

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



March 9, 2010

Garth Comfort 1111 Lum Ave. Kalamazoo, MI 49048

RE: Application #: AF390306249

Comfort Home 1111 Lum Ave.

Kalamazoo, MI 49048

Dear Mr. Comfort:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (269) 337-5066.

Sincerely,

Susan Gamber, Licensing Consultant Bureau of Children and Adult Licensing 322 E. Stockbridge Ave

Kalamazoo, MI 49001 (269) 337-5028

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF390306249

Applicant Name: Garth Comfort

Applicant Address: 1111 Lum Ave.

Kalamazoo, MI 49048

Applicant Telephone #: (269) 344-8761

Administrator/Licensee Designee: N/A

Name of Facility: Comfort Home

Facility Address: 1111 Lum Ave.

Kalamazoo, MI 49048

Facility Telephone #: (269) 344-8761

12/29/2009

Application Date:

Capacity: 6

Program Type: MENTALLY ILL

AGED

II. METHODOLOGY

12/29/2009	Enrollment
01/06/2010	File Transferred To Field Office Kalamazoo
01/06/2010	Contact - Document Sent Rule & ACT Books
01/08/2010	Application Incomplete Letter Sent
02/03/2010	Inspection Completed On-site
02/25/2010	Technical Assistance fire safety rules
03/08/2010	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This is an older, wooden frame house located in a residential area of similar style homes. The facility is not handicapped accessible. Stairs lead to the front and back doors, and resident bedrooms and bathroom are located on the second floor.

The back yard is fenced in. Residents have free access to and from the foster home through front and side doors.

The basement is not finished and contains the heat plant, washer and dryer, and hot water heater. The licensee does have a small living area, including bathroom, in the basement. Floor separation between the basement and the rest of the house is in place.

The main floor contains a spacious living room, kitchen, dining room, and office, as well as the licensee's bedroom.

Three resident bedrooms are on the upper level, as is a full bathroom. The upstairs also contains a small living room area for resident use. The three resident bedrooms have sufficient square footage to house two residents apiece.

This home also has sufficient square footage to meet the rule requirement of 35 square feet per home occupant. It also meets the requirement for bathroom and bathing facilities. The residents' bathroom is on the second floor; the licensee has a private bath in the basement.

This home is located within the city limits of Kalamazoo, and is on public water and sewage disposal systems.

The facility is heated with a boiler system which is inspected annually, most recently on October 5, 2009.

Paneling in the upstairs hallway, kitchen, and licensee bedroom are approved Class C fire rated. Other paneling has been removed and replaced with approved drywall.

The facility does have battery operated smoke detectors and fire extinguishers as required for family foster homes.

B. Program Description

This facility was previously licensed as an adult foster care family home with a single licensee. When that licensee passed away in December 2009, her daughter and son in law moved in to the facility, and son in law Garth Comfort applied to become licensee. Mr. Comfort and his wife are also the owners of the property.

Mr. Comfort plans to continue with the previous program of providing care to women primarily with a diagnosis of mental illness and the aged. He will accept SSI payments. Smoking is permitted outside on a smoking porch. He will provide transportation to resident appointments as necessary.

Mr. Comfort and his wife provided evidence of good moral character with license record clearances, and have provided documentation from their physicians of their mental and physical capabilities, as well as evidence that they are free of communicable TB.

While Mr. Comfort is the sole licensee his wife will be providing personal care to the female residents. His wife also assisted her mother when she was licensee and is familiar with the paperwork and care requirements of a family foster home.

Mr. Comfort and his wife are the primary caregivers but will have relief responsible persons as necessary. Mr. Comfort was provided technical assistance on the statutory requirements pertaining to the hiring or contracting of persons who provide direct services to residents.

Mr. Comfort was provided a sample of forms required for rule compliance.

C. Rule/Statutory Violations

Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident and employee record keeping including the handling and accounting of resident funds.

On March 8, 2010 the applicant was found to be in substantial compliance with the licensing act and applicable administrative rules. Quality of care rules will be further evaluated once a license is issued.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult family home (capacity 1-6).

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Susan Gamber	March 9, 2010
Licensing Consultant	Date
Approved By: Gregory V. Corrigan	
0 0	March 9, 2010
Gregory V. Corrigan Area Manager	Date