



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
FAMILY INDEPENDENCE AGENCY
OFFICE OF CHILDREN AND ADULT LICENSING



MARIANNE UDOW
DIRECTOR

March 30, 2004

June Thompson
Devonshire Retirement Village, LLC
11571 E. Fulton
Lowell, MI 49331

RE: Application #: AL440257936
Devonshire Retirement Village
101 Devonshire Drive
Lapeer, MI 48466

Dear Ms. Thompson:

Attached is the Original Licensing Study Report for the above referenced facility. You have submitted an acceptable written corrective action plan on March 26, 2004 covering the violations cited in the report. 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 feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (586) 412-6802.

Sincerely,

Karen LaForest, Licensing Consultant
Office of Children and Adult Licensing
Suite 301
16000 Hall Road
Clinton Township, MI 48038
(586) 412-6835

enclosure

**MICHIGAN FAMILY INDEPENDENCE AGENCY
OFFICE OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AL440257936
Applicant Name:	Devonshire Retirement Village, LLC
Applicant Address:	11571 E. Fulton Lowell, MI 49331
Applicant Telephone #:	(616) 897-0200
Administrator/Licensee Designee:	June Thompson, Designee
Name of Facility:	Devonshire Retirement Village
Facility Address:	101 Devonshire Drive Lapeer, MI 48466
Facility Telephone #:	(810) 245-7646
Application Date:	06/10/2003
Capacity:	20
Program Type:	Aged

II. METHODOLOGY

06/10/2003	Enrollment
07/29/2003	Inspection Completed-Fire Safety : B
07/31/2003	Inspection Report Requested - Health
08/04/2003	Comment. Application rec'd from Lansing
08/21/2003	Comment. File to Macomb office
09/08/2003	Inspection Report Requested - Fire
09/09/2003	Contact - Document Sent. Sent letter with Fire Report to make corrections and to submit a corrective action plan.
03/04/2004	Inspection Completed On-site
03/22/2004	Inspection Completed On-site
03/22/2004	Corrective Action Plan Received
03/22/2004	Corrective Action Plan Approved
03/24/2004	Contact - Telephone call made. Consultant contacted D. Wells; administrator to inform her that consultant did not receive the correct environmental report. The sanitarian sent the report with 105 Devonshire, license #AL440263405. Ms. Wells said she must have mixed up the paperwork, as he did not go on the specialized care facility, only this facility. She will contact him and inform him.
03/25/2004	Inspection Completed-Env. Health : A
03/24/2004	Inspection Completed-Fire Safety : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Devonshire Retirement Village is a newly built, twenty bed facility located on one level at 101 Devonshire in Lapeer, Michigan. Approximate square footage is 14, 588 square feet. The building is brick and vinyl sided. It contains twenty bedrooms (with three different floor plans), that include a bathroom in each bedroom and a living area, a library at the front entrance, a lounge, a game room, a large dining room area with a small attached kitchenette, an office for staff and a laundry room. There is a connecting hallway that leads to the second building, Devonshire Retirement Village Specialized Care, connected by a large commercial kitchen, staff lounge, and beauty salon.

A temporary certificate of occupancy was issued from the City of Lapeer on March 16, 2004. The facility will utilize the local municipality's public water and sewage system. The licensing consultant conducted two inspections at the facility; a preliminary inspection done on March 4, 2004 and a final inspection conducted on March 22, 2004. The Lapeer environmental health department gave full approval on March 23, 2004 regarding general sanitation and safety. The office of Fire safety gave full approval on March 16, 2004.

During the preliminary and final inspections, Ms. Renaldi and Ms. Wells, both Administrators for Leisure Living Companies, accompanied the consultant on a physical plant inspection. One resident will individually occupy all bedrooms unless otherwise requested such as a married couple. Bedrooms 1, 2, 3, 10, 11, 12, 14, 19 and 20 are studio bedrooms with full bathrooms and measured 15'8" x 8'4" plus 8'4" x 9' or 205.46 square feet. Bedrooms 5, 6, 7, 8, 16 and 17 are one bedrooms separated by the bedroom, living area, and full bath and measured 10'11" x 20'2" plus 7'10" x 9' 9 1/2" or 292.92 square feet. Bedrooms 4, 15, and 18 are one bedroom deluxe with a bedroom, walk-in closet, full bathroom, separate living area and a kitchenette with a sink, cupboards, microwave, refrigerator, and measured 15'8" x 15'3" (living room) plus 15'7" x 11'10" minus 8'5" x 6'6" or 368.40 square feet. There is a barrier free in design studio handicap bedroom, 13, that measured 15'8" x 10' plus 7'5" x 6'3" or 202.98 square feet. There is a one bedroom deluxe handicap bedroom that measured 15'8" x 15'3" (living area) plus 15' x 9'7 1/2" (bedroom) or 383.12 square feet. All the above twenty bedrooms have adequate space to accommodate twenty residents and meet compliance with Rule 400.15409 (3) or the minimum square footage of 80 square feet.

The library at the front entrance measured 16' x 21'6" or 344 square feet. The lounge measured 14'7" x 21'6" or 313.47 square feet. The game room measured 13'10" x 12'6" or 172.85 square feet. The dining room/kitchenette measured 23'8" x 19' or 449.54 square feet. The combined total square footage of indoor living space is 1279.86 square feet, meeting compliance with Rule 400.15405 (1) (700 square feet total of 20 residents times 35 square feet per resident).

