an understanding of the responsibility to assess the good moral character of employees. Mrs. Marit acknowledged 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.

Mrs. Marit 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 Mrs. Marit will administer medication to residents. In addition, Mrs. Marit 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.

Mrs. Marit 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, Mrs. Marit 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.

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

Mrs. Marit 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.

Mrs. Marit 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.

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

Mrs. Marit 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. Mrs. Marit indicated the intent to respect and safeguard these resident rights.

Mrs. Marit 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.

Mrs. Marit 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.

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

D. Rule/Statutory Violations

On 6/16/2022, I completed the original licensing study reported and was informed that Mrs. Marit's husband, Claudiu Marit, has prior disciplinary action with the bureau. I requested additional documentation.

On 6/7/2022, I spoke to Mrs. Marit via telephone. I informed Mrs. Marit of the information I had obtained pertaining to her husband's disciplinary action with our bureau. Mrs. Marit acknowledged that she is married to Claudiu Marit, and she is aware of his disciplinary action with the bureau. Mrs. Marit stated that she intentionally did not disclose her relationship status with Mr. Marit to me because she was afraid it would negatively impact her ability to become licensed. Mrs. Marit stated that if she is issued a license, she intends to operate the business independently and that Mr. Marit will not be involved in the day-to-day or administrative operations of the facility. On this same day, Mrs. Marit emailed me a copy of the Winter 2021 Property Tax Statement, which only contained Mrs. Marit's name.

On 6/21/2022, Mrs. Marit submitted a letter to me via email. The letter indicated that Mrs. Marit is the sole member and owner of Selah Senior Living, LLC. The letter indicated that Mr. Marit has no ownership interest in the property or business and will not have any involvement in the business. The letter was signed and dated by Mrs. Marit.

On 6/22/2022, I sent a follow-up email to Mrs. Marit, requesting additional information.

On 7/8/2022, I received an email from attorney, David J. Shea. The email contained a letter, which included supporting documentation. The letter stated that Mr. Marit is not listed on the business bank account for the adult foster care payments and does not have access to withdraw funds from the account.

On 9/12/2022, I received a follow-up email from Mr. Shea, stating that Mr. Marit will not have any financial, ownership employment or managerial interest in any company owned by Mrs. Marit, including Selah Senior Living, LLC.

Based on the information above, Selah Senior Living, LLC was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

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

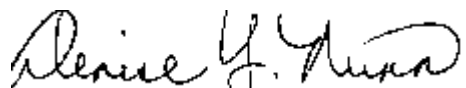


9/23/2022

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:



09/23/2022

Denise Y. Nunn
Area Manager

Date