



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 16, 2026

Laura Hatfield-Smith
REM Michigan LLC
Suite 1
6185 Tittabawassee
Saginaw, MI 48603

RE: Application #: AS130419626
REM Michigan Farmview
16534 14 Mile Road
Marshall, MI 49014

Dear Mrs. Hatfield-Smith:

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 (616) 356-0100.

Sincerely,

Kevin L. Sellers

Kevin Sellers, Licensing Consultant
Department of Licensing and Regulatory Affairs
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(517) 230-3704
SellersK1@michigan.gov

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS130419626
Applicant Name:	REM Michigan LLC
Applicant Address:	South Suite 350 6600 France Ave Edina, MN 55435
Applicant Telephone #:	(989) 791-7174
Administrator/ Licensee Designee:	Laura Hatfield-Smith
Name of Facility:	REM Michigan Farmview
Facility Address:	16534 14 Mile Road Marshall, MI 49014
Facility Telephone #:	(267) 781-8054
Application Date:	05/30/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

05/30/2025	Enrollment
05/30/2025	PSOR on Address Completed
05/30/2025	Inspection Report Requested - Health
05/30/2025	Application Incomplete Letter Sent
05/30/2025	Contact - Document Sent
06/05/2025	Contact - Document Received
06/05/2025	File Transferred To Field Office
06/05/2025	Application Incomplete Letter Sent
06/30/2025	Inspection Completed-Env. Health : A
02/19/2026	Contact - Document Received
02/20/2026	Contact - Document Sent
03/17/2026	Contact - Document Received
03/17/2026	Contact - Document Sent
03/17/2026	Contact - Document Received
03/17/2026	Application Complete/On-site Needed
03/17/2026	SC-Application Received - Original
04/15/2026	Inspection Completed On-site
04/15/2026	Inspection Completed-Env. Health : A
04/15/2026	Inspection Completed-Fire Safety : A
04/15/2026	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

REM Michigan LLC is a ranch style home with full finished basement, located at 16534 14 Mile Road Marshall, Michigan in Calhoun County. There are multiple restaurants and convenience stores within driving distance, as well as Pennfield Public School District along with Oaklawn Hospital and Oaklawn Medical Care Group located within four miles of the facility. Direct care staff and visitor parking is located in the driveway of the facility with ample amount of space provided.

Residents will have access occupying the main level and fully finished basement areas of the facility. All areas consist of five resident bedrooms, two full bathrooms, one half bathroom, two kitchen areas, dining room, living room, laundry room with washer and dryer, two large activity rooms, additional storage areas along with a large wooden sitting deck located at rear of the facility.

There are four separate approved means of egress in the facility. The first located at the front entrance, second exiting kitchen patio door into backyard, third exiting large basement bedroom window with fire ladder inside window well and fourth exiting basement patio door into side yard. However, neither of these exits were wheelchair accessible and cannot accept residents who regularly use a wheelchair to assist with mobility.

The facility utilizes private water and sewer supply disposal system. The facility was found to be in substantial compliance with applicable environmental health rules after an inspection from the Calhoun County Health Department on 6/30/25.

The basement door is constructed of 1 ¾ -inch fire rated solid core door equipped with an automatic self-closing device and positive latching hardware creating a floor separation from the first floor of the facility to the basement. The furnace and hot water heater utilizing propane and enclosed inside a mechanical room in the basement. The mechanical room was constructed of materials having a 1-hour-fire resistance rating. The mechanical room door was constructed of 1 ¾ -inch fire rated solid core door equipped with an automatic self-closing device and positive latching hardware. The furnace and hot water heater were inspected by a licensed professional on 10/23/25 and found to be in full operational order.

The facility is equipped with a wireless interconnected blue tooth smoke and carbon monoxide detection system with battery back-up installed by a licensed electrician and is fully operational. There are smoke detectors in sleeping areas, near heating equipment and on each level of the facility. The facility is equipped with fire extinguishers located in the kitchen and the basement. Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square	Total Resident
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		Footage	Beds
1	13' 1" X 19' 7"	247 sq. ft.	2
2	12' 10" X 13' 0"	120 sq. ft.	1
3	13' 1" X 13' 0"	169 sq. ft.	1
4	13' 1" X 10' 6"	130 sq. ft.	1
5	13' 6" X 12' 4"	156 sq. ft.	1

The indoor living, dining and sitting areas measure a total of 1,508 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement. Based on the above information, this facility can accommodate six (6) residents only. It is the licensee's responsibility not to exceed the 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 six (6) male and female ambulatory adults whose diagnosis is physically handicapped, developmentally disabled, mentally impaired and 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 Calhoun County Community Mental Health(CMH)/Summit Pointe, Saginaw County Community Mental Health(CMH)/Summit Pointe, Livingston County Community Mental Health (CMH),Oakland County Community Mental Health(CMH) along with 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.

In addition, the licensee will provide all transportation for all residents' medical and psychiatric appointments including community outings. The applicant indicated all scheduled resident activities will be paid. It is the intent of the facility to utilize local community resources including libraries, shopping centers, churches and local parks. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Rule/Statutory Violations

The applicant is REM Michigan LLC, which is a "Domestic Limited Liability Company", was established in Michigan, on 12/2/24. 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.

REM Michigan LLC has submitted documentation appointing Laura Hatfield-Smith as Licensee Designee and Administrator of the facility. A licensing record clearance request was completed with no convictions recorded for Laura Hatfield-Smith. Mrs. Hatfield-Smith submitted medical clearance requests with statements from a physician documenting her good health and current negative TB results.

Mrs. Laura Hatfield-Smith has provided documentation to satisfy the qualifications and training requirements as licensee designee and administrator identified in the group home rules. Mrs. Laura Hatfield-Smith began her employment as Quality Administrator with Team Mental Health Services in 2003. Then in 2006, ResCare Premier LLC purchased all controlling interest of Team Mental Health Services. Mrs. Hatfield-Smith was promoted in 2006 to Program Director. In 2016, Mrs. Hatfield-Smith was then promoted to Executive Director along with being assigned as Licensee Designee and Administrator to twenty-two other adult foster care facilities under ResCare Premier LLC. Throughout the past twenty-three years, Mrs. Laura Hatfield-Smith worked directly with individuals diagnosed with mental illness, developmentally disabled, physical handicap, aged and receiving specialized care. Mrs. Hatfield-Smith has continued collaborating services for these individuals with community agencies and services. Mrs. Hatfield-Smith has completed all required trainings in accordance with AFC requirements.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of one-staff-to-six 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 direct care staff will be awake during sleeping hours.

The applicant acknowledges 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 acknowledges 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 designee can administer medication to residents. In addition, the applicant has indicated resident medication will be stored in a locked cabinet and daily medication logs will be maintained on each resident receiving medication.

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 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 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 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 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

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 small group home with a capacity of six residents.

Kevin L. Sellers

4/16/26

Kevin Sellers
Licensing Consultant

Date

Approved By:

Russell Misiak

4/17/26

Russell B. Misiak
Area Manager

Date