



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



JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

August 4, 2010

Michael Kirby
Kirby's Adult Foster Care Services, Inc.
2285 E. Lily Lake
Harrison, MI 48625

RE: Application #: AS180308851
Kirby's AFC
2285 E. Lily Lake
Harrison, MI 48625

Dear Kirby's Adult Foster Care Services Inc.:

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 (989) 758-2717.

Sincerely,

Ronald R. Verhelle, Licensing Consultant
Bureau of Children and Adult Licensing
1919 Parkland Drive
Mt. Pleasant, MI 48858-8010
(989) 772-8474

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS180308851
Applicant Name:	Kirby's Adult Foster Care Services, Inc.
Applicant Address:	2285 E. Lily Lake Harrison, MI 48625
Applicant Telephone #:	(989) 539-0284
Administrator/Licensee Designee:	Michael Kirby
Name of Facility:	Kirby's AFC
Facility Address:	2285 E. Lily Lake Harrison, MI 48625
Facility Telephone #:	(989) 539-0284
Application Date:	06/10/2010
Capacity:	6
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED

II. METHODOLOGY

06/10/2010	Enrollment
06/21/2010	Inspection Completed-Environmental Health : A
07/20/2010	Inspection Completed - Onsite Substantial compliance.
08/02/2010	Inspection Completed - Onsite Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The property located at 2285 E. Lily Lake Rd., Harrison, Michigan 48625, is owned by Michael and Melissa Kirby and leased to Kirby 's Adult Foster Care Services, Inc. This property is mortgaged with Wells Fargo Mortgage Company. The premises located at the above address is rurally situated on a paved road approximately two miles from downtown Harrison. There is ample parking space on the premises. Kirby's AFC was originally licensed to Michael and Melissa Kirby as a family home (AF180246307) with a February 22, 2002, application date.

Kirby's AFC is a single story modular home that features a deck and an attached two-car garage. Kirby's AFC contains a dining room, two living rooms, recreation room, kitchen, three bathrooms, two private bedrooms, and two semi private-bedrooms. The capacity of Kirby's AFC will enable six adult male and or female residents to occupy two private bedrooms and two semi-private bedrooms. Kirby's AFC is heated with propane and cooled with central air-conditioning. Kirby's AFC has a private well and public septic system. Kirby's AFC is not barrier-free and wheelchair users can not be accepted for admission.

Kirby's AFC furnace is located in the crawl space with outside access. The furnace was inspected by Hilts Plumbing and Heating, Inc. on July 20, 2010, and is fully operational. Kirby's AFC is equipped with an interconnected hard-wired smoke detection system with battery back up which was inspected by D & R Electric on July 26, 2010, and is fully operational.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12' 9" x 11' 8"	149.81	2
2	10' x 10' 1"	100.83	1
3	10' 5" x 8' 9"	90.20	1
4	14' 8' x 11' 2"	173.47	2

The living, dining, and sitting room areas measure a total of 754.06 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that Kirby's AFC can accommodate six (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for Kirby's AFC were reviewed and accepted as written. Kirby's Adult Foster Care Services, Inc. intends to provide 24-hour supervision, protection and personal care to six (6) male or female ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency. Residents will be referred from Community Mental Health for Central Michigan.

Kirby's Adult Foster Care Services, Inc. will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of Kirby's AFC to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is **Kirby Adult Foster Care Services, Inc.**, which is a "For Profit Corporation" was established in Michigan, April 7, 2010. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

A licensing record clearance request was completed with no lein convictions recorded for the licensee designee and the administrator, Michael Kirby. Mr. Kirby submitted a medical clearance request with statements from a physician documenting his good health and current TB-tine negative results.

The licensee designee and administrator, Michael Kirby, has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of one staff to six residents per shift. All staff shall be awake during sleeping hours.

Mr. Kirby acknowledged an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

Mr. Kirby acknowledged an understanding of his responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to be maintained in each employee’s record to demonstrate compliance.

Mr. Kirby acknowledged an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, Mr. Kirby indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Mr. Kirby acknowledged his responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, Mr. Kirby acknowledged his responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee’s file.

Mr. Kirby acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Mr. Kirby indicated that it is his intent to achieve and maintain compliance with these requirements.

Mr. Kirby acknowledged an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. Mr. Kirby indicated his intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Mr. Kirby acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

Mr. Kirby acknowledged his responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident’s admission

to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, Mr. Kirby acknowledged his responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

Mr. Kirby acknowledged his responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care small group home (capacity 6).

Ronald R. Verhelle

August 4, 2010

Ronald R. Verhelle
Licensing Consultant

Date

Approved By:

Gregory Rice

August 4, 2010

Gregory Rice
Area Manager

Date