

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

BUREAU OF COMMUNITY AND HEALTH SYSTEMS

ADULT FOSTER CARE LARGE GROUP HOMES

(By authority conferred on the department of licensing and regulatory affairs by section 9 of the Executive organization act of 1965, 1965 PA 380, MCL 16.109, and sections 10 and 13 of the adult foster care facility licensing act, 1979 PA 218, MCL 400.710 and MCL 400.713, and Executive Reorganization Orders Nos. 1996-1, 1996-2, 2003-1, 2008-4, 2011-4, and 2015-1, MCL 330.3101, 445.2001, 445.2011, 445.2025, 445.2030, and 400.227)

PART 1. GENERAL PROVISIONS

R 400.15101 Scope.

Rule 101. This part applies to all adult foster care large group homes that are licensed or proposed for 13 to 20 persons.

History: 1994 AACCS.

R 400.15102 Definitions.

Rule 102. (1) As used in these rules:

(a) "Act" means the adult foster care facility licensing act, 1979 PA 218, MCL 400.701 to 400.737.

(b) "Administrator" means the individual that is designated by the licensee to be responsible for the daily operation and management of the adult foster care large group home. The administrator may be the licensee.

(c) "Admission policy" means a home's public statement of its purpose, eligibility requirements for admission, and application procedures for admission.

(d) "Assessment plan" means a written statement that is prepared in cooperation with a responsible agency or individual that identifies the specific care and maintenance, services, and resident activities appropriate for each individual resident's physical and behavioral needs and well-being and the methods of providing the care and services, taking into account the preferences and competency of the individual.

(e) "Assistive device" means the use of an item such as a pillow, pad, or medically supplied therapeutic support that is intended to achieve or maintain the proper position, posture, or balance of a resident. An assistive device may also be an item that is intended to promote, achieve, or maintain the resident's independence. Anything that is used with the intent to restrain a resident and that does not permit the resident to remove the device by himself or herself is a restraint and is not an assistive device.

(f) "Capacity" means the maximum number of residents that a home is licensed for.

(g) "Department" means the department of licensing and regulatory affairs.

(h) "Designated representative" means the individual or agency that has been granted written authority, by a resident, to act on behalf of the resident or that is the legal guardian of a resident.

(i) "Direct care staff" means the adult that is designated by the licensee to provide personal care, protection, and supervision to residents.

(j) "Discharge policy" means a home's written statement of the conditions and procedures that a resident is discharged from the home by.

(k) "Elopement" means a resident that has a service plan that requires notice or arranged supervision to leave the facility and is absent without notice or supervision.

(l) "Health care appraisal" means a licensed physician's, licensed physician assistant's, or registered nurse's statement that provides an assessment of the general physical condition of a resident.

(m) "Home" means an adult foster care large group home.

(n) "House rules" means those rules that are established by the licensee and that set expectations for resident conduct.

(o) "Incident" means an intentional or unintentional event where a resident sustains physical or emotional harm, unexpected or unnatural death, is displaced by a natural disaster, or elopes.

(p) "Isolation" means the complete and unattended separation of a resident from staff and other residents.

(q) "Members of the household" means all individuals that live in the home, exclusive of residents.

(r) "Occupants" means all individuals that live in the home.

(s) "Physical restraint" means the bodily holding of a resident with no more force than is necessary to limit the resident's movement.

(t) "Premises" means the home, grounds, and all other appurtenances.

(u) "Program statement" means a written description of the home's program that must, at a minimum, include the following:

(i) The population to be served.

(ii) Program goals, services, in addition to those provided in the home, and community resources to meet the residents' needs.

(iii) Services to be provided in the home to the residents, including a description of the types of staff competencies that are necessary to carry out these services.

(iv) A description of any contract agreement that services and programs are provided through.

(v) "Related" means any of the following relationships by marriage, blood, or adoption:

(i) Spouse.

(ii) Child.

(iii) Parent.

(iv) Brother.

(v) Sister.

(vi) Grandparent.

(vii) Aunt.

(viii) Uncle.

(ix) Stepparent.

- (x) Stepbrother.
- (xi) Stepsister.
- (xii) Cousin.
- (w) "Resident" means an adult, as that term is defined in section 3 of the act, MCL 400.703.
- (x) "Resident funds" means any money, securities, bonds, or stocks that are received by a licensee from, or on behalf of, a resident. Resident funds includes all of the following:
 - (i) Payment for adult foster care services.
 - (ii) Personal allowance.
 - (iii) Money held as a trust obligation.
 - (iv) Money in accounts with financial institutions.
- (y) "Responsible agency" means a public or private organization that, after written agreement with a resident or the resident's designated representative, provides either or both of the following:
 - (i) Assessment planning and the establishment of an individual plan of service.
 - (ii) Maintenance of ongoing follow-up services while the resident is in the home.
- (z) "Street floor" means any story or floor level that is accessible from the street or from outside the building at grade and, at the main entrance, is not more than 21 inches above, nor more than 12 inches below, street or grade level at those points.
- (aa) "Substantial risk" means that a resident's behavior poses a serious imminent threat of bodily harm to himself or herself or others or the threat of the destruction of property, and the resident is capable of carrying out such harm or destruction.
- (bb) "Transportation services" means vehicle travel by public or private carrier and related cost to and from program resources in the community, including consultation, medical, and other services.
- (cc) "Valuables" means personal property of a resident, including jewelry, furniture, electronic equipment, appliances, and clothing items that have a value of more than \$25.00.
- (2) Terms defined in the act have the same meanings when used in these rules.

History: 1994 AACCS; 2023 MR 11, Eff. June 9, 2023.

R 400.15103 Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.

Rule 103. (1) An applicant for an adult foster care large group home license shall make available at the facility, or for the department's inspection and copying of all of the following items:

- (a) A current written admission policy and program statement.
- (b) Copies of all of the following:
 - (i) Personnel policies.
 - (ii) Job descriptions.
 - (iii) Standard or routine procedures.
 - (iv) Proposed staffing patterns.
 - (v) An organizational chart.

(c) A copy of any current agreement or contract between the applicant or licensee, agency, person, or organization that provides or proposes to provide funding, care, treatment, or supplemental services as described in the home's program statement.

(d) A current floor plan of each level and basement of the entire structure, including the interior layout of foster care areas and room descriptions and specifics as to use, the number of beds, and the dimensions of floor space.

(e) A current financial statement and a proposed biennial budget.

(f) Verification of the lease, ownership, or right to occupy arrangements.

(g) Current articles of incorporation, a letter of authorization from the board of directors that designates the individual who is authorized to act on behalf of the corporation on licensing matters, a current list of the corporate directors, if applicable, and a certificate of incorporation.

(h) A current credit history for noncorporate applicants.

(2) A license fee shall accompany an original license application and a license renewal application. This fee is nonrefundable.

(3) The failure of an applicant or licensee to cooperate with the department in connection with an inspection or investigation shall be grounds for denying, suspending, revoking, or refusing to renew a license.

