



JENNIFER M. GRANHOLM
GOVERNOR

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



MARIANNE UDOW
DIRECTOR

July 21, 2004

Groveland Quality Care LLC
Doreen Breakie
4770 Groveland Road
Ortonville, MI 48462

RE: Application #: AS630261635
4770 Groveland Road
Ortonville, MI 48462

Dear Doreen Breakie:

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 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 (248) 975-5053.

Sincerely,

John Pochas, Licensing Consultant
Office of Children and Adult Licensing
Suite 358
41000 Woodward
Bloomfield Hills, MI 48304
(248) 975-5085

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS630261635

Applicant Name: Breakie, Doreen and Breakie, Paul

Applicant Address: 4770 Groveland Road
Ortonville, MI 48462

Applicant Telephone #: (248) 627-6876

Administrator/Licensee Designee: Doreen Breakie

Name of Facility: Groveland Quality Care LLC

Facility Address: 4770 Groveland Road
Ortonville, MI 48462

Facility Telephone #: (248) 627-6876

Application Date: 10/09/2003

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

II. METHODOLOGY

10/09/2003	Enrollment
10/15/2003	Inspection Report Requested - Health
10/27/2003	Inspection Completed-Env. Health: A
03/17/2004	Inspection Completed On-site
04/26/2004	Inspection Completed On-site
06/24/2004	Contact - Document Received Various documents, policies that were requested were 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 governing operation of small group adult foster care facilities with an approved capacity of 1-12 residents, licensed or proposed to be licensed after 5/24/94.

The following is a report of findings of the pre-licensing evaluation for Groveland Quality Care LLC.

A. Physical Description of Facility

1) Environmental Conditions

Groveland Quality Care LLC is located at 4770 Groveland Road, Ortonville, Michigan 48462. The home is situated on the east side of Groveland Road just north of Grange Hall Road, in Oakland County, Michigan. Paul and Doreen Breakie are the owners of record for the property located at 4770 Groveland Road. Proof of Ownership is contained in the facility file.

Groveland Quality Care LLC is a spacious ranch with a finished lower level, containing required exits. The homes in the area are a mix of older and some new construction in this rural like community. The home sits on a large open field to the rear and landscaped yard to the front. The interior of the home is comfortable, clean, and nicely decorated.

The main entrance opens into a large living room to the right and a dining area straight ahead. The kitchen is to the left of the dining area. A series of 4 bedrooms are located

to the left, which are to be occupied by family members. A full and ½ bath is located on this level. A gas-fired furnace is located in the lower level in an enclosed room, which also contains the washer and dryer. The room has a separation wall of 5/8 drywall and a solid core wood door with self – closing device.

Resident bedrooms were measured at the time of initial inspection and were found to be of the following dimensions and accommodation capability:

<u>BEDROOM</u>	<u>DIMENSIONS</u>	<u>SQ. FOOTAGE</u>	<u>OCCUPANCY</u>
Bedroom # 1	12.10 X 12.4	150	2
Bedroom # 2	12.2 X12.11	148	2
Bedroom # 3	15.X 10.11	151	2
Total Occupancy:			6

Compliance with rule R400.14409 (6) was demonstrated at the time of final inspection.

Based upon the above information, this facility has the square footage necessary to accommodate up to 6 adults, as requested in the application.

The living space for the home was measured and is listed below:

The home has a large living room that measures 37 X 13, a dining area that measures 15.6 X 14.8, and a kitchen that measures 18.3 X 11.11. The proposed capacity for the home is 6. Based upon the above measurements, there will be more than the required 35 square feet per resident minimal living space available for the residents of the home.

The bedrooms were properly furnished, clean, and neat. Each bedroom has an easily operable window with screen, a mirror for grooming and a chair. The bedrooms all have adequate closet space for the storage of clothing and personal belongings. The bedrooms also have adequate lighting to provide for the needs of the staff and residents. The shower and bathtub area is equipped with required non-skid surfacing and handrails, to assure resident safety in the maintenance of personal hygiene. The bathrooms were equipped with soap and paper towels for hand washing. I also observed that the facility was equipped with all required furnishings, linens, cooking and eating utensils.

Based on the above information and observations, I found the facility to be in substantial compliance with Departmental requirements regarding environmental conditions.

Groveland Quality Care LLC has private water and sewage services. These were found to be in compliance during Environmental Health Inspection. Garbage disposal is supplied through the licensee, who as a building contractor has access to dumping sites. The kitchen and bathroom areas were evaluated, and were found to be adequately equipped and in clean condition. All necessary appliances were present at the time of final inspection. Poisons and caustics will be stored in a secured area not

used for food storage or preparation. The home has adequate food storage capacity. The refrigerator was equipped with thermometers to monitor the temperature of food storage. Water temperature was tested at the time of final inspection and found to be within the acceptable range as defined by rule R 400.14401(2). The home also met the minimum requirements regarding food service (R 400.14402) and maintenance of premises (R 400.14403). Laundry facilities are located in a separate room in the lower area of the home. The washer and dryer were properly installed and the dryer vent was made of acceptable non-combustible material.

