



STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING



JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

December 14, 2009

Patricia Boyne
9533 Meadow Lane
Pinckney, MI 48169

RE: Application #: AM470287209
Meadow Lane AFC
9533 Meadow Lane
Pinckney, MI 48169

Dear Mrs. Boyne:

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 10 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 (517) 241-2585.

Sincerely,

Kent W Gieselman, Licensing Consultant
Bureau of Children and Adult Licensing
7109 W. Saginaw
P.O. Box 30650
Lansing, MI 48909-8150
(517) 335-6084

enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AM470287209
Applicant Name:	Patricia Boyne
Applicant Address:	9533 Meadow Lane Pinckney, MI 48169
Applicant Telephone #:	(734) 878-0708
Name of Facility:	Meadow Lane AFC
Facility Address:	9533 Meadow Lane Pinckney, MI 48169
Facility Telephone #:	(734) 878-0708
Administrator Name:	Patricia Boyne
Application Date:	11/17/2006
Capacity:	10
Program Type:	DEVELOPMENTALLY DISABLED AGED

II. METHODOLOGY

11/17/2006	Enrollment
11/22/2006	Licensing Unit file referred for criminal history review
12/01/2006	Inspection Report Requested - Fire
12/01/2006	Inspection Report Requested - Health 1011564
12/05/2006	Application Incomplete Letter Sent
08/07/2007	Inspection Completed On-site
08/08/2007	Contact - Document Sent Letter sent to applicant.
03/18/2009	Inspection Completed-Env. Health : A
03/18/2009	Inspection Completed-Fire Safety : A
12/01/2009	Application Complete/On-site Needed
12/10/2009	Inspection Completed On-site
12/10/2009	Inspection Completed-BFS Full Compliance
12/10/2009	Exit Conference

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This facility is a single-story ranch-style building with an attached garage located on a gravel road in a rural area of Putnam Township in Livingston County. This facility is wheelchair accessible and has wheelchair ramps located at two separate entrances of the facility. The facility was constructed in 1965 and an addition was completed in 2006. The facility is equipped with a hard-wired interconnected smoke alarm system and a sprinkler system approved by the Bureau of Fire Services. Smoke detectors and fire extinguishers are located as required throughout the facility.

There are five bedrooms located in this facility for resident use. Each bedroom was constructed with the same dimensions and all measure 10'X14' equaling 140 sq. ft. There is sufficient floor space in each bedroom to accommodate two residents in each room. All bedrooms are furnished with new beds, dressers, mattresses and appropriate

bedding. This facility has a dining room, separate from the kitchen area, with adequate space for ten residents. The main living area is furnished with sufficient furniture to provide an opportunity for all residents to participate in recreational activities. There are two full bathrooms in this facility which is adequate to meet the needs of ten residents.

The facility is heated by two gas-fueled, forced-air furnaces. One furnace is located in the basement of the facility. The basement is closed off by a 1 ¾" solid core door with a self closing mechanism. The second furnace is located in the crawlspace and is enclosed in a room constructed with Class C materials and approved by the Bureau of Fire Safety.

This facility has private water and sewage disposal systems. A copy of approved Environmental Health Department inspection is contained in the licensing record. Garbage disposal is supplied through the Allied Waste. The kitchen and bathroom areas were evaluated and 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 administrative rule 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 basement area. The washer and dryer were properly installed and the dryer vent was made of acceptable non-combustible material.

B. Program Description

This facility has been licensed as a family adult foster care facility since April 2004. The applicant, Patricia Boyne, has applied to increase the number of residents from six to ten, changing the license type to small group status. Mrs. Boyne has been issued a special use permit by Putnam Township and is compliance with all local ordinances. Also residing with Mrs. Boyne is her husband, Charles Boyne, and her mother-in-law, Dorothy Boyne. All have had criminal history clearances completed.