The facility is nicely furnished and decorated. The dining room area has several dining tables to accommodate all residents. The game room and library have chairs and couches with bookshelves for reading material. There are washers and dryers in the laundry room. Each bedroom is furnished with a twin bed, chair dresser, mirror, mattress pads, two sets of sheets and pillowcases, pillows, blanket, and bedspread. The corporate administrator stated that several interested residents expressed they will bring their own beds and furniture upon placement.

Medications will be locked in a medication room and will be separated from internals and externals. Poisonous and caustic materials will be locked and stored away from food preparation areas. Soap was located in each bathroom. Handrails were located in each shower in the bathrooms and the corporation submitted documentation that the shower floor surface is textured and slip resistant. The kitchen is a commercial style kitchen to service both Devonshire Retirement Village and Devonshire Retirement Village Specialized Care buildings. The environmental health department gave full approval of this kitchen.

B. Program Description

Devonshire Retirement Village, LLC submitted licensing application materials on August 4, 2003 for an original license issuance. This limited liability company indicates the facility will accept both females and males, 60 years or older, that are elderly. The applicant's proposed capacity is twenty residents.

The following documents for the limited liability company have been submitted: listing of members of ownership; licensee designee to act on behalf of the company; appointed administrator to oversee daily operation of the facility (reference letter dated January 5, 2004); legal documents filed March 26, 2003 identifying Devonshire Retirement Village as a limited liability company including articles of organizations and certificate of good standing; the organizational chart; list of company owners; personnel policies (employee handbook); and job descriptions.

Ms. June Thompson is the licensee designee and is authorized to conduct business and make decisions on behalf of the corporation. Ms. Darlene Wells is appointed as the administrator to oversee day-to-day operations of the facility. Both individuals are qualified to work with the elderly population. Both individuals have also submitted evidence they are in good physical and mental health via medical clearances and tuberculin tests (Ms. Thompson's physical is dated April 1, 2004 and the tuberculosis test with negative results was done on December 19, 2001; Ms. Well's physical is dated December 16, 2001 and her tuberculosis test is dated December 18, 2003). Ms. Thompson and Ms. Wells submitted documentation verifying their training and experience with the population to be served. Ms. Wells had a criminal history check dated January 9, 2004 and Ms. Thompson had a criminal history check dated July 28, 2003 that confirmed both of these individuals are of good moral character.

Three employee records were reviewed at the final inspection on March 22, 2004. Employee records contained the following: the employment application, work experience and education, copies of driver's license verifying age, hire date, employee receipt of written job description and personnel policies, criminal history verifying good moral character, reference checks, medical documentation signed by a physician verifying good physical and mental health, tuberculin testing with results, and training in reporting requirements, resident rights, prevention and containment of communicable diseases, fire and safety prevention, first aid and CPR, and personal care, protection and supervision (Public Act 218 of 1979, as amended). Employees 2 and 3 did not have evidence of training in their file.

The company submitted copies of the following facility records: Admission and Discharge policies; floor plan with measurements; proposed staffing schedule; emergency repair telephone numbers; designated person in the absence of the administrator; house rules; severe weather, fire, and emergency medical written procedures; program statement; training plan for staff, policies and procedures manual; personnel policies; job descriptions; the fee policy and refund policy; and financial document specifying revenue and expenses expected for the first year. The company also submitted the resident handbook and the training curriculum to be utilized with staff. The facility also presented to the consultant sample menus to be used.

At the final inspection, the consultant reviewed with the administrator the necessary resident records that are required for licensing and provided the forms. The following documents were reviewed with the administrator: resident care agreements; assessment plans; resident information and identification forms; weight records; resident health care appraisals; accident and incident reports; physician contact logs; and resident funds and valuables Part I and Part II. The consultant will review resident records prior to the expiration of the temporary license date to ensure compliance with administrative rule 400.15316.

C. Rule/Statutory Violations

R 400.15204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.
- (b) First aid.
- (c) Cardiopulmonary resuscitation.
- (d) Personal care, supervision, and protection.
- (e) Resident rights.
- (f) Safety and fire prevention.
- (g) Prevention and containment of communicable diseases.

During the final inspection it was noted that employees 2 and 3 did not have evidence of training in the above areas in their files. Report when these individuals will be trained and when their training will be in their files.

R 400.15208 Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

- (a) Name, address, telephone number, and social security number.
- (b) The professional or vocational license, certification, or registration number, if applicable.
- (c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.
- (d) Verification of the age requirement.
- (e) Verification of experience, education, and training.
- (f) Verification of reference checks.
- (g) Beginning and ending dates of employment.
- (h) Medical information, as required.
- (i) Required verification of the receipt of personnel policies and job descriptions.

Ensure that all employee personnel files are complete and contain the following information, including employees hired subsequent to this final inspection.

R 400.15411 Linens.

(1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillowcase, a minimum of 1 blanket, and a bedspread for each bed. Bed linens shall be changed and laundered at least once a week or more often if soiled.

At the final inspection, the facility did not have the necessary second set of bed sheets and some mattress pads. They are currently on order and expected to arrive sometime this week. Report, in writing, that the second set of sheets and additional mattress pads required have been received.

On March 26, 2004 this consultant received an acceptable plan of correction verifying all the above rule violations have been corrected.

IV. RECOMMENDATION

It is recommended that a temporary license be issued to the applicant, Devonshire Retirement Village, Inc. for a facility known as Devonshire Retirement Village located at 101 Devonshire, Lapeer, Michigan 48446, license number #AL440257936. The temporary license is effective for six (6) months from the date of the issuance date.

Karen LaForest Date
Licensing Consultant

Approved By:

Candyce Crompton Date
Area Manager