(4) The current license, whether regular, provisional, or temporary, shall be posted in the home and shall be available for public inspection.

(5) An applicant or licensee shall give written notice to the department of any changes in information that was previously submitted in or with an application for a license, including any changes in the household and in personnel-related information, within 5 business days after the change occurs.

History: 1994 AACCS.

R 400.15104 Licensee and applicant rights.

Rule 104. (1) A licensee or an applicant shall have the right to be treated with courtesy, dignity, and fairness by the adult foster care licensing division staff of the department and shall not be discriminated against on the basis of race, religion, color, national origin, sex, age, handicap, height, weight, or marital status.

(2) The department shall provide a licensee or an applicant with written notice regarding appeal rights as provided by Act No. 306 of the Public Acts of 1969, as amended, being S24.201 et seq. of the Michigan Compiled Laws, and the act when there is official notification of the intent to take an adverse action against an applicant or a licensee.

(3) A licensee or an applicant shall be informed of, and shall have the right to bring to the attention of the supervisor of the licensing representative, any alleged misapplication of enforcement of regulations by a licensing representative or any substantial differences of opinion as may occur between the licensee or the applicant and any licensing representative concerning the proper application of the act or these rules. A meeting with the supervisor shall be afforded upon request. This subrule notwithstanding, the licensee or the applicant may contact any other official of the department regarding issues relating to the licensing activities of the department. Any

contact with the supervisor or any other departmental official shall not result in any retaliation by the licensing representative.

(4) All written communications, scheduled and unscheduled visits, routine licensing investigations, and complaint investigations shall be conducted according to the provisions of the act and these rules.

(5) A licensee or an applicant may request, pursuant to the provisions of Act No. 442 of the Public Acts of 1976, as amended, being S15.231 et seq. of the Michigan Compiled Laws, copies of department policies or other documents that govern the licensing activities of the department.

(6) A licensee or an applicant shall be afforded the opportunity to have a conference with the licensing representative before the conclusion of a routine licensing investigation or complaint investigation and, as soon as practicable thereafter, shall receive a written response that indicates the findings of the licensing representative or any other licensing official.

(7) A licensee or an applicant shall have the right to review a licensing study report in which refusal to renew, revocation, or denial of license issuance is being recommended before that report is finalized, except in situations where the department finds cause to invoke a summary suspension action. The licensee or the applicant shall have the right to submit a written response. The written response shall be considered a part of the official record and shall be subject to disclosure pursuant to the provisions of Act No. 442 of the Public Acts of 1976, as amended, being S15.231 et seq. of the Michigan Compiled Laws.

(8) A licensee or an applicant shall have the right to provide a written response to the findings of the licensing representative or other department official if a licensing investigation report or a complaint investigation report is issued. The written response shall become a part of the department's official licensing record and shall be public information according to the provisions of Act No. 442 of the Public Acts of 1976, as amended, being S15.231 et seq. of the Michigan Compiled Laws, and the act.

(9) A licensee or an applicant may request, in writing, a declaratory ruling as to the applicability of a rule as provided in section 63 of Act No. 306 of the Public Acts of 1969, as amended, being S24.263 of the Michigan Compiled Laws.

(10) The department shall provide advice and technical assistance to the licensee or the applicant to assist the licensee in meeting the requirements of the act and these rules. The department shall offer consultation upon request in developing methods for the improvement of service.

(11) The department shall provide a licensee or an applicant with a written copy of the rights outlined in subrules (1) to (10) of this rule at the time of license application or license renewal.

History: 1994 AACCS.

R 400.15105 Licensed capacity.

Rule 105. (1) The number of residents cared for in a home and the number of resident beds shall not be more than the capacity that is authorized by the license.

(2) Any occupant of a home other than the licensee or persons who are related to the licensee, live-in staff or the live-in staff's spouse and minor children, or the spouse

of a resident who is not in need of foster care shall be considered a resident and be counted as a part of the licensed capacity.

(3) The total number of occupants shall not be more than 6 over the licensed capacity.

(4) If a person who is related to a resident lives in the home and subsequently requires foster care, the licensee shall have not more than 30 calendar days to return to the licensed capacity. Failure to do so may result in the department's refusal to renew a license, revocation of the license, or the issuance of a provisional license.

History: 1994 AACCS.

R 400.15106 Rule variance.

Rule 106. (1) Upon the written request of an applicant or licensee, the department may grant a variance from an administrative rule if there is clear and convincing evidence that the alternative to the rule complies with the intent of the administrative rule from which the variance is sought.

(2) The decision of the department, including the conditions under which the variance is granted, shall be entered upon the records of the department, and a signed copy shall be sent to the applicant or licensee. This variance may be time-limited or may remain in effect for as long as the licensee continues to comply with the intent of the rule.

(3) A variance that is granted pursuant to this rule is not transferable from one applicant to another or from one licensee to another.

History: 1994 AACCS.

PART 2. PROGRAM REQUIREMENTS

R 400.15201 Qualifications of administrator, direct care staff, licensee, and members of household; provision of names of employee, volunteer, or member of household on parole or probation or convicted of felony; food service staff.

Rule 201. (1) An administrator and direct care staff shall be persons who are not residents.

(2) A licensee shall have the financial and administrative capability to operate a home to provide the level of care and program stipulated in the application.

(3) Before a temporary license is issued, an applicant and an administrator shall be competent in all of the following areas:

- (a) Nutrition.
- (b) First aid.
- (c) Cardiopulmonary resuscitation.
- (d) Foster care, as defined in the act.
- (e) Safety and fire prevention.
- (f) Financial and administrative management.

- (g) Knowledge of the needs of the population to be served.
- (h) Resident rights.
- (i) Prevention and containment of communicable diseases.
- (4) An applicant and an administrator shall be deemed competent to operate a home upon successfully completing 1 or more of the following:
 - (a) Training that is developed, approved, or provided by the department.
 - (b) A competency review that is developed by the department to be given to the applicant and administrator during the licensing process by the licensing agent.
 - (c) A program of study at an accredited college or university in areas relevant to the applicant's admission policy and program statement.
 - (d) Experience that is related to the direct care of residents in areas that are relevant to the populations which are identified in the home's admission policy and program statement.
- (5) An administrator who is designated by the licensee after the promulgation of these rules shall meet the requirements of subrule (4) of this rule.
- (6) A licensee and the administrator shall have a high school diploma or general education diploma or equivalent and not less than 1 year of experience working with the population identified in the home's program statement and admission policy.
- (7) The provisions of subrule (6) of this rule shall not apply to those adult foster care licensees or administrators who are licensed, or applying to be licensed, before the promulgation of these rules.
- (8) The provisions of subrule (6) of this rule shall not apply to an individual who is employed as an administrator of a home that was licensed before the promulgation of these rules.
- (9) A licensee and the administrator shall possess all of the following qualifications:
 - (a) Be suitable to meet the physical, emotional, social, and intellectual needs of each resident.
 - (b) Be capable of appropriately handling emergency situations.
 - (c) Be capable of assuring program planning, development, and implementation of services to residents consistent with the home's program statement and in accordance with the resident's assessment plan and care agreement.
- (10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.
- (11) A licensee, direct care staff, and an administrator shall be willing to cooperate fully with a resident, the resident's family, a designated representative of the resident and the responsible agency.
- (12) A licensee, direct care staff, administrator, or members of the household shall not be the legal guardian or conservator of a resident who lives in the home, except if a person is a relative of the resident or if the guardianship or conservatorship of the licensee existed before April 1, 1989, as specified in section 454 of Act No. 642 of the Public Acts of 1978, as amended, being S700.454 of the Michigan Compiled Laws.
- (13) A licensee shall provide the department with the name of any employee, volunteer who is under the direction of the licensee, or member of the household who is on a court-supervised probation or parole or who has been convicted of a felony.