The applicant 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 aged male and female adults or those with developmental disabilities. The program statement states that the applicant's goal is to provide holistic care to the residents and meet their physical and intellectual needs in a safe, caring, and fun environment. The applicant will provide recreational opportunities for the residents within the facility and also encourage residents to participate in activities outside of the facility as they are able which will help facilitate social interactions.

As part of the application process, the applicant submitted admission and discharge policies for this facility. The documents are acceptable as written. Also included in the Department files are 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 applicant 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 applicant completed an individual application and will be the sole applicant. The applicant will also act in the role of the facility administrator.

A criminal history background check of Ms. Patricia Boyne and Mr. Charles Boyne, who will be an adult member of the household, did not identify any criminal convictions. The Boynes have demonstrated good moral character, sound judgment, and are suitable to provide care to dependent adults. The Boyne's have submitted physician statements indicating that there is no health reason that they should not be involved in the provision of adult foster care and their TB tests are negative.

The applicant submitted a current balance sheet as well as a projected budget. Based on the information presented, the applicant has demonstrated a stable financial position and possesses the financial capability to operate an adult foster care facility at the above referenced location.

The personnel policies have been reviewed and it is determined that they do not conflict with statutory or administrative rule requirements. The job descriptions for this facility were reviewed and submitted to the department. They are acceptable as written. The applicant is aware of the good moral character requirements as related to the hiring of staff. Particular attention was placed upon the rule related to the determination of good moral character by the applicant (R 400.14734a). The applicant is well aware of the requirements for employee records based on previous experience in Adult Foster Care.

The applicant intends to use the Department's required Resident Care Agreement Departmental requirements pertaining to maintaining a resident register, as required under R400.14210, have been discussed with the applicant and the applicant indicates that it is the intent of the applicant to comply with this requirement. Copies of required Department forms were also given to the applicant during the course of the pre-licensing period. The applicant indicated that she understands the Department requirements for recordkeeping.

Home menus have been discussed and the applicant/administrator understands the requirements set forth in R400.14313 and has indicated that the home will meet the requirements with respect to nutrition and menus as stated in the rule. Ms. Boyne 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 applicant was also advised that a licensed physician must order any special diets implemented in the home.

Based on the applicant's previous experience, the applicant is well aware of the requirements for staff qualifications and training and intends to comply with the rules. The applicant 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 applicant will also verify age and check references before a person is offered employment. The applicant 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. The applicant understands and intends to comply with the requirements of R400.14204 and R400.14208.

Departmental requirements pertaining to resident records as specified in R400.14316 were discussed with the applicant. The applicant has indicated that it is the corporation's intent to comply with these requirements. The applicant is aware of requirements pertaining to resident rights and prohibited practices as outlined under rules R400.14304 and R400.14308. The applicant attests that it is the intent of the corporation to achieve and maintain compliance with these requirements.

The applicant is aware of her responsibilities as outlined under R400.14311 and the requirements for safeguarding and distributing of prescription medication as outlined in R400.14312. The applicant has again indicated that it is her intent to achieve and maintain compliance with these requirements. The facility is in substantial compliance with Departmental requirements pertaining to investigating and reporting as stipulated in R400.14311, resident medication as stipulated in R400.14312, and resident rights as outlined in R400.14304.

The applicant demonstrates adequate knowledge of the administrative rules pertaining to the handling of resident funds. The applicant has access to the Department's Resident Funds and Valuables Parts II & I forms. The applicant is aware that these are required forms and alternate forms cannot be used unless the Department approves them. Compliance will be evaluated at the time of renewal.

The applicant stated that she has an understanding of the R400.14317 relating to resident recreation and intends to comply through an activity schedule for the home which will expose the residents to a variety of community based recreation and leisure time activities.

The applicant is aware of the requirements of R400.14318 and R400.14319 and has stated that she will comply with the requirements of the rules regarding emergency and regular transportation.

C. Rule/Statutory Violations

The applicant is currently in compliance with all administrative rules and statutory requirements.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home (capacity 7-12).



12/11/09

Kent W Gieselman
Licensing Consultant

Date

Approved By:



12/14/09

Betsy Montgomery
Area Manager

Date