2. Fire Safety

The licensee installed a fully integrated hard wired smoke detection system to meet the requirements of R 400.14505. The smoke heads are placed as required by the rule. The home has heat heads in the furnace room and kitchen area. The home also has several fire extinguishers located on the main floor, which meet the requirements of R 400.14506. The home has more than two means of egress from the main floor and lower level and the exit doors all meet the requirements of rules R 400.14507 and R 400.14509. The bedrooms of the home also have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.14502, R 400.14503, and R400.14504.

The home has two separate and independent means of egress to the outside as required by R400.14507. The means of egress were measured at the time of final inspection and meet the 30-inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom doors have conforming hardware.

A gas forced air system heats the facility. The furnace was recently inspected and the licensee supplied a copy of the report for review at the time of the final inspection. The furnace and the gas hot water heater are located in the lower level. The licensee was advised that water temperature should be monitored on a regular basis. The water temperature was tested at the final inspection and found to be in compliance with the rule R 400.14401(2). I also found the electrical service (circuit breaker panel) to be adequate and in safe condition at the time of final inspection. The home was found to be in compliance with rules relating to interior finish, smoke detection equipment, fire extinguishers, means of egress, both generally and for bedrooms, heating equipment, flame producing equipment; enclosures, and electrical service.

I reviewed the facility's emergency procedures, which contain written instructions to be followed in case of fire, and medical emergency. Evacuation routes were also posted in the facility, with emergency telephone numbers posted in proximity to the telephone. The home had its emergency preparedness plans posted as required. The home has emergency medical services available through the Groveland Township. The licensee understands the Departmental requirements relating to the maintenance of fire drill records with the licensee. The licensee has indicated that it is the licensee's intent to

conduct fire drills at least on a monthly basis, one per shift per quarter, as well as to maintain a record of these fire drills, and resident performance during such drills.

Based upon the above observations and information, I found this facility to be in substantial compliance with administrative rules pertaining to emergency preparedness and fire safety.

B. Program Description

1) Program Statement

The licensee submitted a copy of the program statement to the Department for review and inclusion in the licensing record. The document is acceptable as written. The facility will offer a program and services for male and female adults with Developmental Disabilities. According to the program statement, the goal of the program is to maximize the functioning of each resident's capability and condition. Self care and daily living skills will be promoted through on-going guidance in the areas of dressing, grooming, nutrition, supervision, protection and use of community resources. All transportation will be provided to facilitate that residents assessment plan requirements (within a 25 mile radius).

2) Required Information

On 10/20/03, the Department received a license application and application fee from Ms.Doreen Breakie, acting on behalf of Groveland Quality Care, LLC, to operate a small group AFC facility at the above referenced address in Ortonville, Michigan. The filing endorsement from the Department of Consumer and Industry Services has a filing date of 4/06/2004. The applicant is seeking to operate a program for developmentally disabled men and women.

As part of the application process the licensee submitted admission, discharge policies for the Groveland Quality Care LLC home. The documents are acceptable as written. Also included in the Department files are a proposed staffing pattern, a current organizational chart, a proposed budget, a floor plan with room use and size specifications, and current financial documents. As part of the licensing process, the licensee presented personnel policies, routine procedures, and job descriptions for review during the final inspection. The documents are kept in the home and are available for review.

The administrative structure for Groveland Quality Care LLC is as follows:

President: Doreen Breakie
Vice President: Paul Breakie
Direct Care Staff

A Records Clearance Request has been processed for Mr. and Mrs. Breakie. Based upon the information from the Record Clearance Report, I find that they are of good moral character, sound judgment, and are suitable to provide care to dependent adults. A current Licensing Medical Clearance form for Mr. and Mrs. Breakie as well as both their daughters, Laura Beth and Renee, are contained in the record. The form indicates that they are in good physical and emotional health, and there is no reason why they should not be involved in the operation of this facility, and the provision of adult foster care. A current negative TB test is also on file with the Department. The licensing file also contains a written statement from Groveland Quality Care LLC, naming Mrs. Breakie, the licensee designee.

As referenced above Mrs. Breakie submitted, on behalf of Groveland Quality Care LLC, financial information as part of the new application process. The applicant submitted a current balance sheet as well as a projected budget. Based on the information presented, I have determined that the applicant corporation has demonstrated a stable financial position and possesses the financial capability to operate an adult foster care facility at the above referenced location.

3) Qualifications and Competencies

The licensee designee, Mrs. Doreen Breakie, has been involved in providing Adult Foster Care services to developmentally disabled individuals for over 17 years and has been administrator and owner of Hill Top AFC and Doreen's AFC, respectively. Based on her previous experience, Mrs. Breakie has demonstrated that she has the administrative and management expertise to run the Adult Foster Care facility. Based on personal contact and materials submitted I conclude that Mrs. Breakie has demonstrated her competency as required by the rule R 400.14201.

At the time of the final inspection, Mrs. Breakie indicated that there were no changes to report in information previously submitted in this application for a license. The licensee was advised of Departmental requirements relating to changes in information, as outlined under administrative rule R400.14103 (5), and has indicated that it is the intent of the corporation to assure continued compliance with this rule. The licensee was also reminded of Departmental requirements pertaining to posting of the license as outlined under rule R400.14103 (4), and has indicated that it is their intent to maintain compliance with this requirement.