(14) A licensee shall employ at least 1 individual who is qualified by training, experience, and performance to be responsible for food preparation. Additional food service staff shall be employed as necessary to ensure regular and timely meals.

History: 1994 AACCS.

R 400.15202 Administrator; qualifications.

Rule 202. (1) A home shall have an administrator who shall not have less than 1 year of experience working with persons who are mentally ill, developmentally disabled, physically handicapped, or aged.

(2) A licensee who meets the qualifications of an administrator may serve as an administrator.

History: 1994 AACCS.

R 400.15203 Licensee and administrator training requirements.

Rule 203. (1) A licensee and an administrator shall complete the following educational requirements specified in subdivision (a) or (b) of this subrule, or a combination thereof, on an annual basis:

(a) Participate in, and successfully complete, 16 hours of training designated or approved by the department that is relevant to the licensee's admission policy and program statement.

(b) Have completed 6 credit hours at an accredited college or university in an area that is relevant to the licensee's admission policy and program statement as approved by the department.

(2) The department may prescribe additional training if substantial noncompliance with the act or these rules is evident.

History: 1994 AACCS.

R 400.15204 Direct care staff; qualifications and training.

Rule 204. (1) Direct care staff shall not be less than 18 years of age and shall be able to complete required reports and follow written and oral instructions that are related to the care and supervision of residents.

(2) Direct care staff shall possess all of the following qualifications:

(a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.

(b) Be capable of appropriately handling emergency situations.

(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.

History: 1994 AACCS.

R 400.15205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

Rule 205. (1) A licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household shall be in such physical and mental health so as not to negatively affect either the health of the resident or the quality of the resident's care.

(2) A licensee shall have, on file with the department, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of the licensee and administrator. The statement shall be signed within 6 months before the issuance of a temporary license and at any other time requested by the department.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

(4) A licensee shall provide the department with written evidence that he or she and the administrator have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken. The results of subsequent testing shall be verified every 3 years thereafter.

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

(7) A licensee shall obtain certification from a volunteer that the volunteer is free from communicable disease and that the volunteer's physical and mental health will not negatively affect either the health of the resident or the quality of the residents care.

History: 1994 AACCS.

R 400.15206 Staffing requirements.

Rule 206. (1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 15 residents during waking hours or less than 1 direct care staff member to 20 residents during normal sleeping hours.

(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.

(3) Any individual, including a volunteer, shall not be considered in determining the ratio of direct care staff to residents unless the individual meets the qualifications of a direct care staff member.

(4) Direct care staff need not be in the home during the day if all of the residents of the home are at out-of-home supervised activities and the home has provided the means by which a direct care staff member or administrator can be contacted in an emergency situation.

(5) A licensee or administrator shall designate, in writing, a person who shall be on-site or immediately available and who shall have the authority to carry out the licensee's or administrator's responsibilities in the absence of the licensee or administrator and shall ensure that the identity of the designated person is made known to all staff.

History: 1994 AACCS.

R 400.15207 Required personnel policies.

Rule 207. (1) A licensee shall have written policies and procedures that include all of the following:

- (a) Mandatory reporting, including reporting that is required by law.
- (b) Resident care related prohibited practices.
- (c) Confidentiality requirements, including requirements specified in law.
- (d) Training requirements.
- (e) Resident rights.
- (f) The process for reviewing the licensing statute and administrative rules.

(2) The written policies and procedures identified in subrule (1) of this rule shall be given to employees and volunteers at the time of appointment. A verification of receipt of the policies and procedures shall be maintained in the personnel records.

(3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record.

(4) Work assignments shall be consistent with job descriptions and the level of training, experience, and education of the employee or volunteer.

History: 1994 AACCS.

R 400.15208 Direct care staff and employee records.

Rule 208. (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.
- (2) The records identified in subrule (1) of this rule shall be maintained for not less than 3 years after the direct care staff member's or employee's ending date of employment.

(3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information:

- (a) Names of all staff on duty and those volunteers who are under the direction of the licensee.
- (b) Job titles.
- (c) Hours or shifts worked.
- (d) Date of schedule.
- (e) Any scheduling changes.

History: 1994 AACCS.

R 400.15209 Home records generally.

Rule 209. (1) A licensee shall keep, maintain, and make available for department review, all the following home records:

- (a) Admission policy.
- (b) Program statement.
- (c) Discharge policy.
- (d) Resident records.
- (e) A resident register.
- (f) Resident care contracts, if applicable.
- (g) Accident records and incident reports.
- (h) Personnel records, as required in R 400.15208.
- (i) Personnel policies and procedures as required in R 400.15207.
- (j) Program certifications, if applicable.
- (k) Fire drill records.

- (l) Emergency preparedness plans.
 - (m) Reports of fire or severe property damage.
 - (n) Records of variances granted, if applicable.
 - (o) Heating equipment inspection and approval records, if applicable.
 - (p) Fire detection and sprinkler equipment inspection and approval records, if applicable.
 - (q) Electrical inspection records, if applicable.
 - (r) Fire safety reports from the department or the state fire marshal, as required by law.
 - (s) Environmental inspection reports, as required by law.
 - (t) Menus.
- (2) A licensee shall keep a record of the arrangements for services for the emergency repair of heating, cooling, plumbing, and electrical equipment. The record shall include a list of persons to contact and shall be available for reference in the home.

History: 1994 AACCS.

R 400.15210 Resident register.

Rule 210. A licensee shall maintain a chronological register of residents who are admitted to the home. The register shall include all of the following information for each resident:

- (a) Date of admission.
- (b) Date of discharge.
- (c) Place and address to which the resident moved, if known.

History: 1994 AACCS.

PART 3. RESIDENT CARE, SERVICES, AND RECORDS

R 400.15301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

Rule 301. (1) A licensee shall not accept, retain, or care for a resident who requires continuous nursing care. This does not preclude the accommodation of a resident who becomes temporarily ill while in the home, but who does not require continuous nursing care.

