



RICK SNYDER  
GOVERNOR

State of Michigan  
DEPARTMENT OF HUMAN SERVICES  
BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN  
DIRECTOR

December 13, 2011

Mounirah Abuaita  
A & M Inc.  
11328 N. Bray Rd.  
Clio, MI 48420

RE: Application #: AM250298908  
A & M Inc.  
11328 N. Bray Rd.  
Clio, MI 48420

Dear Ms. Abuaita:

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 12 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 (248) 975-5053.

Sincerely,

Lisa Gundry, Licensing Consultant  
Bureau of Children and Adult Licensing  
4809 Clio Road  
Flint, MI 48504  
(810) 787-7033

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM250298908
<b>Applicant Name:</b>	A & M Inc.
<b>Applicant Address:</b>	11328 N. Bray Rd. Clio, MI 48420
<b>Applicant Telephone #:</b>	(810) 247-2343
<b>Administrator/Licensee Designee:</b>	Mounirah Abuaita, Designee
<b>Name of Facility:</b>	A & M Inc.
<b>Facility Address:</b>	11328 N. Bray Rd. Clio, MI 48420
<b>Facility Telephone #:</b>	(810) 247-2343
<b>Application Date:</b>	11/05/2008
<b>Capacity:</b>	12
<b>Program Type:</b>	AGED PHYSICALLY HANDICAPPED

## II. METHODOLOGY

11/05/2008	Enrollment
11/13/2008	Contact - Telephone call received TC from applicant, asking for onsite inspection right away
11/19/2008	Application Incomplete Letter Sent
11/19/2008	Contact - Telephone call made TC to applicant, left message regarding application
11/24/2008	Inspection Completed On-site
01/25/2010	Contact - Telephone call received TC with applicant, she will send email with progress made
07/08/2010	Contact - Document Sent lack of progress letter sent, in addition to Plan review disapproval letter
07/08/2010	Contact - Telephone call made TC with applicant moving forward on application, although disapproval on plan review.
09/01/2010	Contact - Telephone call received TC with applicant, she is almost done with BFS changes, and will update consultant.
04/19/2011	Contact - Document Sent Lack of Progress letter sent
06/07/2011	Inspection Completed-Fire Safety: B
06/22/2011	Inspection Completed-Env. Health: A
11/30/2011	Inspection Completed-Fire Safety: A
12/08/2011	Inspection Completed On-site
12/08/2011	Inspection Completed-BCAL Full Compliance
12/12/2011	Application Complete/On-site Needed

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

The A & M Inc. home is a seven bedroom home located at 11328 N. Bray Rd Clio, in Genesee County. The home is located in a well-established neighborhood near the town of Clio. The lot is large and is nicely landscaped. The physical plant is a one story vinyl and brick-sided structure with a finished walk-out basement. The main floor consists of a large living room, a dining room, kitchen and five resident bedrooms. The lower level has two resident bedrooms and private living quarters for potential live-in staff. The home has three full bathrooms on the main floor and one full bathroom on the lower level. Each bedroom has a closet. The facility has adequate storage areas. There is an attached garage which may be used for additional storage areas. There is a driveway with adequate parking for staff and visitors.

The home is equipped with a furnace and hot water heater, which are located in the basement. Floor separation is achieved by a 1¾ inch solid core door equipped with an automatic self-closing device and positive latching hardware. The home is equipped with laundry facilities. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational. The facility has a private sewer and water system. Both were inspected by the Genesee County Health Department on June 11, 2010. The facility was determined to be in substantial compliance with all applicable rules.

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

<b>BEDROOM #</b>	<b>Room Dimensions</b>	<b>Total square Footage</b>	<b>Total Resident Beds</b>
Upstairs 1	10'8 x 11'5 + 2'10 x 2'3	128	1
Upstairs 2	13' x 11'10	154	2
Upstairs 3	13'7 x 12'1	164	2
Upstairs 4	13'8 x 16'	219	2
Upstairs 5	15' x 9'	135	1
Downstairs 6	19'2 x 10'9	206	2
Downstairs 7	13'9 x 12'1	166	2

The home has an upstairs living room area that measures 275 square feet of living area. The home also has a downstairs sitting and dining area that residents may use. This area measures square feet of living area. This amount meets the requirements of this rule.

The dining room measures 196 square feet. This area is large enough to accommodate 12 residents. This exceeds the minimum of 35 square feet per resident requirement.

Compliance with Rule 400.14410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were adequately furnished, clean, and met all applicable rules relating to environmental and fire safety requirements.

The main floor has two separate and independent means of egress to the outside. The basement has acceptable means of egress through the upstairs and by means of a walk-out door that terminates at ground surface. The means of egress were measured at the time of the initial inspection and exceed the 30 inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

As part of the licensing process, two of the primary means of egress from the home have been equipped with a wheelchair ramp. The ramp was inspected at the time of the final inspection and conforms to the requirements of Rule 400.14509.

The facility was inspected and given full approval by the Bureau of Fire Safety on 11/30/2011. It is equipped with a full sprinkler system, integrated smoke alarm system and all required fire safety equipment.

The home has fire extinguishers, which meets the requirements of R 400.14506. The bedrooms have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.1502, R 400.14503, and R 400.14504.

Based on the above information, it is concluded that this facility can accommodate **twelve (12)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

The applicant A & M Inc. submitted a copy of the required documentation to the consultant. Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to **twelve (12)** male or female ambulatory or wheelchair disabled adults whose are Aged and may be diagnosed with Alzheimer's, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment 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.

A & M Inc. will ensure that the resident's transportation and medical needs are met. A & M Inc. has transportation available for residents to access community-based resources and services. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

### **C. Rule/Statutory Violations**

On 11/05/2008, A & M Inc. submitted an application to provide foster care services to twelve adults at 11328 N. Bray Road Clio, MI.

The applicant, A & M Inc., which is a "Domestic Profit Corporation," was established in Michigan on 09/23/2008. 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.

The home is currently licensed under A & M Inc. as a small group home, AS250299205, capacity six (6) residents. It was originally licensed on January 21, 2009.

A & M Inc. submitted a written statement naming Mounirah Abuaita as the licensee designee and administrator. She submitted a licensing record clearance request that was completed with no LEIN convictions recorded. She also submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. She 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 12-bed facility is adequate and includes a minimum of 1 staff to 12 residents per shift during waking hours.

The applicant acknowledges 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 1-to-12 resident ratio.

The applicant acknowledged an understanding of the 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](http://www.miltcpartnership.org)), L-1 Identity Solutions™ (formerly Identix®), and the related documents required to be maintained in each employees record to demonstrate compliance.

The applicant acknowledges 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, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges their 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, the applicant acknowledges their 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.

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

The applicant acknowledges 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. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The applicant acknowledges their 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, the applicant acknowledges their 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.

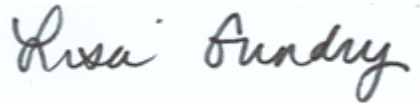
The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

#### **D. Rule and Statutory Violations**

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

**IV. RECOMMENDATION**

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



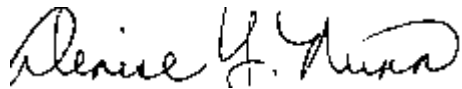
12/12/2011

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Lisa Gundry  
Licensing Consultant

Date

Approved By:



12/13/2011

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Denise Y. Nunn  
Area Manager

Date