

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 11, 2023

Jodie Nowak Tranquility AFC Home LLC 11590 Lakeshore Drive Lakeview, MI 48850

RE: Application #: AM590407641

Tranquility AFC Home LLC 1380 East Main Street Edmore, MI 48829

Dear Ms. Nowak:

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 10 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,

Genrifer Browning

Jennifer Browning, Licensing Consultant Bureau of Community and Health Systems Browningj1@michigan.gov - (989) 444-9614

enclosure

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

I. IDENTIFYING INFORMATION

License #: AM590407641

Applicant Name: Tranquility AFC Home LLC

Applicant Address: 11590 Lakeshore Drive

Lakeview, MI 48850

Applicant Telephone #: (989) 560-9733

Licensee Designee: Jodie Nowak

Administrator Jodie Nowak

Name of Facility: Tranquility AFC Home LLC

Facility Address: 1380 East Main Street

Edmore, MI 48829

Facility Telephone #: (989) 560-9733

Application Date: 02/25/2021

Capacity: 10

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II. METHODOLOGY

02/25/2021	Enrollment
03/12/2021	Application Incomplete Letter Sent - App - Updated; add'l \$35; IRS Itr; FPs & RI-030 for Jodie (LD & Admin)
05/03/2021	Inspection Report Requested – Fire
05/03/2021	Contact - Document Sent - Fire Safety String
02/22/2022	Contact - Telephone call received - Applicant still interested; resent app incomplete letter.
02/28/2022	Contact - Document Received Add'l \$65 ck# 2156, updated app & 1326/RI 030 for LD
03/09/2022	Application Incomplete Letter Sent AFC 100 for Administrator
03/10/2022	Contact - Document Received AFC 100 for Administrator Tracy Evans
03/10/2022	File Transferred To Field Office Lansing via SharePoint
03/25/2022	Application Incomplete Letter Sent
04/21/2022	Contact - Document Received Received MMCC College transcripts, medical clearance for Jodie, quit claim deed for property.
04/26/2022	Contact - Document Received High School diploma for Admin Tracy, Medical Clearance BCAL 3704, TB Test Results for administrator.
05/10/2022	Contact - Document Received Credit Report
05/11/2022	Contact - Document Sent an email back to Tracy Evans.
08/08/2022	Application Incomplete Letter Sent - Sent by email to Jodie Nowak
08/08/2022	Contact - Document Received Water heater inspection.
01/31/2023	Contact - Telephone call received from Phil Scheer BFS regarding inspection, there are items to fix and another inspection will be completed.
02/01/2023	Contact - Telephone call made to Jodie Nowak

03/03/2023	Inspection completed – BCAL Sub-Compliance – sent confirming letter to Ms. Nowak
03/17/2023	Email from BFS Phillip Sheer – Facility will be given full BFS approval. Report will follow.
03/21/2023	Inspection completed – BCAL Sub-Compliance – sent confirming letter to Ms. Nowak
03/30/2023	Inspection completed – BCAL Full Compliance – Virtually - Ms. Nowak sent videos of the bathroom door, new mirrors, and ventilation fan showing all changes were made.
03/30/2023	Recommend license issuance.
04/04/2023	Inspection completed On-site – measuring bedrooms.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Tranquility AFC Home LLC is a ten bedroom spacious ranch home which was converted from a former doctor's office located in rural Edmore, Michigan. The applicant's proof of property ownership is on file. The facility has limited landscaping with a large parking area in the front of the building. The interior is comfortable and tastefully decorated. Upon entering the facility is a large sitting room, reception area, and dining space to accommodate all residents. To the left of the dining room, are eight resident bedrooms which are all situated around the facilities office space with several desks. There is a back hallway where the furnace and water heater are located which leads to two additional resident bedrooms, a small library, storage room, a staff break room, a half bathroom, and another large living room area. To the right of the dining and sitting room area is the kitchen and a rear egress. The facility's washer and dryer are located in a small laundry room off of the kitchen equipped with a utility sink. The front entrance of the facility is wheelchair accessible at ground level. There is also an exit through the staff break room which is wheelchair accessible and an exit leaving the kitchen area. The applicant does plan to admit individuals who regularly use a wheelchair to ambulate. The home utilizes the public water and sewage disposal system.

