



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 #:	AS440419633 REM Michigan Branch 4781 North Branch Road North Branch, MI 48461
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Dear Laura 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 (517) 643-7960.

Sincerely,

Susan Hutchinson, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(989) 293-5222

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS440419633
Applicant Name:	REM Michigan LLC
Applicant Address:	6185 Tittabawassee Rd. Suite 1 Saginaw, MI 48603
Applicant Telephone #:	(989) 791-7174
Administrator/Licensee Designee:	Laura Hatfield-Smith/Laura Hatfield-Smith
Name of Facility:	REM Michigan Branch
Facility Address:	4781 North Branch Road North Branch, MI 48461
Facility Telephone #:	(989) 791-7174
Application Date:	06/02/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

06/02/2025	Enrollment
06/02/2025	PSOR on Address Completed
06/02/2025	Inspection Report Requested - Health Invoice#: 1035092
06/02/2025	File Transferred To Field Office
06/06/2025	Application Incomplete Letter Sent
06/16/2025	Inspection Completed-Env. Health : B
07/23/2025	Inspection Completed On-site
07/23/2025	SC-Inspection Completed On-Site
07/23/2025	Application Incomplete Letter Sent
02/20/2026	SC-Application Received - Original
03/31/2026	Application Complete/On-site Needed
04/16/2026	Inspection Completed-BCAL Full Compliance
04/16/2026	PSOR on Address Completed No hits
04/16/2026	SC-Recommend MI and DD
04/16/2026	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

REM Michigan Branch is located at 4781 North Branch Road in the township of North Branch, North Branch, Michigan. The home and land are owned by Clarity Branch, LLC who is leasing the home and land to REM Michigan, LLC. The lease commenced on 02/01/26 and was signed for a period of three years with the option to release. The owner of Clarity Branch, Paul Chaveriat, provided a statement giving REM Michigan, LLC permission to occupy this residence, operate an Adult Foster Care facility on the premises, and permission for Licensing and Regulatory Affairs to inspect the home. There is ample parking for residents, staff, and visitors.

This facility is currently licensed as ResCare Premier Branch which is a small group home under License #AS440415941. ResCare Premier sold its AFC businesses to REM Michigan, who is the applicant.

Due to the facility's location, it utilizes both private sewer and a private well which were both inspected by The Lapeer County Health Department on 06/16/25 and were given a "B" rating. The deficiencies noted in the report stated that vacuum breakers on the shower hoses that have nozzles that can lay below the tub trim needed to be installed. The licensee designee, Laura Smith, stated that the breakers were installed immediately after receiving the EHI report. The EHI report determined that the remainder of the facility is in compliance with all applicable environmental health and safety rules.

This is a ranch-style, 2,280 sq. ft manufactured home built in 2002. There is a full basement which has a direct walkout to the backyard. The basement is constructed of cinder block walls, drywall, and a drop ceiling. It is not intended for resident use. The home is located on a large piece of land, just outside the city of North Branch. The facility consists of a laundry & medication room, kitchen, dining room, large living room, five bedrooms and three full bathrooms. All three bathrooms have a shower and/or tub and are equipped with safety bars. One of the bathrooms is between Bedroom #2 and #3 and is intended to be used by the occupants of those rooms. The other two bathrooms are commonly located and intended for all residents' use. The interior finishes of the home meet the requirements of R 400.14503. This home is not wheelchair accessible.

The kitchen is in the center of the home and is fully equipped. The refrigerator and freezer are equipped with thermometers as is the overflow refrigerator and freezer in the basement. The oven/stove has an appropriate hood fan. The dining and living rooms have ample seating for all residents. The double-occupancy bedroom has a wardrobe and dresser for each resident. The other four bedrooms have large, walk-in closets. All bedrooms are adequately furnished and suitable for resident use.

There are three independent, unobstructed means of egress, leading to the outside of this facility. The first exit is located at the west end of the facility and leads to a deck which has handrails on open sides of the steps. The second exit is off the north end of the living room and consists of sliding glass doors. This exit is not considered an emergency exit. The third exit is off the south end of the living room and leads to a deck which has handrails on open sides of the steps. The first and third exits are noted in the facility's evacuation plan. All exit doors and occupied doors are equipped with positive-latching, non-locking-against-egress hardware.

