



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 27, 2024

Michael Eby
AHR Northview Grand Rapids MI TRS Sub, LLC
Ste. 300
18191 Von Karman Ave.
Irvine, CA 92612

RE: Application #: AL410418383
The Cortland Terrace Cove
3740 Vista Springs Ave NE
Grand Rapids, MI 49525

Dear Mr. Eby:

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. 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 "Arlene B. Smith".

Arlene B. Smith, MSW, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 916-4213

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL410418383
Applicant Name:	AHR Northview Grand Rapids MI TRS Sub, LLC
Applicant Address:	Ste. 300 18191 Von Karman Ave. Irvine, CA 92612
Applicant Telephone #:	(949) 270-9200
Administrator/Licensee Designee:	Michael Eby, Designee/Administrator
Name of Facility:	The Cortland Terrace Cove
Facility Address:	3740 Vista Springs Ave NE Grand Rapids, MI 49525
Facility Telephone #:	(616) 207-4140
Application:	04/04/2024
Capacity:	20
Program Type:	AGED ALZHEIMERS

II. METHODOLOGY

04/04/2024	Enrollment
04/10/2024	Application Incomplete Letter Sent 1326 Michael
04/10/2024	PSOR on Address Completed
04/10/2024	Contact - Document Sent
04/11/2024	File Transferred To Field Office
05/15/2024	Application Incomplete Letter Sent
05/16/2024	Contact - Document Received Contact - Document Received Email documents received from Jennifer L. Hilliard with Attachments. Proof of Zoning from Plainfield Charter Township dated 07/23/2013, Application for Certificate of Authority to Transact Business in MI, for use of Foreign Limited Liability Company, Application for Change of Licensee Designee/Administrator, to Michael Eby, Medical Clearance, TB results, Resume, Ferris State Certificate of Long Term Care, (May 8, 2022), CPR AED and First Aid Certificate, 03/13/2024, College Transcript Western Michigan University, Licensing Record Clearance, Live Scan Fingerprint Background Check Request 03/08/2024.
05/30/2024	Consultation Requested/Provided Sent entire packet of how to write Program Statement, Admission Policy, Discharge Policy, and information on all the documents we require.
06/07/2024	Contact - Document Received Email from Jennifer L. Hilliard that she had received the packet I sent with instructions on how to write policies for AFC.
06/10/2024	Contact - Document Received Email from Jennifer L. Hilliard, with floor plans.
07/12/2024	Contact - Document Received Email from Jennifer L. Hilliard with regulatory review packets for The Cortland Terrace Cove: 1. Michigan LLC Qualification for AHR Northview Grand Rapids MI TRS Sub, LLC (the "Applicant"). 2. Good Standing Certificate from the Applicant. 3. Organizational Chart for the Applicant and the owner of the real

	property. 4. Proof of Ownership of the real property. 5.Right to Occupy --Lease to the Applicant. 6. Current financial statement for the Applicant. 7. Operating Budgets for the Facilities. 8. Funding Agreements or Contracts (Reliance Community Care Partners). 9. Placement Agency Contracts. 10.Zoning Approval. 11. Health of Administrator/Licensee Designee, Michael Eby. 12, TB Testing for Administrator/Licensee Designee, Michael Eby. 13. Program Statement. 14. Alzheimer's/Dementia Program Statement. 15. Admission Policy. 16. Discharge Policy. 17. Refund Agreement. 18. Grievance Procedure. 19. Evacuation and Emergency Preparedness Plans. 20. Administrator/Licensee Designee
07/15/2024	Contact - Document Received Email from Jennifer L. Hilliard with attached Sprinkler Inspection Certificate by CertaSite on June 20, 2024, for the facility.
07/19/2024	Contact - Document Received Email from Jennifer L. Hilliard Revised Floor plan.
08/19/2024	Contact - Document Received Email from Jennifer L. Hillard with attached Fire Inspection Report for The Cortland Terrace Cove dated 07/30/2024 with approved.
08/23/2024	Contact - Document Received Email received from Jennifer L. Hillard explaining that they had received HUD approval, but they need the AFC License to complete the transaction first and the offer is time limited.
09/04/2024	Inspection Completed On-site Inspection with Elizabeth Jones, Regional Director of Operation for Priority Life Care LLC, Michael Eby, Administrator/Licensee Designee, and Kari Hopp, LPN, Director of Nursing.
09/24/2024	Inspection Completed-BCAL Full Compliance Inspection with Elizabeth Jones, Regional Director of Operation for Priority Life Care LLC, Michael Eby, Administrator/Licensee Designee, and Kari Hopp, LPN, Director of Nursing.
09/26/2024	Contact - Document Received Email from Michael Eby with the dog's Rabies Certificate.
09/26/2024	Contact - Document Received Email from Jennifer L. Hilliard with revised Program Statement.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This one-story facility was built specifically as an Adult Foster Care Home. It is a wood framed structure on a cement slab, located in a residential area on the north side of the City of Grand Rapids. This facility is attached to a 20-bed licensed Adult Foster Care Home with a fire wall between them. This facility has two wings of residents' bedrooms which are off from the center of the facility. The front hall contains ten resident's bedrooms, and the rear hall contains ten resident bedrooms. All of these resident rooms are designed for one resident. There are five resident bedrooms that contain a full bath and fifteen bedrooms with a half bath. The facility contains a laundry room, dining room/terrace, a full kitchen, an activity room, a nurse's office, a nurse's station, and two full baths. The facility is on one level and therefore is wheelchair accessible and it has two approved means of egress. The facility will utilize public water and sewage system.

