



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 1, 2025

Trisha Vaughn & Ronald Vaughn  
Belding Sunrise Manor, LLC  
14110 Ruby Ln.  
Big Rapids, MI 49307

RE: Application #: AL340419432  
**Belding Sunrise Manor**  
**532 Harrison St.**  
**Belding, MI 48809**

Dear Ronald & Tricia Vaughn:

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 (517) 335-5985.

Sincerely,

*Bridget Vermeesch*

Bridget Vermeesch, 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**

<b>License #:</b>	AL340419432
<b>Licensee Name:</b>	Belding Sunrise Manor, LLC
<b>Licensee Address:</b>	14110 Ruby Ln. Big Rapids, MI 49307
<b>Licensee Telephone #:</b>	(231) 629-9330
<b>Licensee Designee:</b>	Trisha Vaughn and Ronald Vaughn
<b>Administrator:</b>	Trisha Vaughn and Ronald Vaughn
<b>Name of Facility:</b>	Belding Sunrise Manor
<b>Facility Address:</b>	532 Harrison St. Belding, MI 48809
<b>Facility Telephone #:</b>	(231) 629-9330
<b>Application Date:</b>	04/15/2025
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## **II. METHODOLOGY**

03/18/2025	Inspection Completed-Fire Safety : A refer to AL340338193
04/15/2025	On-Line Enrollment
04/16/2025	PSOR on Address Completed
04/16/2025	Contact - Document Sent- forms sent
05/16/2025	File Transferred To Field Office
05/19/2025	Application Incomplete Letter Sent
06/26/2025	Application Complete/On-site Needed
06/26/2025	Inspection Completed On-site
06/26/2025	Inspection Completed- Environmental Health: A
07/01/2025	Inspection Completed-BCAL Full Compliance

## **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

### **A. Physical Description of Facility**

Belding Sunrise Manor is a two-story farmhouse with brick and wood siding, with a full basement on the outskirts of the City of Belding, MI, in Ionia County. This location allows residents walking access to the shops and restaurants in town. The main floor of the home has a large kitchen and dining room, two full bathrooms, a living room, and four semi-private resident bedrooms. The main bathroom is located in the hallway across from the bedrooms and has a full walk-in tiled shower. The main floor also has an office with the second full bathroom-shower/tub combination. Beyond the office is a private bedroom which is used as the living quarters for the licensee and administrator. The facility has two sets of stairs to the second level, one set is in the dining room and the second set is off the living room. The second floor has a full bathroom with a walk-in shower, a living room area, and five semi-private resident bedrooms. Belding Sunrise Manor was recently purchased from a previous licensee; therefore, the facility address has been continuously in effect which allows for resident bedroom #5, on the second floor, to remain licensed for four resident beds. All other resident bedrooms, on the first and second floor, are shared bedrooms so there are no private bedrooms in the facility. The basement is not licensed, therefore the basement will not be accessible by residents. The facility has three entrances, one which requires the use of stairs to enter while the other two entrance doors are equipped with a ramp to ensure adequate egress for residents who use wheelchairs. Given there are two entrances/exits with

wheelchair ramps, the facility wheelchair accessible. The facility utilizes public water and sewer systems.

The mechanical room which houses the boiler and hot water heater is in the basement and has a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware located at bottom of stairs to create floor separation. The facility is heated with a boiler system that was inspected and approved for operation on August 01, 2024, until August 01, 2026, by Michigan Department of Licensing and Regulatory Affairs (LARA) Bureau of Construction Codes-Boiler Section. The facility is inspected annually by LARA, Bureau of Fire Services, with the last inspection completed on March 18, 2025, with an approved certification. Due to the facility remaining licensed over multiple years, the facility is not required to be equipped with an approved sprinkled system installed throughout. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational was inspected and certified on September 27, 202, by Riverside Integrated Systems, Inc. Smoke detectors are located in all required areas including sleeping areas, on each floor of the facility and in the basement.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
#1	11'8" X 11.2"	132.16 Sq Ft	2 Beds
#2	11'8" X 11'2"	132.16 Sq Ft	2 Beds
#3	11'8" X 13'	154.7 Sq Ft	2 Beds
#4	10'10" X 13"	131.3 Sq Ft	2 Beds
#5	22'6" X 15'	339 Sq Ft	4 Beds
#6	11'8 X 13'	148.2 Sq Ft	2 Beds
#7	11'8" X 14	165 Sq Ft	2 Beds
#8	11'8" X 13'7"	161.6 Sq Ft	2 Beds
#9	11'6 X 11 2'8" X 5'	141 Sq Ft	2 Beds
Living Room-1 <sup>st</sup> Floor	14'4" X 19'	272.3	
Dining Room	15'4" X 20'	306.6	
Living Room-2 <sup>nd</sup> Floor	12'6" X 10'10"	135.38	

The living, dining, and sitting room areas measure a total of 714.58 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 (20)** 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 **20** male or female adults whose diagnosis are developmentally disabled, mentally impaired, aged, 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. The applicant intends to accept residents from MDHHS, CMH, VA, or private pay individuals 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 or assist with arranging 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 Belding Sunrise Manor, L.L.C., which is a "Domestic Limited Liability Company", a 'For Profit' was established in Michigan, on 04/11/2025. 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.

Belding Sunrise Manor, L.L.C. submitted documentation appointing both Ronald Vaughn and Trisha Vaughn as Licensee Designees and Administrators for this facility.

A licensing record clearance request was completed with no LEIN convictions recorded for either Ronald Vaughn and Trisha Vaughn. Ronald Vaughn and Trisha Vaughn submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

Ronald Vaughn and Trisha Vaughn both provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ronald Vaughn has been employed as a direct care staff and/or facility manager

of an adult foster care facility since 2010. Trisha Vaughn has been a CNA, LPN, and RN since 2013 working in the setting of assisted living, nursing home, and hospital providing direct care to residents within the program types licensed for this facility.

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 one direct care staff will be awake during sleeping hours.

Ronald Vaughn and Trisha Vaughn 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.

Ronald Vaughn and Trisha Vaughn acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working independently in the facility in that capacity or being considered as part of the staff –to- resident ratio.

Ronald Vaughn and Trisha Vaughn 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](http://www.miltcpartnership.org)) and the related documents required to be maintained in each employee’s record to demonstrate compliance.

Ronald and Trisha Vaughn acknowledge 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 designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee’s record.

Ronald Vaughn and Trisha Vaughn acknowledged 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 designee, can administer medication to residents. In addition, Ronald Vaughn and Trisha Vaughn indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Ronald Vaughn and Trisha Vaughn acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for

accepting a resident into the home for adult foster care. Ronald and Trisha Vaughn acknowledge their 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. Ronald Vaughn and Trisha Vaughn acknowledged 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.

Ronald Vaughn and Trisha Vaughn acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intend to comply. The applicants 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 residents' personal money transactions that have been agreed to be managed by the applicant.

Ronald Vaughn and Trisha Vaughn acknowledged 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.

Ronald Vaughn and Trisha Vaughn acknowledged 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 applicants 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.

Ronald and Trisha Vaughn acknowledged their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Ronald Vaughn and Tricia Vaughn acknowledged 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. 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 to this AFC adult large group home with a capacity of 20 residents.

*Bridget Vermeesch*

07/01/2025

---

Bridget Vermeesch  
Licensing Consultant

Date

Approved By:

*Dawn Timm*

07/01/2025

---

Dawn N. Timm  
Area Manager

Date