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GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

February 14, 2025

Natalie Ptak CapABLE Community Living 68860 Appleview Dr Washinton Twp, MI 48095

RE: Application #: AS500419177

CapABLE Community Living 68860 Appleview Dr Washington, MI 48095

Dear Ms. Ptak:

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 6 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 (248) 975-5053.

Sincerely,

Eric Johnson, Licensing Consultant Bureau of Community and Health Systems Cadillac Place, Ste 9-100 3026 W Grand Blvd Detroit. MI 48202

Enclosure

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

### I. IDENTIFYING INFORMATION

License #:	AS500419177	
Licensee Name:	CapABLE Community Living	
Licensee Address:	68860 Appleview Dr	
	Washinton Twp, MI 48095	
Licensee Telephone #:	(586) 994-0057	
Administrator/Licensee Designee:	Natalie Ptak	
N 6= III	0.48150	
Name of Facility:	CapABLE Community Living	
Facility Address .	COOCO Amelo in Dr	
Facility Address:	68860 Appleview Dr	
	Washington, MI 48095	
Facility Telephone #:	(586) 281-6464	
racility relephone #.	(300) 201-0404	
Application Date:	01/30/2025	
Application buto.	01/00/2020	
Capacity:	6	
- F		
Program Type:	DEVELOPMENTALLY DISABLED	
	MENTALLY ILL	
	AGED	

#### II. METHODOLOGY

12/12/2024	Inspection Completed-Env. Health: A
12/12/2024	Inspection Completed-Fire Safety: A
12/12/2024	Inspection Completed On-site
01/21/2025	Contact - Face to Face
01/21/2025	Inspection Completed-BCAL Full Compliance
01/30/2025	On-Line Enrollment
01/31/2025	Contact - Document Received 1326/RI030
02/07/2025	PSOR on Address Completed
02/07/2025	Application Complete/On-site Needed
02/10/2025	Contact - Document Received

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the licensure of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1994.

#### A. Physical Description of Facility

CapABLE Community Living is a colonial style home located at 68860 Appleview Dr in Washington, MI 48095. The area of the home that is designated for residents has four single occupancy bedrooms, one double occupancy bedroom, two full bathroom, a half bath with a separate shower room, a living room, and a kitchen/dining area. Two of the single occupancy resident rooms and one-half bathroom with a separate shower room are located on the first floor. The home is located in a suburban area of Washington that is easily accessible to community based recreational facilities, shopping centers, medical facilities, and places of worship. The Romeo Village Police Department Police department responds to emergency calls from the home. Henry Ford Macomb Hospital is located a few miles from the home.

The furnace, hot water heater, and laundry room are located in the basement, which is separated from the main floor by a 1¾ inch solid core door with an automatic self-closing device and positive latching hardware. The facility is equipped with a fully operational smoke detection system. The home has public water and a public sewer system. The home has two forms of egress leading to the outside.

The residents' bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12'11 x 11'4	138.05	1
2	12'3 x 13'3	163.59	1
3	16'8 x 12'4	208.32	2
4	12'6 x 12'1	152.46	1
5	12'1 x 11'6	140.36	1

Total capacity: 6

The living and sitting room areas measure a total of 657.09 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate six residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

#### **B. Program Description**

CapABLE Community Living intends to provide 24-hour supervision, protection, and personal care to three male or female residents, whose diagnosis is Developmentally Disabled, mentally ill and aged. The program will include instruction for daily living, personal hygiene assistance, and social and recreational activities.

CapABLE Community Living will utilize local community resources for medical services, dental services, religious observance, and recreation. The goal of the home is to provide residents with a small, comfortable, peaceful place where they can live and get the care, they need in a family-like setting. CapABLE Community Living will offer a wide range of social, creative, musical, and physical activities to nurture each resident's mind, body and spirit. They will provide rehabilitative activities and programs to help residents regain lost function and independence on a short-term basis. The home will also professionally assess residents on a regular basis for medication and equipment needs to maximize their functional mobility, independence, and quality of life. CapABLE Community Living will offer individual, independent activities and planned group activities which include music, baking, arts, bird and nature watching, gardening, games and other activities. The licensee will make arrangements as needed for a visiting physician, dentist, podiatrist, and home care, including nursing, occupational, physical and speech therapy.

#### C. Rule/Statutory Violations

The applicant is CapABLE Community Living. The applicant has established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

CapABLE Community Living., appointed Natalie Ptak as the licensee designee and administrator of the facility. Ms. Natalie Ptak has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The licensee designee, Natalie Ptak, has a Bachelor of Science in Education from Central Michigan University. She has over one year of experience coordinating and providing services to individuals whose diagnosis is developmentally disabled, aged, and mentally ill. She also has over a year of experience as a direct in-home caregiver for individuals with diagnosis of developmentally disabled aged, and mentally ill. Licensing record clearance requests were completed for Natalie Ptak. Natalie Ptak submitted current medical clearances with a statement from a physician documenting good health and tuberculosis negative results.

Ms. Natalie Ptak 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.

Ms. Natalie Ptak acknowledged an understanding of the responsibility to assess the good moral character of employees and acknowledges 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 (<a href="www.miltcpartnership.org">www.miltcpartnership.org</a>) and the related documents required to demonstrate compliance.

Ms. Natalie Ptak acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff who have received medication training and have been determined competent by the licensee or 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.

Ms. Natalie Ptak 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, Ms. Ptak acknowledged the responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteers and to follow the retention schedule for all of the documents contained within the employee file.

Ms. Natalie Ptak acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

Ms. Natalie Ptak 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.

Ms. Natalie Ptak 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.

Ms. Natalie Ptak acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Ms. Natalie Ptak acknowledged that a separate Resident Funds Part II BCAL-2319 form will be completed 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 Friends and Family, Inc.

Ms. Natalie Ptak 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 and indicated the intent to respect and safeguard these resident rights.

Ms. Natalie Ptak 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.

Ms. Natalie Ptak 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

Denise Y. Nunn

Area Manager

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).

Date

2)	02/14/25
Eric Johnson	Date
Licensing Consultant	
Approved By:	
Denice G. Munn	02/14/2025