

# STATE OF MICHIGAN DEPARTMENT OF HUMAN SERVICES OFFICE OF CHILDREN AND ADULT LICENSING



November 9, 2005

Ms. Kelly Bellmore, Administrator Pinecrest MCF Board PO Box 603 Powers, MI 49874

RE: Application #: AS210278290

Whispering Pines Gladstone

416 S 17th Street Gladstone, MI 49837

Dear Ms. Bellmore:

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 Deborah Clark, Area Manager, at (906) 228-0780.

Sincerely,

Theresa Norton, Licensing Consultant Office of Children and Adult Licensing 305 Ludington St Escanaba, MI 49829 (906) 789-4606

enclosure

## MICHIGAN DEPARTMENT OF HUMAN SERVICES OFFICE OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

#### I. IDENTIFYING INFORMATION

**License #**: AS210278290

**Applicant Name:** Pinecrest MCF Board

Applicant Address: Main Street

Powers, MI 49874

**Applicant Telephone #:** (906) 497-5445

Administrator/Licensee Designee: Kelly Bellmore

Name of Facility: Whispering Pines Gladstone

**Facility Address:** 416 S 17th Street

Gladstone, MI 49837

**Facility Telephone #:** (906) 497-5580

**Application Date:** 07/07/2005

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

#### II. METHODOLOGY

| 07/07/2005 | Enrollment  |
|------------|---|
| 07/12/2005 | Application Incomplete Letter Sent Informing applicant that corporation can't be found on Corporation Division's website. |
| 08/25/2005 | Contact - Document Received<br>Letter stating licensee is a government agency not a corporation.                          |
| 10/14/2005 | Inspection Completed On-site  |
| 10/20/2005 | Contact - Face to Face Inspection completed on-site.  |
| 11/04/2005 | Inspection Completed-BFS Full Compliance  |
|            | Contact - Document Received Final floor plan and documents received.  |
|            | Contact - Telephone call received Call from Home Manager.   |
| 11/08/2005 | Inspection Completed-Fire Safety: A   |

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The facility is located within the city limits of Gladstone. The building is a single story construct and is serviced by municipal water and sewage. The facility is a barrier-free, single story home with a central living area. The central living area has a large living/visiting room, the kitchen and a dining area. The facility meets the requirement of Rule 400.15405(8) regarding dining space for residents.

On each side of the central area are resident bedrooms and two full bathrooms. The bedroom units have the following dimensions:

| Bedroom #1 | 164 sq. ft. | Approved Capacity 2 |
|------------|-------------|---------------------|
| Bedroom #2 | 139 sq. ft. | Approved Capacity 2 |
| Bedroom #3 | 135 sq. ft. | Approved Capacity 1 |
| Bedroom #4 | 96 sq. ft.  | Approved Capacity 1 |

Based on the above information, this facility has the square footage necessary to accommodate up to six residents as requested in the application. The facility is fully equipped with required furnishings, linens and dishware.

A final electrical inspection was completed 11/09/2005 and full approval was granted. This consultant conducted a final fire safety and environmental inspection on 11/04/2005, and the facility was found in full compliance with the applicable rules.

#### **B.** Program Description

Whispering Pines Gladstone is committed to providing a safe, comfortable and suitable environment for adults with severe developmental disabilities who require training, active treatment, and 24-hour care. The purpose of Whispering Pines Gladstone is:

- 1) To provide individuals with developmental disabilities a safe and supportive home environment.
- 2) To provide opportunities for community involvement.
- 3) To offer person-centered programs to enhance life skills through active treatment, and
- 4) To provide medical treatment necessary to promote good health.

The overall objective of Whispering Pines Gladstone is to help the residents develop personal self-help skills and to become active participants in the community. Whispering Pines Gladstone will use a person-centered, outcome driven, program and will partner with community resources to establish a strong support system to meet the needs of each of the residents. The local support system will include, but is not limited to, churches, the medical community, retail stores, libraries, educational facilities, the senior center, etc.

Pinecrest MCF has submitted an acceptable staffing pattern schedule for the home. Direct care staff are being hired and trained to work in the facility. Acceptable personnel policies and job descriptions were received demonstrating compliance with Rule 400.15206 and Rule 400.15207. Pinecrest MCF agrees to conduct criminal background checks on all employees.

Facility menus are written by a registered dietitian and reflect three well-balanced, and nutritious meals daily. The licensee designee is aware of and intends to comply with the provision of special diets that may be required for any resident.

The Pinecrest MCF Board is aware of the responsibility to safeguard resident funds and valuables. The licensee designee is familiar with Rule 400.14315, and has agreed to comply with the administrative rules in this section of the licensing rules for Small Group AFC Rules.

| C.  | C. Rule/Statutory Violations  |  |
|-----|---|--|
|     | None.   |  |
|     |   |  |
| IV. | RECOMMENDATION  |  |
|     | I recommend issuance of a temporary license to this AFC adult small group hom (capacity 1-6). |  |
|     |   |  |
|     |   |  |
|     | Theresa Norton Date Licensing Consultant  |  |
| Ą   | Approved By:  |  |
|     | Deborah Clark Date<br>Area Manager  |  |