Based on the above information, I have determined that Mrs. Breakie is in substantial compliance with rule R400.14103 regarding required information and reporting changes, and rules R400.14201, R400.14202, and R400.14205 regarding qualifications and health of the Licensee.

As required by the rule R400.14202, the home has a designated administrator. Mrs. Doreen Breakie will act as administrator for the Groveland Quality Care LLC. Based on the information submitted and information reviewed in the home at the time of the final

inspection, Mrs. Breakie meets the requirements of the rules and is qualified based on her background and training to act as administrator for Groveland Quality Care LLC.

The licensee understands that in accordance with rules R 400.14307, R 400.14308, and R 400.14309 regarding behavior intervention and crisis intervention, individual intervention programs will only be used at the least restrictive level necessary as defined in the individual plan of service. Only trained staff shall implement such programs. Facility staff will not utilize seclusion or restraints. Documentation of the implementation of any behavior management program will be maintained in the facility and will be available at all times for Departmental review.

As mentioned above, the applicant submitted copies of the proposed admission and discharge policies to the Department for review, and inclusion in the licensing record. I have reviewed the documents and determine that they do not conflict in content or intent with current rules and are therefore acceptable as written. A copy of the proposed staffing pattern is contained in the licensing file. The proposed staffing pattern appears to meet the care requirements of the proposed population described in the home's program statement and the minimum requirements of rule R 400.14206.

Individuals, who are interested in placement into the Groveland Quality Care LLC, should contact Mrs. Breakie at the facility. The licensee also understands that the facility will conduct it's own evaluation and written assessment of any individual who is referred for placement. The purpose of this assessment is to judge whether the individual fits the criteria established in the home's program statement and is compatible with the current residents. A resident care agreement and a current health appraisal are also required at the time of admission. Based upon the above information, the facility is found to be in substantial compliance with requirements of rule R400.14302 pertaining to admission and discharge.

4) Facility and Employee Records

I have reviewed Groveland Quality Care 's personnel policies contained in the licensing file. I have determined that they do not conflict with statutory or administrative rule requirements. The job descriptions for Breakie AFC were reviewed and were submitted to the department. They are acceptable as written. I have also discussed with the licensee the good moral character requirements as related to the hiring of staff. I have reviewed the process that the corporation follows and find it meets the intent of the administrative rules. The licensee is well aware of the requirements for employee records based on previous experience in Adult Foster Care.

a) Facility Records in General (Rule R400.14209)

The resident care agreement proposed for use in this facility is the current Department resident care agreement. Departmental requirements pertaining to maintaining a resident register, as required under rule R400.14210 have been discussed with the licensee and the licensee indicates that it is the intent of the licensee to comply with this

requirement. Copies of required Department forms were also given to the home administrator during the course of the pre-licensing period. The applicant indicated that she understands the Department requirements for record keeping.

Home menus have been discussed and the applicant/home administrator understands the requirements set forth in rule R400.14313; and has indicated that the home will meet the requirement with respect to nutrition and menus as stated in the rule. Mrs. Breakie has been advised that all working menus are to be dated, prepared in advance, and that any changes or substitutions may be reflected on the working menus. Menu records are to be maintained in the facility for a period of one year. The licensee was also advised that a licensed physician must order any special diets implemented in the home.

b) Employee Records (rules R400.14204 and R400.14208)

Based on the licensee's previous experience, the licensee is well aware of the requirements for staff qualifications and training and intends to comply with the rules. The licensee understands that all employees must submit to a pre-employment physical, which includes a TB tine test. The results of the test are obtained before employment begins. The licensee will also verify age and checks references before a person is offered employment. The licensee provides an orientation and training of its own relating to reporting requirements, emergency procedures, prohibited practices, resident rights, and personal care, protection, and supervision required in adult foster care. Each employee must complete certified training in First Aid and CPR. Evidence of staff training will be maintained in the employee records for future Departmental review. Based upon our conversation at the time of inspection, the administrator understands and intends to comply with the requirements of rules R400.14204 and R400.14208.

5) Resident Care, Services, and Records

Departmental requirements pertaining to resident records as specified in rule R400.14316 were discussed with the administrator. The administrator has indicated that it is the corporation's intent to comply with these requirements. During the course of the pre licensing investigation, I advised the licensee designee of Departmental requirements pertaining to resident rights and prohibited practices as outlined under rules R400.14304 and R400.14308. The licensee attests that it is the intent of the corporation to achieve and maintain compliance with these requirements. The licensee has been supplied with a supply of the required Department forms as well as copies of the resident rights pamphlet for distribution to staff, residents, and families.

Also discussed, were Departmental requirements pertaining to incident and accident reports, as outlined under rule R400.14311 and the requirements for safeguarding and distributing of prescription medication as outlined in rule R400.14312. The licensee has again indicated that it is her intent to achieve and maintain compliance with these requirements. I determined that the facility was in substantial compliance with