The facility is equipped with an interconnected multi-station smoke detection system with battery backup which is installed in all required areas and is fully operational. The facility is also fully sprinkled. There are four fire extinguishers spaced throughout the facility. The facility was inspected on 03/17/2023 and determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules.

The facility has four gas furnaces and one gas hot water heater which are located in closets in the back hallway. On file is written verification from Stewart's Heating verifying the facility's hot water heater was inspected on July 22, 2022 and the furnaces were inspected on July 1, 2022 and all are in good working condition.

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

Bedroom #	Room	Total Square Footage	Total Resident Beds
	Dimensions		
1	9'9" X 8'11"	86.94	1
2	9'10" X 8'2"	80.31	1
3	9'10" X 8'11"	87.68	1
4	9'10" X 15'9"	154.88	2
5	11'3 X 9'9"	109.69	1
6	9'9" X 9"11"	96.69	1
7	10' X 9"10"	98.33	1
8	9'11" X 9'10"	97.51	1
9	7'10 X 10'11"	85.51	1
Back Living	23'6" X 9'10"	231.08	
room			
Library	9'11" X 7'0"	69.42	
Back Break	19' X 10'11"	207.42	
room			
Front entrance	47'10 X 34'3"	1638.29	
living area /			
dining room			

The indoor living and dining areas measure a total of 1845.71 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 <u>10</u> 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 10 male and/or female residents who are aged, physically handicapped, mentally ill, or developmentally disabled. The program will include social interaction, training for personal hygiene, public safety and independent living skills, and opportunity for involvement in education involvement or day programs. The applicant intends to accept referrals from Montcalm County DHHS, Montcalm Care Network, 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 pool at the Edmore Inn, library, shopping centers, and area churches. The facility is also fifteen minutes to Lakeview where Spectrum Health Kelsey Hospital is located along with various shopping and restaurants. Tranquility Living AFC also has a small library with books and Ms. Nowak has purchased tablets the residents can use to download books and use services through the public library. These resources provide an environment to enhance the quality of life of residents.

C. Applicant and Administrator Qualifications

The applicant is Tranquility AFC Home L.L.C., a "Domestic Limited Liability Company," established in Michigan on July 30, 2019. 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 Tranquility AFC Home L.L.C. have submitted documentation appointing Jodie Nowak as licensee designee and administrator for this facility.

Criminal history background checks of the licensee designee and administrator, Ms. Nowak were completed and they were determined to be of good moral character to provide licensed adult foster care. Ms. Nowak submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Ms. Nowak has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Nowak has provided direct care to residents in two licensed adult foster care homes for a total of three years. The adult foster care homes which Ms. Nowak worked in included residents of all ages and the residents were physically handicapped, mentally ill, or developmentally disabled. Ms. Nowak has experience working with residents who require the use of an assistive device for mobility. Ms. Nowak also has experience using gait belts and hoyer lifts when a resident requires this assistance. Ms. Nowak also has experience with residents who are non-verbal and may use a communication board as an alternative means of communication.

Ms. Nowak holds a Bachelor of Science degree in Mortuary Science from Wayne State University and has fourteen years of experience working as a funeral director. Ms. Nowak has completed all required licensing trainings in resident rights, nutrition / food safety, person centered planning, medication administration, and prevention of communicable diseases, crisis intervention, and First Aid / CPR.

The staffing pattern for the original license of this 10 bed facility is adequate and includes a minimum of one staff for 10 residents per shift. The applicant 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. The applicant has indicated that direct care staff will be awake during sleeping hours.

The applicant 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.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledges 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.

The applicant 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 the *licensee designee* 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.

The applicant 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, the applicant 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.

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

The applicant acknowledges 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.

The applicant 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.

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

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.

The applicant 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. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant 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.

The applicant 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

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. <u>RECOMMENDATION</u>

I recommend issuance of a six-month temporary license to this adult foster care medium group home with a capacity of (10).

Genrifer Brown	rag	04/05/2023	
Jennifer Browning Licensing Consultant		Date	
Approved By:	04/44/2022		
• Total Control	04/11/2023		
Dawn N. Timm Area Manager		Date	