(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions:

- (a) The amount of personal care, supervision, and protection that is required by the resident is available in the home.
- (b) The kinds of services, skills, and physical accommodations that are required of the home to meet the resident's needs are available in the home.

(c) The resident appears to be compatible with other residents and members of the household.

(3) A group home shall not accept or retain a person who requires isolation or restraint as specified in R 400.15308.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

(5) If a resident is referred for emergency admission and the licensee agrees to accept the resident, a written assessment plan shall be completed within 15 calendar days after the emergency admission. The written assessment shall be completed in accordance with the provisions specified in subrules (2) and (4) of this rule.

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following:

(a) An agreement to provide care, supervision, and protection, and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.

(b) A description of services to be provided and the fee for the service.

(c) A description of additional costs in addition to the basic fee that is charged.

(d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.

(e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.

(f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.

(g) An agreement by the resident to follow the house rules that are provided to him or her.

(h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.

(i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.

(j) A statement of the home's refund policy. The home's refund policy shall meet the requirements of R 400.15315.

(k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.

(l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.

(7) A department resident care agreement form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department. A resident shall be provided the care and services as stated in the written resident care agreement.

(8) A copy of the signed resident care agreement shall be provided to the resident or the resident's designated representative. A copy of the resident care agreement shall be maintained in the resident's record.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

(11) A licensee shall contact a resident's physician for instructions as to the care of the resident if the resident requires the care of a physician while living in the home. A licensee shall record, in the resident's record, any instructions for the care of the resident.

History: 1994 AACCS.

R 400.15302 Resident admission and discharge policy; house rules; emergency discharge; change of residency; restricting resident's ability to make living arrangements prohibited; provision of resident records at time of discharge.

Rule 302. (1) A home shall have a written admission and discharge policy. The policy shall be made available to a resident and his or her designated representative.

(2) A licensee may establish house rules. House rules, if established, shall be provided, in writing, to the resident or the resident's designated representative and responsible agency upon admission to the home or, if established after a resident's admission to the home, immediately thereafter. House rules shall not conflict with these rules.

(3) A licensee shall provide a resident and his or her designated representative with a 30-day written notice before discharge from the home. The written notice shall state the reasons for discharge. A copy of the written notice shall be sent to the resident's designated representative and responsible agency. The provisions of this subrule do not preclude a licensee from providing other legal notice as required by law.

(4) A licensee may discharge a resident before the 30-day notice when the licensee has determined and documented that any of the following exists:

(a) Substantial risk to the resident due to the inability of the home to meet the resident's needs or assure the safety and well-being of other residents of the home.

(b) Substantial risk, or an occurrence, of self-destructive behavior.

(c) Substantial risk, or an occurrence, of serious physical assault.

(d) Substantial risk, or an occurrence, of the destruction of property.

(5) A licensee who proposes to discharge a resident for any of the reasons listed in subrule (4) of this rule shall take the following steps before discharging the resident:

(a) The licensee shall notify the resident, the resident's designated representative, the responsible agency, and the adult foster care licensing consultant not less than 24 hours before discharge. The notice shall be in writing and shall include all of the following information:

(i) The reason for the proposed discharge, including the specific nature of the substantial risk.

(ii) The alternatives to discharge that have been attempted by the licensee.

(iii) The location to which the resident will be discharged, if known.

(b) The licensee shall confer with the responsible agency or, if the resident does not have a responsible agency, with adult protective services and the local community mental health emergency response service regarding the proposed discharge. If the responsible agency or, if the resident does not have a responsible agency, adult protective services does not agree with the licensee that emergency discharge is justified, the resident shall not be discharged from the home. If the responsible agency or, if the resident does not have a responsible agency, adult protective services agrees that the emergency discharge is justified, then all of the following provisions shall apply:

(i) The resident shall not be discharged until an appropriate setting that meets the resident's immediate needs is located.

(ii) The resident shall have the right to file a complaint with the department.

(iii) If the department finds that the resident was improperly discharged, the resident shall have the right to elect to return to the first available bed in the licensee's adult foster care home.

(6) A licensee shall not change the residency of a resident from one home to another without the written approval of the resident or the resident's designated representative and responsible agency.

(7) A licensee shall not restrict the resident's ability to make his or her own living arrangements.

(8) At the time of discharge, a licensee shall provide copies of resident records to the resident and his or her designated representative when requested, and as determined appropriate, by the resident or his or her designated representative. A fee that is charged for copies of resident records shall not be more than the cost to the licensee of making the copies available.

History: 1994 AACCS.

R 400.15303 Resident care; licensee responsibilities.

Rule 303. (1) Care and services that are provided to a resident by the home shall be designed to maintain and improve a resident's physical and intellectual functioning and independence. A licensee shall ensure that all interactions with residents promote and encourage cooperation, self-esteem, self-direction, independence, and normalization.

(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.

(3) A licensee shall assure the availability of transportation services as provided for in the resident care agreement.

(4) A licensee shall provide all of the following:

- (a) An opportunity for the resident to develop positive social skills.
- (b) An opportunity for the resident to have contact with relatives and friends.
- (c) An opportunity for community-based recreational activities.
- (d) An opportunity for privacy and leisure time.
- (e) An opportunity for religious education and attendance at religious services of the resident's choice.

(5) A licensee shall provide both of the following when specified in the resident's written assessment plan:

(a) Direction and opportunity for the growth and development of a resident as achieved through activities that foster independent and age appropriate functioning, such as dressing, grooming, manners, shopping, cooking, money management, and the use of public transportation.

(b) An opportunity for involvement in educational, employment, and day programs.

History: 1994 AACCS.

R 400.15304 Resident rights; licensee responsibilities.

Rule 304. (1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:

(a) The right to be free from discrimination on the basis of race, religion, color, national origin, sex, age, handicap, marital status, or source of payment in the provision of services and care.

(b) The right to exercise his or her constitutional rights, including the right to vote, the right to practice religion of his or her choice, the right to freedom of movement, and the right of freedom of association.

(c) The right to refuse participation in religious practices.

(d) The right to write, send, and receive uncensored and unopened mail at his or her own expense.

(e) The right of reasonable access to a telephone for private communications. Similar access shall be granted for long distance collect calls and calls which otherwise are paid for by the resident. A licensee may charge a resident for long distance and toll telephone calls. When pay telephones are provided in group homes, a reasonable amount of change shall be available in the group home to enable residents to make change for calling purposes.

(f) The right to voice grievances and present recommendations pertaining to the policies, services, and house rules of the home without fear of retaliation.

(g) The right to associate and have private communications and consultations with his or her physician, attorney, or any other person of his or her choice.

(h) The right to participate in the activities of social, religious, and community groups at his or her own discretion.

(i) The right to use the services of advocacy agencies and to attend other community services of his or her choice.

(j) The right of reasonable access to and use of his or her personal clothing and belongings.

