



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 3, 2024

Achal Patel
Divine Life Assisted Living of Dewitt 2 Inc
2045 Birch Bluff Dr
Okemos, MI 48864

RE: Application #: AL190418069
Divine Life Assisted Living of Dewitt 2 Inc
1177 Solon Rd, Ste 2
DeWitt, MI 48820

Dear Achal Patel:

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 20 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 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 #:	AL190418069
Applicant Name:	Divine Life Assisted Living of Dewitt 2 Inc
Applicant Address:	2045 Birch Bluff Dr Okemos, MI 48864
Applicant Telephone #:	(517) 484-6980
Licensee Designee:	Achal Patel
Administrator:	Cheri Lynn Weaver
Name of Facility:	Divine Life Assisted Living of Dewitt 2 Inc
Facility Address:	1177 Solon Rd, Ste 2 DeWitt, MI 48820
Facility Telephone #:	(517) 484-6980
Application Date:	11/20/2023
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS

II. METHODOLOGY

04/10/2023	Inspection Completed-Env. Health: A Please see AL190404713.
10/19/2023	Inspection Completed-Fire Safety: A Please see AL190404713.
11/20/2023	Enrollment
11/22/2023	Application Incomplete Letter Sent Requested 1326
11/22/2023	PSOR on Address Completed
11/22/2023	Contact - Document Sent Form sent.
11/22/2023	Contact - Document Received 1326
11/22/2023	File Transferred to Field Office
01/23/2024	Application Incomplete Letter Sent emailed to licensee designee Achal Patel.
02/13/2024	Contact - Telephone call received from licensee designee Achal Patel requesting consultation and technical assistance. Consultation and technical assistance were provided.
03/18/2024	Contact - Document Sent emailed LD Achal Patel asking how he is doing with accumulating the supporting documentation for this enrollment. Documentation received.
05/28/2024	Application Complete/On-site Needed
05/28/2024	Inspection Completed On-site
05/30/2024	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Divine Life Assisted Living of Dewitt 2 Inc. is a recently renovated one-story ranch style building with vinyl siding located in Dewitt, Michigan. The facility has ample parking for visitors and direct care staff members (DCSMs). Upon entering the facility there is a small vestibule leading into a large dining area. The great room is located off the south end of the dining area. The kitchen is located off the north end of the dining area.

There are 13 resident bedrooms located within two wings on the east and west ends of the building. There are 13 half – bathrooms and three shower rooms in the facility. Each resident bedroom provides access to a bathroom, and most are Jack-and-Jill style shared between two resident bedrooms. The facility is equipped with a kitchen, dining room, family room, laundry room, shower rooms, and a salon. The facility is wheelchair accessible and has four approved means of egress that are at grade and easily traversed with a wheelchair. The facility is equipped with wider doors to allow freer access to resident rooms and restrooms. Also, the hallways are wider to accommodate residents who need more space to maneuver a wheelchair or walker. There is a paved path and gazebo area in the backyard that is handicap accessible, so residents can enjoy the outdoors in a safe environment. The facility utilizes a public sewage disposal system and private water system. The facility was determined to be in substantial compliance with applicable environmental health rules by the Mid-Michigan District Health Department on 04/10/2023.

The facility is equipped with a gas hot water heater located in a utility room on the main floor of the facility. The facility is equipped with three gas forced-air furnaces which are also located in the utility room on the north side off the laundry room. The heating plant is enclosed in a room constructed of material with a one-hour-fire-resistance rating and a 1 ¾ inch solid wood 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. Smoke detectors have been installed near sleeping areas, the dining room, kitchen, great room, and near all flame or heat producing equipment. The facility is fully sprinkled. The facility was determined by the Bureau of Fire Services to be in compliance with the applicable fire safety administrative rules on 10/19/2023.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
201	21' x 16'	336	2
202	21' x 16'	336	2

203	12' x 10'	120	1
204	13' x 15'	195	2
205	20' x 16'	320	2
206	14' x 16'	224	2
207	12' x 16'	192	2
208	10' x 12'	120	1
209	10' x 12'	120	1
210	10' x 12'	120	1
211	10' x 12'	120	1
212	16' x 12'	192	1
213	14' x 19'	266	2
Dining Area	20' x 21'	420	
Great Room	22' x 13'	286	

The indoor living and dining areas measure a total of 706 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 20 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 12 male or female residents who are aged, physically handicapped, traumatically brain injured, and/or diagnosed with Alzheimer's disease. The program will provide the highest quality of care and meet all residents' personal care needs such as medication management, incontinence care, bathing, grooming, hygiene, feeding etc. The program statement indicates the facility typically serves individuals who have aged past 45 years and diagnosed with a physical handicap, traumatic brain injury, or Alzheimer's disease or anyone over 60 years who are medically stable, diagnosed with traumatic brain injury, physically handicapped, or Alzheimer's disease and in need of assistance with activities of daily living (ADL). The applicant indicated residents who have been diagnosed with dementia/Alzheimer's disease and may be experiencing confusion, verbal aggression, or loss of ability to meet his/her own needs are appropriate for the program. The applicant will not accept residents who are physically aggressive or have exit-seeking behavior.

