



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

November 9, 2023

Megan Charboneau  
Linda Margaret's Retirement Community LLC  
722 S. Huron St.  
Cheboygan, MI 49721

RE: Application #: AM160417504  
Linda Margaret's Retirement Community  
3723 Long Lake Rd  
Cheboygan, MI 49721

Dear Ms. Charboneau:

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 (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Adam Robarge".

Adam Robarge, Licensing Consultant  
Bureau of Community and Health Systems  
Suite 11  
701 S. Elmwood  
Traverse City, MI 49684  
(231) 350-0939

enclosure

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

**I. IDENTIFYING INFORMATION**

**License #:** AM160417504

**Licensee Name:** Linda Margaret's Retirement Community LLC

**Licensee Address:** 3723 Long Lake Rd  
Cheboygan, MI 49721

**Licensee Telephone #:** (231) 625-8132

**Administrator/Licensee Designee:** Megan Charboneau, Designee

**Name of Facility:** Linda Margaret's Retirement Community

**Facility Address:** 3723 Long Lake Rd  
Cheboygan, MI 49721

**Facility Telephone #:** (231) 625-8132

**Application Date:** 08/17/2023

**Capacity:** 12

**Program Type:** ALZHEIMERS  
AGED

## II. METHODOLOGY

08/17/2023	On-Line Enrollment
08/21/2023	PSOR on Address Completed
08/21/2023	Inspection Report Requested - Fire
08/21/2023	Contact - Document Sent Fire Safety String to LD & Emailed 1712 to BFS
08/24/2023	Contact - Document Received Revised Application
09/12/2023	Contact - Document Received AFC 100 & 1326/RI 030 for Megan Charboneau (referred to C Coburn for review)
09/14/2023	File Transferred To Field Office GR via SharePoint
09/19/2023	Inspection Report Requested - Health
10/02/2023	Contact - Document Received Revised application with licensee changes and copy of EIN letter.
10/05/2023	Inspection Completed Health – “A” Rating
10/25/2023	Inspection Completed Fire – “C” Rating
11/03/2023	Inspection Completed On-site
11/08/2023	Inspection Completed Fire – “A” Rating

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

This facility is a two-level home with the lower level having walk-out access. There is an attached garage. The home is in a rural area, approximately 7 miles south of the city of Cheboygan, in the township of Aloha.

The upper level consists of a living room, kitchen, dining area, four resident bedrooms, two full bathrooms, a half bathroom, staff office and outdoor deck. The lower level consists of a living room, dining area, kitchenette, four resident bedrooms, two full bathrooms and a furnace room.

The facility was approved on October 5, 2023 by Sanitarian Joseph Scheele with the Cheboygan County Health Department. He determined that the home is in substantial compliance with the applicable rules pertaining to environmental health, water supply and sewage disposal.

The facility was approved on November 8, 2023 by Mr. Ryan Byrne with the Bureau of Fire Safety. He concluded that the facility was in substantial compliance with the applicable fire safety rules. The home is equipped with an approved pull station alarm system and a sprinkled system throughout. There are two emergency exits on each level of the home. The two fire exits on the upper level have ramps and the home is wheelchair accessible. Fire drills will be conducted by staff and residents during daytime, evening and sleeping hours at least once per quarter.

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

Bedroom #	Room Dimensions	Area	Resident Beds
1	20' x 13'	260 square feet	2
2	15'6" x 12'	186 square feet	2
3	10'6" x 10'6"	110 square feet	1
4	14' x 10'6"	147 square feet	1
5	16'9" x 12'3"	205 square feet	2
6	14'6" x 10'6"	152 square feet	1
7	13' x 12'3"	159 square feet	1
8	19' x 12'9"	242 square feet	2

The upper level living room measures 16 feet by 15 feet for a total area of 240 square feet and the upper level dining room measures 19 feet by 11 feet for a total area of 209 feet. The lower level living room measures 18 feet 6 inches by 12 feet 6 inches for a total area of 231 square feet and the lower level dining room measures 21 feet by 9 feet 6 inches for a total area of 200 square feet. This exceeds the 35 square feet per resident requirement of living space exclusive of bathrooms, storage areas, hallways, kitchens and sleeping areas.

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**

Admission and discharge policies, program statement, Alzheimer's 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 or non-ambulatory adults who are aged and those diagnosed with Alzheimer's disease in the least restrictive environment possible.

Programs for the aged residents will include activities of daily living, recreational activities, community interaction, health and fitness.

Programs for those diagnosed with Alzheimer's disease will include supervised daily living and recreational activities, community interaction, health and fitness and a specialized individual care plan. Linda Margaret's Retirement Community's mission is to provide a safe, nurturing environment to dementia and Alzheimer's residents that allow them to preserve their dignity, positive self-worth, and enables them to feel and be productive.

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 libraries, local museums, shopping centers, and local parks. The facility will assure the availability of transportation services.

### **C. Applicant and Administrator Qualifications**

The applicant is Linda Margaret's Retirement Community, L.L.C, which is a "Domestic Limited Liability Company", which was established on May 17, 2023. 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 organizer of Linda Margaret's Retirement Community, L.L.C has submitted documentation appointing Megan Charboneau as licensee designee and administrator of this facility. Ms. Charboneau has experience with the aged and those diagnosed with Alzheimer's disease.

A criminal history background check was conducted for Megan Charboneau. She has been determined to be of good moral character. She submitted a statement from a physician documenting her good health and current negative TB-tine results.

The applicant 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 12 bed facility is adequate and includes a minimum of one staff -to-twelve residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledged that at no time will this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facility's staff-to-resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledges an understanding of the training suitability 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)), 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 good moral character, medical and training 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 the documents contained within each employee’s file.

The applicant 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.

The applicant acknowledges their 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 the required forms and signatures to be completed for each resident on an annual basis.

The applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for the documents contained within each resident’s file.

The applicant acknowledges 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 when a resident can be discharged before the issuance of a 30-Day written discharge notice.

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 accidents and incidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

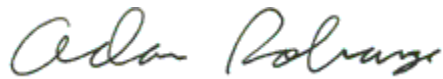
The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges that a separate *Resident Funds Part II (BCAL-2319)* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the residents' personal money transactions that have been agreed to be managed by the applicant.

**D. Rule/Statutory Violations**

The applicant is in substantial 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 medium group home (capacity 12).



11/09/2023

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Adam Robarge  
Licensing Consultant

Date

Approved By:



11/09/2023

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Jerry Hendrick  
Area Manager

Date