(k) The right to have contact with relatives and friends and receive visitors in the home at a reasonable time. Exceptions shall be covered in the resident's assessment plan. Special consideration shall be given to visitors coming from out of town or whose hours of employment warrant deviation from usual visiting hours.

(l) The right to employ the services of a physician, psychiatrist, or dentist of his or her choice for obtaining medical, psychiatric, or dental services.

(m) The right to refuse treatment and services, including the taking of medication, and to be made aware of the consequences of that refusal.

(n) The right to request and receive assistance from the responsible agency in relocating to another living situation.

(o) The right to be treated with consideration and respect, with due recognition of personal dignity, individuality, and the need for privacy.

(p) The right of access to his or her room at his or her own discretion.

(q) The right to confidentiality of records as stated in section 12(3) of the act.

(2) A licensee shall respect and safeguard the resident's rights specified in subrule (1) of this rule.

History: 1994 AACCS.

R 400.15305 Resident protection.

Rule 305. (1) A resident shall be assured privacy and protection from moral, social, and financial exploitation.

(2) All work that is performed by a resident shall be in accordance with the written assessment plan.

(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.

History: 1994 AACCS.

R 400.15306 Use of assistive devices.

Rule 306. (1) An assistive device shall only be used to promote the enhanced mobility, physical comfort, and well-being of a resident.

(2) An assistive device shall be specified in a resident's written assessment plan and agreed upon by the resident or the resident's designated representative and the licensee.

(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

History: 1994 AACCS.

R 400.15307 Resident behavior interventions generally.

Rule 307. (1) A licensee shall ensure that methods of behavior intervention are positive and relevant to the needs of the resident.

(2) Interventions to address unacceptable behavior shall be specified in the written assessment plan and employed in accordance with that plan. Interventions to address unacceptable behavior shall also ensure that the safety, welfare, and rights of the resident are adequately protected. If a specialized intervention is needed to address the unique programmatic needs of a resident, the specialized intervention shall be developed in consultation with, or obtained from, professionals who are licensed or certified in that scope of practice.

(3) A licensee and direct care staff who are responsible for implementing the resident's written assessment plan shall be trained in the applicable behavior intervention techniques.

(4) Intervention techniques shall not be used for the purpose of punishment, discipline, or for the convenience of staff.

History: 1994 AACCS.

R 400.15308 Resident behavior interventions prohibitions.

Rule 308. (1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.

(2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following:

(a) Use any form of punishment.

(b) Use any form of physical force other than physical restraint as defined in these rules.

(c) Restrain a resident's movement by binding or tying or through the use of medication, paraphernalia, contraptions, material, or equipment for the purpose of immobilizing a resident.

(d) Confine a resident in an area, such as a room, where egress is prevented, in a closet, or in a bed, box, or chair or restrict a resident in a similar manner.

(e) Withhold food, water, clothing, rest, or toilet use.

(f) Subject a resident to any of the following:

(i) Mental or emotional cruelty.

(ii) Verbal abuse.

(iii) Derogatory remarks about the resident or members of his or her family.

(iv) Threats.

(g) Refuse the resident entrance to the home.

(h) Isolation of a resident as defined in R 400.15102(1)(m).

(i) Any electrical shock device.

History: 1994 AACCS.

R 400.15309 Crisis intervention.

Rule 309. (1) Crisis intervention procedures may be utilized only when a person has not previously exhibited the behavior creating the crisis or there has been insufficient time to develop a specialized intervention plan to reduce the behavior causing the crisis. If the resident requires the repeated or prolonged use of crisis intervention procedures, the licensee shall contact the resident's designated representative and the responsible agency or, in the absence of a responsible agency, a professional who is licensed or certified in the appropriate scope of practice to initiate a review process to evaluate positive alternatives or the need for a specialized intervention plan.

(2) Crisis intervention may be used only for the following reasons:

(a) To provide for self-defense or the defense of others.

(b) To prevent a resident from harming himself or herself.

(c) To quell a disturbance that threatens physical injury to any person.

(d) To obtain possession of a weapon or other dangerous object that is in the possession or control of the resident.

(e) To prevent serious property destruction.

(3) Crisis intervention shall be used to the minimum extent and the minimum duration necessary and shall be used only after less restrictive means of protection have failed.

(4) Crisis intervention shall be employed to allow the resident the greatest possible comfort and to avoid physical injury and mental distress.

(5) Crisis intervention shall not be used as a routine intervention.

(6) All uses of crisis intervention shall be noted in the resident's record. This notation shall include all of the following information:

(a) The nature of the crisis intervention used and the duration of use.

(b) The reasons for the use of the crisis intervention.

(c) The types of less restrictive alternatives that were tried, the duration, the number of trials, and the results obtained.

(d) The name of the person who authorized the crisis intervention.

(e) The times and dates that the crisis intervention was used and who implemented the crisis intervention.

(7) A licensee shall make available reports of all uses of crisis intervention when requested by the resident or his or her designated representative, the responsible agency, or the department.

(8) A licensee or a direct care staff member shall not use crisis intervention until he or she has successfully completed crisis intervention training that has been approved by the department.

History: 1994 AACCS.

R 400.15310 Resident health care.

Rule 310. (1) A licensee, with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician or other health care professional with regard to such items as any of the following:

- (a) Medications.
 - (b) Special diets.
 - (c) Susceptibility to hyperthermia and hypothermia and related limitations for physical activity, as appropriate.
 - (d) Other resident health care needs that can be provided in the home. The refusal to follow the instructions and recommendations shall be recorded in the resident's record.
- (2) A licensee shall maintain a copy of the annual health care appraisal on file for not less than 2 years.
- (3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
- (4) In case of an accident or sudden adverse change in a resident's physical condition or adjustment, a group home shall obtain needed care immediately.

History: 1994 AACCS.

R 400.15311 Incident notification, incident records.

Rule 311. (1) If a resident has a representative identified in writing on the resident's care agreement, a licensee shall report to the resident's representative within 48 hours after any of the following:

- (a) Unexpected or unnatural death of a resident.
- (b) Unexpected and preventable inpatient hospital admission.
- (c) Physical hostility or self-inflicted harm or harm to others resulting in injury that requires outside medical attention or law enforcement involvement.
- (d) Natural disaster or fire that results in evacuation of residents or discontinuation of services greater than 24 hours.
- (e) Elopement from the home if the resident's whereabouts is unknown.

(2) If an elopement occurs, staff shall conduct an immediate search to locate the resident. If the resident is not located within 30 minutes after the elopement occurred, staff shall contact law enforcement.

(3) An incident must be recorded on a department-approved form and kept in the home for a period of not less than 2 years.

(4) The department may review incident reports during a renewal inspection or special investigation. This does not prohibit the department from requesting an incident report when determined necessary by the department. If the department does request an incident report, the licensee shall provide the report in electronic form within 24 hours after the request. The department shall maintain and protect these documents in accordance with state and federal laws, including privacy laws.

History: 1994 AACCS; 2023 MR 11, Eff. June 9, 2023.