The applicant intends to admit residents who may require the full-time use of a wheelchair, assistance from direct care staff members (DCSMs) to transfer and/or ambulate, and assistance from one or two DCSMs with all activities of daily living.

The program will focus on maintaining and building strength with residents. The applicant intends to employ qualified DCSMs to work side-by-side with residents, with the direction of a physical therapist and/or occupational therapist when needed to assist residents with various tasks such as walking to gain gait strengthening, assistance with range of motion to increase mobility, chair exercises to strengthen muscle core and

promoting independence during mealtimes. The program will enhance the physical, social, and cognitive abilities of residents with an emphasis on completing all activities of daily living.

The applicant will coordinate and facilitate services for residents such as onsite physical and occupational therapy, podiatry services, a physician who will contact residents at the facility, X-rays, EKG's, echocardiograms, doppler and ultrasound services onsite, as well as onsite blood draws and other specimen collection. The applicant intends to connect residents with a pharmacy that will deliver residents' medication to the facility which will be dispensed by qualified DCSMs according to physician's orders.

The applicant stated DCSMs will be available 24/7 to assist residents when needed with transferring and mobility.

The applicant stated the residents will also receive laundry services, three nutritious meals per day, snacks, access to a beauty shop with a licensed hairdresser or residents' personal hairdresser can provide services at the facility, and phone service as needed. The program will not include transportation, but staff members will be able to assist with coordination of transportation.

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.

The facility is located between the cities of Dewitt and Lansing which have restaurants, parks, shopping centers and other entertainment options. There are also local hospitals, physicians, and medical specialists. These resources provide an environment to enhance the quality of life and can increase the independence of residents when applicable.

The applicant intends to accept referrals from Tri-County Office on Aging, Program of All-Inclusive Care for the Elderly (PACE), or residents with private sources of payment.

C. Applicant and Administrator Qualifications

The applicant is AVS Holdings 3 LLC., a Michigan limited liability company. 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. This facility is currently licensed as a large group facility in good standing with residents admitted.

The members of AVS Holdings 3 LLC have submitted documentation appointing Achal Patel as licensee designee and Cheri Lynn Weaver as administrator for the facility.

Criminal history background checks of the licensee designee and the administrator were completed, and Mr. Patel and Ms. Weaver were determined to be of good moral character to provide licensed adult foster care.

Mr. Patel submitted a Medical Clearance Request form filled out by a licensed physician documenting his good health dated 05/08/2024. Mr. Patel provided a negative tuberculosis test result administered on 02/14/2024 and read on 02/17/2024.

Ms. Weaver submitted a Medical Clearance Request form filled out by a licensed physician documenting her good health dated 12/03/2023. Ms. Weaver provided a negative tuberculosis test result administered on 01/18/2022 and read on 11/21/2022.

Mr. Patel provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mr. Patel currently owns and successfully operates seven Adult Foster Care (AFC) facilities. Mr. Patel possesses a Doctor of Physical Therapy degree and has worked directly with the selected vulnerable populations for more than two decades. Specifically, Mr. Patel has provided care for residents who are aged, diagnosed with Alzheimer's disease, or physically handicapped in the AFC facilities he currently owns and successfully operates. While working as a physical therapist Mr. Patel provided treatment to many individuals diagnosed with traumatic brain injury so understands the specific behavioral, physical, and emotional needs of this population. Mr. Patel also submitted an approved Alzheimer's Statement outlining the type of care provided, continual training of direct care staff members, and the physical characteristics of the building best suited for residents diagnosed with Alzheimer's disease.

Ms. Weaver provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Weaver has worked as a healthcare administrator since 2017. Ms. Weaver is certified in Basic Life Support (BLS), Basic First Aid, AED, and CPR. In addition, Ms. Weaver recently completed the following trainings: Active Shooter Preparation and Response in Secure, Preserve, Fight; Medication Pass in Senior Care; Cultural Competence: A Comprehensive Review, Reporting Major Incidents; Skin Care and Prevention of Pressure Injuries; Managing Parkinson's Disease in Senior Care; Resident Rights: A Comprehensive Overview; Evaluation and Diagnosis of Dementia; Diversion and Substance Abusing Health Care Professionals; Infection Control: Getting a Grip on Blood Borne Pathogens, Exposure Control and Hand Washing; Quality Assurance and Performance Improvement (QAPI): An Overview; Ethics in Senior Care; and Ethics in Healthcare: Remembering Our Values & Principles.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of one DCSM for 15 residents per shift. The applicant acknowledged that the direct care staff member to resident ratio may need to be decreased 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 DCSMs will be awake during sleeping hours.

The applicant acknowledged an understanding of the qualifications, suitability, and training requirements for DCSMs 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 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 DCSMs that have received medication training and have been determined competent by the licensee will administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet or medication cart 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 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.

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 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 to document the date and amount of the adult foster care service fee paid each month and all resident 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.

Though the facility is a single-story building with no basement, 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. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).



05/30/2024

Rodney Gill
Licensing Consultant

Date

Approved By:



06/03/2024

Dawn N. Timm
Area Manager

Date