The boiler and hot water heater are located on the main floor, in a mechanical room off the kitchen hallway, that is constructed of materials that provide a 1 hour-fire-resistance with a 1 ¾ inch solid core door equipped with an automatic self-closing device and positive latching hardware, in a fully stopped frame. The facility is equipped with an approved pull station alarm system and a sprinkler system installed throughout the facility. There are heat detectors located in the attic of the home.

The facility was previously licensed to Northview Care Corporation from 12/13/1989 until 09/16/2013. It was called Northview Manor North, license number was AL410007147, and Scott Graves was the Licensee Designee. It was then purchased by Vista Springs Northview Operations LLC, and opened on 09/17/2013, licensed number AL410337473. Louis Andriotti Jr. was the licensee designee. This facility closed on 04/07/2020 because of a new licensee, Vista Springs Northview LLC, License number AL410400138 and it was opened on 04/08/2020. Louis Andriotti Jr. was the licensee designee.

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

	Room Dimensions	Total Square Footage	Total Resident Beds
1	12' 10" x 13' 1"	167.8	1
2	12' 11" x 13'	168	1
3	12' 11" x 13'	168	1
4	12' 9" x 13' 2"	168	1
5	12' 9" x 13'	165.75	1
6	12' 10" x 14' 2"	181.80	1
7	10' 10" x 13'	140.79	1

8	12' 11" x 12' 4"	159.30	1
9	12' 10" x 12' 5"	159.35	1
10	12' 11" x 12' 6"	161.5	1
11	12' 11" x 12' 6"	161.5	1
12	12' 10" x 12' 5"	159.35	1
13	12' 9" x 12' 5"	158.36	1
14	12' 9" x 12' 5"	158.36	1
15	16' 2" x 12' 10"	207.46	1
16	12' 10" x 12' 10"	164.61	1
17	12' 9" x 14' 1"	179.52	1
18	12' 9" x 14' 1"	179.52	1
19	12' 9" x 14' 1"	179.52	1
20	10' 5" x 14' 1"	146.71	1

The living, dining, and sitting room areas measure a total of 1,249.68 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 **twenty** 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 **twenty (20)** male or female ambulatory or handicapped adults or whose diagnosis is Alzheimer's or aged, 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 Reliance Community Care Partners and as a referral source and they will accept private pay.

The licensee will provide all transportation for program and medical needs. They will have access to the transportation vehicle that is also used by Cortland Riverside Gardens (a licensed Home for the Aged) facility that is near the facility. They also will use the local transportation services of "Ride Your Way." The facility will make provision for a variety of leisure and activities. 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 AHR Northview Grand Rapids MI TRS Sub, LLC, a foreign limited company formed in Delaware on 07/26/2023, which is a “For Profit limited liability company” and was qualified to do business in Michigan on 07/28/2024. 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 licensee has contracted with PLC Management Michigan LLC for the provision of management services with respect to the facility.

The President and CEO of AHR Northview Grand Rapids, MI TRS, Sub, LLC, Danny Prosky has submitted documentation appointing Michael Eby as Licensee Designee and Administrator for this facility.

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee designee/administrator. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting his good health and current TB-tine negative results.

The licensee designee/administrator 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 20-bed facility is adequate and includes a minimum of 2 staff –to- 20 residents per shift. The applicant acknowledges that the staff –to- resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. The applicant has indicated that direct care staff will 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 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 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) 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 directly with residents. In addition, the applicant acknowledges their 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 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, 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 acknowledges their 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 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 resident's personal money transactions that have been agreed to be managed by the applicant.

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 their 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 acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

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 temporary license to this AFC adult large group home capacity 20.

Arlene B. Smith

09/27/2024

Arlene B. Smith
Licensing Consultant

Date

Approved By:

Jerry Hendrick

09/27/2024

Jerry Hendrick
Area Manager

Date