



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 18, 2024

Andrea Reaume
Heart to Home LLC
41185 Judd Rd
Belleville, MI 48111

RE: Application #: AL820413669
Sumpter Senior Living
23560 Sumpter Rd
Belleville, MI 48111

Dear Ms. Reaume:

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 14 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 (313) 456-0380.

Sincerely,

A handwritten signature in cursive script that reads "Vanita Bouldin".

Vanita C. Bouldin, Licensing Consultant
Bureau of Community and Health Systems
22 Center Street
Ypsilanti, MI 48198
(734) 395-4037

Enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL820413669
Licensee Name:	Heart to Home LLC
Licensee Address:	41185 Judd Rd Belleville, MI 48111
Licensee Telephone #:	(734) 231-6315
Administrator/Licensee Designee:	Andrea Reaume, Designee
Name of Facility:	Sumpter Senior Living
Facility Address:	23560 Sumpter Rd Belleville, MI 48111
Facility Telephone #:	(734) 231-6315 08/05/2022
Application Date:	
Capacity:	14
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

08/05/2022	On-Line Enrollment
08/08/2022	Inspection Report Requested - Fire
08/08/2022	Contact - Document Sent fire safety string
08/08/2022	PSOR on Address Completed
08/31/2022	Contact - Telephone call received Gina is not a LD on this license do not need her FPS.
10/10/2022	Contact - Document Received 1326 & Afc 100
10/26/2022	Application Incomplete Letter Sent
02/22/2023	Contact - Document Sent Email sent to Mike Field, Fire Protection Sales Engineer, addressing fire safety issues. Referred him to applicant and BFS website to obtain answers for his questions from email sent on 02/10/2023.
03/22/2023	Comment Requested information from the incomplete application letter has been sent. Licensee's stated they have been in contact with BFS and are submitting paperwork.
04/24/2023	Inspection Report Requested - Health
07/03/2023	Inspection Report Requested - Health
07/03/2023	Contact - Telephone call received Applicant interested in pursuing the enrollment application. Researching sewer tank replacement and will contact once issue has been resolved.
11/27/2023	Inspection Completed-Env. Health : A
04/03/2024	Inspection Completed-Fire Safety : A
05/07/2024	Application Complete/On-site Needed
05/08/2024	Inspection Completed-BCAL Sub. Compliance
05/09/2024	Application Incomplete Letter Sent

05/20/2024 Application Complete – Onsite Needed

05/23/2024 Inspection Completed – BCAL Full Compliance

05/28/2024 Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Sumpter Senior Living adult foster care facility is located in a residential area of Belleville, MI. It is a ranch styled structure with no basement. There are 8 resident bedrooms. It also consists of a kitchen, 2 ½ bathrooms, two living rooms and two dining areas. There are 2 approved means of egress that lead out of the facility onto ground level, therefore the facility is wheelchair accessible. The facility utilizes public water but has a private sewer system. The facility has been approved by the Wayne County Environmental Health Inspection Department and received an A rating on 11/27/2023.

The furnace and hot water heater are located in a room that is constructed of material that has a 1-hour-fire-resistance rating. The facility is equipped with an approved pull station alarm system and a sprinkler system installed throughout. The facility has been approved by the Bureau of Fire Services and received an A rating on 04/03/2024.

The facility was originally licensed for six residents, but bedroom additions were completed and identified below.

Resident Bedrooms measured:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1 (new)	12.0 X 8.5 + 9.6 X 7.6	175 SQ. FT.	2
2	11.10 X 9.0	100 SQ. FT.	1
3	11.2 X 14.11	158 SQ. FT.	2
4	11.4 X 16.2	185 SQ. FT.	2
5	8.10 X 11.11	90 SQ. FT.	1
6 (new)	11.11 X 12.0 + 9.11 X 7.3	200 SQ. FT.	2
7 (new)	10.3 X 8.11 + 12.8 X 6.9	172 SQ. FT.	2

8 (new)	13.3 X 10.9	145 SQ. FT.	2
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The living, dining, and sitting room areas measure a total of 500 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, it is concluded that this facility can accommodate (14) 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 (14) male or female ambulatory adults whose diagnosis is Aged, Alzheimer’s, Traumatically Brain Injured, or Physically Handicapped 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.

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 all transportation for program and medical needs. 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 Heart to Home, L.L.C., which is a “Domestic Limited Liability Company”, was established in Michigan, on 03/29/2018. 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 Board of Directors of Heart to Home, L.L.C. has submitted documentation appointing Andrea Reaume as Licensee Designee for this facility and Gina Freemon as the Administrator of the facility.

A licensing record clearance request was completed with no lein convictions recorded for the licensee designee and the administrator. The licensee designee and administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results. The licensee designee and administrator have 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 14-bed facility is adequate and includes a minimum of 1 staff –to-14 residents per shift. All staff shall be awake during sleeping hours. The applicant acknowledges an understanding of the training 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 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 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 and the related documents required to be maintained in each employees 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 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 all of the documents contained within each employee’s file.

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 incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the 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 their responsibility to obtain all of the required 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. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The applicant acknowledges their 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

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

VI. RECOMMENDATION

I recommend issuance of a six-month temporary license to this adult foster care large group home (capacity 1 - 14).



Vanita C. Bouldin
Licensing Consultant

Date: 06/18/2024

Approved By:



Ardra Hunter
Area Manager

Date: 06/18/2024