There is a fireplace in the living room which has been disabled. Additionally, the fireplace is blocked off with a large piece of plexiglass to ensure it cannot be used. The washer and dryer are in the laundry/medication room as is the hot water heater and furnace. The dryer has a solid metal vent, which is directly vented to the outside. The laundry room is enclosed with a 1 ¾ inch solid core door, with a 1-hour fire resistance

rating and is equipped with an automatic self-closing device and positive latching hardware. This room will be kept locked. On 03/02/26, the furnace and hot water heater were inspected by Michael McClelland, licensed inspector with Michael McClelland Maintenance & Repair out of Lapeer, Michigan and were deemed to be in safe working condition.

The basement of the facility is not intended for resident use and does not include any heat-producing equipment. The facility is equipped with an interconnected hard wired smoke detection system with battery back-up and is fully operational. Fire extinguishers are located on each floor of the facility and smoke detectors are in all bedrooms, in the basement, kitchen area, as well as other locations throughout the facility. The licensee intends to keep the facility's cleaning supplies in an area that is not accessible to residents.

The bedrooms have the following dimensions:

Bedroom	Room Dimensions	Total Square Footage	Total Resident Beds
#1	11'3" x 11'2"	126	1
#2	10'11" x 11'2"	122	1
#3	11' x 11'2"	123	1
#4	10'7" x 12'8"	135	2
#5	10'4" x 12'8"	131	1

The living and dining room areas measure a total of 711 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 **six (6)** residents. Bedroom #4 is suitable for two residents, and the rest of the bedrooms are single-occupancy rooms.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, emergency preparedness plans, and standard procedures were reviewed and accepted as written.

The applicant intends to provide 24-hour supervision, protection and personal care to **six (6)** male or female ambulatory adults whose diagnosis is physically handicapped, developmentally delayed and/or mentally ill in the least restrictive environment possible.

The program will promote independence and social interaction by assisting residents with cooking and cleaning skills, self-care, public safety skills, life skills training support, personal hygiene, and personal adjustment skills. The licensee will promote group activities and outings, house meetings, and will provide companionship and emotional support to combat isolation and depression. The applicant's program will also provide

individualized support adapted to each resident's cognitive and emotional needs, coordination with providers and outside agencies, structured daily routines that provide stability while encouraging skill building, behavioral support planning, and facilitation of community integration based on individual abilities and goals.

If required, behavioral intervention and crisis intervention programs and personal behavior support plans will be developed and identified in the assessment plan for each resident's social, behavioral, and developmental needs and designed and implemented specific to each resident. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The applicant intends to accept residents from county community mental health agencies as referral sources. The applicant shall provide or arrange transportation services as agreed upon in the Resident Care Agreement, but shall ensure immediate emergency transportation through use of a recognized available community service or vehicle that is owned by the licensee, administrator, or direct care staff on duty

The applicant will make provisions for a variety of leisure and recreational equipment. It is the intent of the applicant to utilize local community resources including libraries, local museums, shopping centers, and local parks for additional entertainment and leisure activities.

C. Applicant and Administrator Qualifications

The applicant is REM Michigan, LLC which is a Foreign Limited Liability Company, established in Michigan on 12/16/2024. The applicant has acknowledged sufficient financial resources to provide for the adequate care of the residents. 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 members of REM Michigan, LLC have submitted documentation appointing Laura Hatfield-Smith as Licensee Designee and Administrator for this facility. A licensing record clearance request was completed with no LEIN convictions recorded for Laura Hatfield-Smith. The licensee designee submitted a medical clearance with a statement from a physician documenting her good health and a baseline screening for communicable diseases dated 12/10/2025.

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 6-bed facility is adequate and includes a minimum of 2-staff-to-6 residents during the day and 1-staff-to-6 residents during the night. 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 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 recording each resident's funds and itemized transactions including payment for services. The applicant acknowledges this document will be created for each resident to document the date and amount of the adult foster care service fee paid each month and all the residents' 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.

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.

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small group home with a capacity of six (6).

Susan Hutchinson

April 16, 2026

Susan Hutchinson
Licensing Consultant

Date

Approved by:

Mary Holton

April 16, 2026

Mary E. Holton
Area Manager

Date