R 400.15312 Resident medications.

Rule 312. (1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original

pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

(2) Medication shall be given, taken, or applied pursuant to label instructions.

(3) Unless a resident's physician specifically states otherwise in writing, the giving, taking, or applying of prescription medications shall be supervised by the licensee, administrator, or direct care staff.

(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:

(a) Be trained in the proper handling and administration of medication.

(b) Complete an individual medication log that contains all of the following information:

(i) The medication.

(ii) The dosage.

(iii) Label instructions for use.

(iv) Time to be administered.

(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

(vi) A resident's refusal to accept prescribed medication or procedures.

(c) Record the reason for each administration of medication that is prescribed on an as needed basis.

(d) Initiate a review process to evaluate a resident's condition if a resident requires the repeated and prolonged use of a medication that is prescribed on an as needed basis. The review process shall include the resident's prescribing physician, the resident or his or her designated representative, and the responsible agency.

(e) Not adjust or modify a resident's prescription medication without instructions from a physician or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record, in writing, any instructions regarding a resident's prescription medication.

(f) Contact the appropriate health care professional if a medication error occurs or when a resident refuses prescribed medication or procedures and follow and record the instructions given.

(5) When a resident requires medication while out of the home, a licensee shall assure that the resident or, in the alternative, the person who assumes responsibility for the resident has all of the appropriate information, medication, and instructions.

(6) A licensee shall take reasonable precautions to insure that prescription medication is not used by a person other than the resident for whom the medication was prescribed.

(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.

History: 1994 AACCS.

R 400.15313 Resident nutrition.

Rule 313. (1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.

(2) Meals shall meet the nutritional allowances recommended pursuant to the provisions of "Appendix I: Recommended Dietary Allowances, Revised 1980" contained in the publication entitled "Basic Nutrition Facts: A Nutrition Reference," Michigan Department of Public Health publication no. H-808, 1/89. This publication may be obtained at cost from The Division of Research and Development, Michigan Department of Public Health, P.O. Box 30195, Lansing, Michigan 48909.

(3) Special diets shall be prescribed only by a physician. A resident who has been prescribed a special diet shall be provided such a diet.

(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.

(5) Records of menus, including special diets, as served shall be provided upon request by the department.

(6) Records of menus, including special diets, shall be kept by the licensee for 1 calendar year.

History: 1994 AACCS.

R 400.15314 Resident hygiene.

Rule 314. (1) A licensee shall afford a resident the opportunity, and instructions when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.

(2) A licensee shall afford a resident facilities, and instructions when necessary, for daily shaving.

(3) A licensee shall afford a resident opportunities, and instructions when necessary, to obtain haircuts, hair sets, or other grooming processes.

(4) A licensee shall afford a resident opportunities, and instruction when necessary, to dress as fashion, fit, cleanliness, and season warrant.

(5) A licensee shall afford a resident who is capable with opportunities, and instructions when necessary, to routinely launder clothing. Clean clothing shall be available at all times.

(6) A licensee shall afford a resident the opportunity to receive assistance in bathing, dressing, or personal hygiene from a member of the same sex, unless otherwise stated in the home's admission policy or written resident care agreement.

History: 1994 AACCS.

R 400.15315 Handling of resident funds and valuables.

Rule 315. (1) Upon a request from a resident or the resident's designated representative, a licensee may accept a resident's funds and valuables to be held in trust with the licensee.

(2) The care of any resident funds and valuables that have been accepted by a licensee for safekeeping shall be treated by the licensee as a trust obligation.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

(4) A listing of all valuables that are accepted by the licensee for safekeeping shall be maintained. The listing of valuables shall include a written description of the items, the date received by the licensee, and the date returned to the resident or his or her designated representative. The listing of valuables shall be signed at the time of receipt by the licensee and the resident or his or her designated representative. Upon return of the valuables to the resident or his or her designated representative, the listing shall be signed by the resident or his or her designated representative and the licensee.

(5) All resident funds, which includes bank accounts, shall be kept separate and apart from all funds and monies of the licensee. Interest and dividends earned on resident funds shall be credited to the resident. Payments for care for the current month may be used by the licensee for operating expenses.

(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.

(7) A resident shall have access to and use of personal funds that belong to him or her in reasonable amounts, including immediate access to not less than \$20.00 of his or her personal funds. A resident shall receive up to his or her full amount of personal funds at a time designated by the resident, but not more than 5 days after the request for the funds. Exceptions to this requirement shall be subject to the provisions of the resident's assessment plan and the plan of services.

(8) All resident fund transactions shall require the signature of the resident or the resident's designated representative and the licensee or prior written approval from the resident or the resident's designated representative.

(9) A resident's account shall be individual to the resident. A licensee shall be prohibited from having any ownership interest in a resident's account and shall verify such in a written statement to the resident or the resident's designated representative.

(10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.

(11) A licensee shall obtain prior written approval from a resident and his or her designated representative before charges are made to a resident's account.

(12) Charges against the resident's account shall not exceed the agreed price for the services rendered and goods furnished or made available by the home to the resident.

(13) A licensee shall provide a complete accounting, on an annual basis and upon request, of all resident funds and valuables which are held in trust and in bank accounts or which are paid to the home, to the resident, or to his or her designated representative. The accounting of a resident's funds and valuables which are held in trust or which are paid to the home shall also be provided, upon the resident's or designated representative's request, not more than 5 banking days after the request and at the time of the resident's discharge from the home.

(14) A licensee shall have a written refund agreement with the resident or his or her designated representative. The agreement shall state under what conditions a refund of the unused portion of the monthly charge that is paid to the home shall be returned to

the resident or his or her designated representative. The refund agreement shall provide for, at a minimum, refunds under any of the following conditions:

(a) When an emergency discharge from the home occurs as described in R 400.15302.

(b) When a resident has been determined to be at risk pursuant to the provisions of sections 11 and 11a to 11f of Act No. 280 of the Public Acts of 1939, as amended, being SS400.11 and 400.11a to 400.11f of the Michigan Compiled Laws.

(c) When a resident has been determined to be at risk due to substantial noncompliance with these licensing rules which results in the department taking action to issue a provisional license or to revoke or summarily suspend, or refuse to renew, a license and the resident relocates. The amount of the monthly charge that is returned to the resident shall be based upon the written refund agreement and shall be prorated based on the number of days that the resident lived in the home during that month.

(15) Personal property and belongings that are left at the home after the death of a resident shall be inventoried and stored by the licensee. A licensee shall notify the resident's designated representative, by registered mail, of the existence of the property and belongings and request disposition. Personal property and belongings that remain unclaimed, or for which arrangements have not been made, may be disposed of by the licensee after 30 days from the date that written notification is sent to the designated representative.

(16) Personal property and belongings that are left at the home after discharge shall be inventoried and stored by the licensee. The resident and designated representative shall be notified by the licensee, by registered mail, of the existence of property and belongings. Personal property and belongings that remain unclaimed, or for which arrangements have not been made, may be disposed of by the licensee after 30 days from the date that written notification is sent to the resident and the designated representative.

