



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 31, 2023

Rashalle Austin
Unity Group III LLC
440 S. Clay St
Coldwater, MI 49036

RE: Application #: AS120416424
Unity Group III LLC
75 N Michigan Ave
Coldwater, MI 49036

Dear Rashalle. Austin:

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 5 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. If 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 black ink, appearing to read "Dwight Forde".

Dwight Forde, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS120416424
Licensee Name:	Unity Group III LLC
Licensee Address:	75 N Michigan Ave Coldwater, MI 49036
Licensee Telephone #:	(517) 617-9591
Administrator/Licensee Designee:	Rashalle Austin, Designee
Name of Facility:	Unity Group III LLC
Facility Address:	75 N Michigan Ave Coldwater, MI 49036
Facility Telephone #:	(517) 617-9591 05/09/2023
Application Date:	
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

05/09/2023	On-Line Enrollment
05/24/2023	PSOR on Address Completed
05/24/2023	Contact - Document Sent forms sent
06/23/2023	Contact - Document Received 1326/ri030, afc 100
07/14/2023	Application Incomplete Letter Sent
07/20/2023	Application Complete/On-site Needed

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is located in a residential neighborhood, at 75 North Michigan Ave, in the city of Coldwater. This single-story ranch style home has an attached garage. The home has a pathed driveway. The front door will be the primary entrance for the residents. This entrance is equipped with a walkway to the front door. The second identified exit and means of egress is accessed through a door off the living room area. This facility contains a kitchen and dining area, a living room, an office area/medication room, laundry room, three resident bedrooms, and two full bathrooms. The living room egress door provides access to the back yard.

The facility utilizes public water supply and sewage disposal systems.

The forced air gas furnace and water heater located on the first floor of the home, in an enclosed room. On July 11, 2023, the furnace and water heater were inspected and approved by a licensed contractor. The 1 ¾ inch solid core door and frame leading to the mechanical room is fire-rated; it is equipped with an automatic self-closing device and positive latching hardware. The room is constructed of materials that provide a 1-hour-fire-resistance rating.

This property is owned by Unity Group, LLC and there is a lease agreement between Unity Group, LLC and the applicant.

The facility is equipped with an interconnected, hardwired smoke detection system, it was inspected, and it is in good operating condition. The home is also equipped with battery back-up smoke detectors. The inspection was completed on July 11, 2023, and a copy of the approved inspection report is contained within the licensing file.

The facility is equipped with central air conditioning. The heating and cooling systems have been inspected by a contractor, and the approved inspection report is contained within the file.

The facility is equipped with a washer and a gas dryer. The dryer is equipped with a flexible metal duct.

The trash will be removed from the premises on a weekly basis. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12'3"x12'7"	156	2
2	10'4"x12'4"	127	2
3	12'6"x10'5"	130	1

The indoor living, sitting and dining areas measure a total of 900 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based upon the information provided above, this facility can accommodate 6 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Admission and discharge policies, program 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 six male or female ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. The applicant intends to accept residents from various community mental health agencies as a referral source.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The licensee will provide transportation for program and medical needs as agreed upon in the Resident Care Agreement. 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 public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is Unity Group III, LLC., and it is a “Domestic Limited Liability Corporation” which was incorporated on December 3, 2012. A review of this corporation on the State of Michigan, Department of Licensing and Regulatory Affairs’ website demonstrates it has an active status and that Rachelle Austin is the President. 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. Mrs. Rachelle Austin was appointed by the members of the board as the Licensee Designee for the facility.

A criminal background check of Rachelle Austin was completed, and she was determined to be of good moral character to provide licensed adult foster care. Mrs. Austin has submitted a statement from her physician documenting her good health and current negative tuberculosis test results. Similarly, a criminal background check on Jadan Haylett, the administrator was conducted, with no LEIN convictions recorded. Ms. Haylett also submitted a statement from her physician, documenting her good health and current negative tuberculosis test results.

Mrs. Austin has experience working with the populations that will be served in this home. Mrs. Austin has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mrs. Austin has provided copies of the successful completion of her education and trainings. She has also been trained in First Aid and Cardiopulmonary Resuscitation and provided a certification of completion. Mrs. Austin is currently the Licensee Designee to several adult foster care homes and has served in that capacity for many years. Ms. Haylett has been an employee of Unity Services since 2020.

The staffing pattern for the original license of the 5-bed facility is adequate and includes a minimum of 1 staff for 6 residents. The applicant acknowledged that the staff to resident ratio may need to be increased 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 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. The applicant was provided with information regarding the process of obtaining criminal history record 6 clearances utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) 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 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 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.

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 valuable 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 residents' 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 7 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.

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.

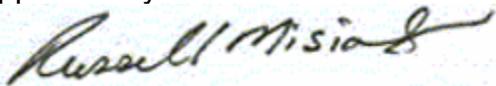


8/31/23

Dwight Forde
Licensing Consultant

Date

Approved By:



9/14/23

Russell B. Misiak
Area Manager

Date