History: 1994 AACCS.

R 400.15316 Resident records.

Rule 316. (1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information:

(a) Identifying information, including, at a minimum, all of the following:

(i) Name.

(ii) Social security number, date of birth, case number, and marital status.

(iii) Former address.

(iv) Name, address, and telephone number of the next of kin or the designated representative.

(v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home.

(vi) Name, address, and telephone number of the preferred physician and hospital.

(vii) Medical insurance.

(viii) Funeral provisions and preferences.

- (ix) Resident's religious preference information.
- (b) Date of admission.
- (c) Date of discharge and the place to which the resident was discharged.
- (d) Health care information, including all of the following:
 - (i) Health care appraisals.
 - (ii) Medication logs.
 - (iii) Statements and instructions for supervising prescribed medication, including dietary supplements and individual special medical procedures.
 - (iv) A record of physician contacts.
 - (v) Instructions for emergency care and advanced medical directives.
- (e) Resident care agreement.
- (f) Assessment plan.
- (g) Weight record.
- (h) Incident reports and accident records.
- (i) Resident funds and valuables record and resident refund agreement.
- (j) Resident grievances and complaints.
- (2) Resident records shall be kept on file in the home for 2 years after the date of a resident's discharge from a home.

History: 1994 AACCS.

R 400.15317 Resident recreation.

Rule 317. (1) A licensee shall make reasonable provision for a varied supply of leisure and recreational equipment and activities that are appropriate to the number, care, needs, age, and interests of the residents.

(2) Leisure and recreational equipment shall be safe, clean, in good repair, and easily accessible.

(3) Equipment and materials shall encourage and reinforce all of the following:

- (a) Social interaction.
- (b) Further growth through firsthand experiences.
- (c) Social graces.
- (d) Productive utilization of leisure time.

History: 1994 AACCS.

R 400.15318 Emergency preparedness; evacuation plan; emergency transportation.

Rule 318. (1) A licensee shall have a written emergency procedure and evacuation plan to be followed in case of fire, medical, or severe weather emergencies. The evacuation plan shall be prominently posted in the home. Residents who require special assistance shall be identified in the written procedure.

(2) An evacuation plan shall, at a minimum, include a floor plan that specifies the locations of evacuation routes and the exiting route to be followed in case of fire.

(3) A telephone shall be available and accessible in a home. Emergency telephone numbers shall, at a minimum, include fire, police, and medical emergency services and shall be conspicuously posted immediately adjacent to telephones.

(4) A licensee shall ensure that residents, all employees, volunteers under the direction of the licensee, and members of the household are familiar with emergency and evacuation procedures.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

(6) A licensee shall assure emergency transportation through the use of a recognized available community service or vehicle that is owned by the licensee, administrator, or direct care staff on duty.

History: 1994 AACCS.

R 400.15319 Resident transportation.

Rule 319. When a home provides transportation for a resident, the licensee shall assure all of the following:

(a) That a vehicle is in good operating condition.

(b) That a vehicle carries a basic first aid kit.

(c) That residents who are transported by truck ride only in the cab.

(d) That a vehicle operator has a valid driver's license. A licensee who uses a motor vehicle with a manufacturer's rated seating capacity of 16 or more persons shall comply with the provisions of section 715a of Act No. 300 of the Public Acts of 1949, as amended, being S257.715a of the Michigan Compiled Laws.

History: 1994 AACCS.

PART 4. ENVIRONMENTAL CONDITIONS

R 400.15401 Environmental health.

Rule 401. (1) Private water systems shall be in compliance with R 325.10101 et seq. of the Michigan Administrative Code. A bacteriological report confirming water quality shall be required during the initial inspection and every 2 years thereafter. Group homes that use a community-approved water system need not be in compliance with this requirement.

(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.

(3) All sewage shall be disposed of in a public sewer system or, in the absence thereof, in a manner that is approved by the health authority.

(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.

(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.

(6) Poisons, caustics, and other dangerous materials shall be stored and safeguarded in nonresident areas and in non-food preparation storage areas.

(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

(8) Hand-washing facilities that are provided in both the kitchen and bathroom areas shall include hot and cold water, soap, and individual towels, preferably paper towels.

(9) When a resident is discharged, his or her room and its contents shall be thoroughly cleaned. Blankets and spreads shall be sanitized.

History: 1994 AACCS.

R 400.15402 Food service.

Rule 402. (1) All food shall be from sources that are approved or considered satisfactory by the department and shall be safe for human consumption, clean, wholesome and free from spoilage, adulteration, and misbranding.

(2) All food shall be protected from contamination while being stored, prepared, or served and during transportation to a facility.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

(4) All food service equipment and utensils shall be constructed of material that is nontoxic, easily cleaned, and maintained in good repair. All food services equipment and eating and drinking utensils shall be thoroughly cleaned after each use.

(5) A home shall be properly equipped as required by the health authority, to prepare and serve adequate meals.

(6) Household and cooking appliances shall be properly installed according to the manufacturer's recommended safety practices. Where metal hoods or canopies are provided, they shall be equipped with filters. The filters shall be maintained in an efficient condition and kept clean at all times. All food preparation surfaces and areas shall be kept clean and in good repair.

History: 1994 AACCS.

R 400.15403 Maintenance of premises.

Rule 403. (1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

(3) All living, sleeping, hallway, storage, bathroom, and kitchen areas shall be well lighted and ventilated.

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

(6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.

(7) All water closet compartments, bathrooms, and kitchen floor surfaces shall be constructed and maintained so as to be reasonably impervious to water and to permit the floor to be easily kept in a clean condition.

(8) Stairways shall have sturdy and securely fastened handrails. The handrails shall be not less than 30, nor more than 34, inches above the upper surface of the tread. All exterior and interior stairways and ramps shall have handrails on the open sides. All porches and decks that are 8 inches or more above grade shall also have handrails on the open sides.

(9) Stairway risers and treads shall be a uniform and consistent size. Stairways that form a part of a required means of egress shall change direction at landings only.

(10) Scatter or throw rugs on hard finished floors shall have a nonskid backing.

(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

(12) Sidewalks, fire escape routes, and entrances shall be kept reasonably free of hazards, such as ice, snow, and debris.

(13) A yard area shall be kept reasonably free from all hazards, nuisances, refuse, and litter.

(14) Hot water pipes and steam radiators that are located in resident occupied areas shall be shielded to protect against burns.

(15) A written report shall be made to the adult foster care licensing division of the department, the resident's designated representative, and the responsible agency within 48 hours, excluding holidays and weekends, of the occurrence of any fire and property damage of more than \$5,000.00.

History: 1994 AACCS.

R 400.15404 Laundry.

Rule 404. A home shall make adequate provision for the laundering of a resident's personal laundry.

History: 1994 AACCS.

R 400.15405 Living space.

Rule 405. (1) A licensee shall provide, per occupant, not less than 35 square feet of indoor living space, exclusive of bathrooms, storage areas, hallways, kitchens, and sleeping areas.

(2) A resident shall be provided with reasonable storage space for storing his or her personal belongings.

(3) Living, dining, bathroom, and sleeping areas used by residents who have impaired mobility shall be accessible and located on the street floor level of the home that contains the required means of egress.

(4) A resident shall not be housed above a second floor of a 3-story residence. This subrule shall not apply to those licensees who were approved to house residents above the second floor of a 3-story residence, who were licensed on the effective date of these rules, and whose license has been in continuous effect.

(5) Where there is a change of ownership or a change in licensee for those licensees and homes that were licensed on the effective date of these rules and whose licenses have been in continuous effect, use of living space above the second floor of a 3-story residence shall be allowed to continue without interruption when all of the following conditions have been met:

(a) The resident or his or her designated representative has agreed, in writing, to continue to reside above the second floor of the 3-story residence.

(b) The home is in compliance with all applicable state fire safety and environmental health standards.

(c) The licensee meets all applicable staffing requirements as set forth in R 400.15206.

(d) The licensee is in compliance with the emergency preparedness provisions as required in these rules.

(6) The living, dining, bathroom, and sleeping areas for residents shall be contained within the home.

(7) A group home shall provide 1 or more multipurpose areas of adequate size for training, recreation, family-style dining and other diversional and social activities.

(8) A home shall have dining space that can accommodate all residents of the home at the same time.

(9) The provisions of subrule (1) of this rule shall not apply to those licensees who are licensed on the effective date of these rules and whose licenses have been in continuous effect. A variance that is granted pursuant to the provisions of this rule is not transferable from one licensee to another.

History: 1994 AACCS.

R 400.15406 Room temperature.

Rule 406. All resident-occupied rooms of a home shall be heated at a temperature range between 68 and 72 degrees Fahrenheit during non-sleeping hours. Precautions shall be taken to prevent prolonged resident exposure to stale, noncirculating air that is at a temperature of 90 degrees Fahrenheit or above. Variations from the requirements of this rule shall be based upon a resident's health care appraisal and shall be addressed in the resident's written assessment plan. The resident care agreement shall address the

resident's preferences for variations from the temperatures and requirements specified in this rule.

History: 1994 AACCS.

R 400.15407 Bathrooms.

Rule 407. (1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.

(2) Toilets, bathtubs, and showers shall provide for individual privacy.

(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

(4) A home shall have a minimum of 1 toilet, 1 lavatory, and 1 bathing facility for every 8 occupants of the home.

(5) At least 1 toilet and 1 lavatory that are available for resident use shall be provided on each floor that has resident bedrooms.

(6) At least 1 bathing facility that is available for resident use shall be provided on each floor that has resident bedrooms.

(7) The provisions of subrule (6) of this rule shall not apply to those licensees who are licensed on the effective date of these rules and whose licenses have been in continuous effect.

History: 1994 AACCS.

R 400.15408 Bedrooms generally.

Rule 408. (1) A room shall not be used as a resident bedroom if more than 1/2 of the room height is below grade, except where the ceiling of such portion of a building is located 5 feet or more above grade for more than 25% of the perimeter measurement of the building. Such acceptable bedrooms shall be provided 2 acceptable means of egress.

(2) A living room, dining room, hallway, or other room that is not ordinarily used for sleeping or a room that contains a required means of egress shall not be used for sleeping purposes by anyone.

(3) Bedrooms for residents shall be separated from halls, corridors, and other rooms by floor-to-ceiling walls that do not have openings, except for doorways.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

(5) Traffic to and from any room shall not be through a resident bedroom.

(6) For 2 adjoining rooms to be considered as 1 bedroom, there shall be a 7-foot horizontal opening between the rooms.

(7) Bedrooms shall have at least 1 easily openable window.

(8) Residents of the opposite sex shall not occupy the same bedroom for sleeping purposes, unless they are husband and wife.

(9) A resident who has impaired mobility shall not sleep in or be assigned a bedroom that is located above the street floor of the home.

History: 1994 AACCS.

R 400.15409 Bedroom space; "usable floor space" defined.

Rule 409. (1) As used in this rule, "usable floor space" means floor space that is under a ceiling which is not less than 6 feet, 6 inches in height, excluding closets and space that is under a portable wardrobe. When determining usable floor space, an alcove or any other part of the room that does not have at least a 7-foot horizontal dimension shall be excluded.

(2) A single occupancy bedroom shall have not less than 80 square feet of usable floor space.

(3) A multioccupancy resident bedroom shall have not less than 65 square feet of usable floor space per bed.

(4) A maximum of 2 beds shall be allowed in any multioccupancy bedroom, except as provided in subrule (5) of this rule.

(5) A maximum of 4 beds shall be allowed in any multioccupancy bedroom for those licensees and homes that were licensed on the effective date of these rules and that have had licenses in continuous effect.

(6) Where there is a change of ownership or a change in licensee for those licensees and homes that were licensed on the effective date of these rules and whose licenses have been in continuous effect, a maximum 4 beds shall be allowed in any multioccupancy bedroom when all of the following conditions have been met:

(a) The resident or his or her designated representative has agreed, in writing, to continue to reside in the multioccupancy room.

(b) The home is in compliance with all applicable state fire safety and environmental health standards.

(c) The multioccupancy bedroom provides not less than 70 square feet (65 square feet for homes licensed on or before December 31, 1976) of usable floor space per bed. "Usable floor space" means the floor space under a ceiling that is not less than 6 feet 6 inches in height.

(d) The licensee has made provision for individual privacy as required in these rules.

(7) There shall not be less than a 3-foot clearance between beds in a multioccupancy bedroom.

History: 1994 AACCS.

R 400.15410 Bedroom furnishings.

Rule 410. (1) The bedroom furnishings in each bedroom shall include all of the following:

(a) An adequate closet or wardrobe.

(b) Lighting that is sufficient for reading and other resident activities.

(c) A bureau or dresser or equivalent.

(d) At least 1 chair.

(2) A resident bedroom shall be equipped with a mirror that is appropriate for grooming.

(3) Provision shall be made for a resident to mount or hang pictures or decorative items on his or her bedroom walls.

(4) All of the following shall not be used by residents for sleeping:

(a) Roll-a-way beds.

(b) Cots.

(c) Double-deck beds.

(d) Stacked bunks.

(e) Hide-a-beds.

(f) Daybeds.

(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a water bed is not prohibited by this rule.

History: 1994 AACCS.

R 400.15411 Linens.

Rule 411. (1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillow case, 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.

(2) A licensee shall provide at least 1 standard bed pillow that is comfortable, clean, and in good condition for each resident bed.

(3) A licensee shall provide bath towels and washcloths. Towels and washcloths shall be changed and laundered not less than twice weekly or more often if soiled.

History: 1994 AACCS.