



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

June 6, 2012

Florence Baroi
536 Cherry St.
Niles, MI 49120

RE: Application #: AF110316992
Roy AFC Home
536 Cherry Street
Niles, MI 49120

Dear Ms. Baroi:

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,

Karen Hodge, Licensing Consultant
Bureau of Children and Adult Licensing
401 Eighth Street
P.O. Box 1407
Benton Harbor, MI 49023
(269) 363-1742

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF110316992

Applicant Name: Florence Baroi

Applicant Address: Apt. 6
204 N. Matteson Street
Bronson, MI 49028

Applicant Telephone #:

Administrator/Licensee Designee: N/A

Name of Facility: Roy AFC Home

Facility Address: 536 Cherry Street
Niles, MI 49120

Facility Telephone #: (269) 687-7265
01/24/2012

Application Date:

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
AGED
MENTALLY ILL
ALZHEIMERS
PHYSICALLY HANDICAPPED
TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

01/24/2012	Enrollment
01/26/2012	PSOR on Address Completed
01/26/2012	Contact - Document Sent Rules & Act booklets
01/26/2012	Application Incomplete Letter Sent SOS for Florence & Paul
04/02/2012	Application Complete/On-site Needed
05/15/2012	Inspection Completed On-site
06/06/2012	Renewal License Issued

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules governing operation of Adult Foster Care Family homes with an approved capacity of 1-6 residents, licensed or proposed to be licensed after March 27, 1980.

The home is a two-story wood frame structure located within the city limits of Niles, Michigan. There is a cement sidewalk in front of the home leading to the front stairs which leads to a large covered porch on the front of the home. The front door opens to the common living area. There are three bedrooms down the hall from the living room. There are two walk-in storage areas off the hallway as well. At the end of the hallway is the fully-equipped eat-in kitchen which has ample room for six residents to eat at one time. A fourth bedroom is located off the kitchen. The full bathroom for resident use is located off the kitchen as well. The kitchen has a doorway leading to the basement which houses the gas-fired forced air furnace and gas-fired water heater. The door is 1 3/4" thick with a self-closing device. There is a stairway near the front entrance which leads to the second story which is the family's private quarters. The home has public water and sewer as well as trash service. The home has inter-connected smoke alarms which are located in compliance with licensing rules. The home has three fully-charged fire extinguishers.

Room Dimensions are as follows:

	Square Footage	Occupancy
Living Room: 16'6" X 10'6" + 10'6" X 6'8" =	288 SF	
Kitchen/Dining 11'6" X 12'8" =	148 SF	
Bedroom 1: 10'5" X 12'9" =	134 SF	2
Bedroom 2: 6' X 12'9" =	79 SF	1

Bedroom 3:	16'5" X 9'5"	=	160 SF	2
Bedroom 4:	11'6" X 9'6"	=	108 SF	1

Room sizes adequately meet the space requirements set forth in the rules.

This home is owned by Augustine and Lena Mondol who are leasing the home to Paul Roy and Florence Bairoi, husband and wife. Mr. Roy has provided a copy of the lease agreement and a written statement allowing the home to be utilized as an adult foster care facility and to be inspected as needed. The home was licensed to Augustine and Lena Mondol and operated as an adult foster care family home from September, 2001 until June, 2012.

The home will accommodate six residents and state rate payment is accepted. The home is situated within walking distance of local businesses and is served by public transportation. The applicant and her husband will provide transportation by private car for local medical appointments.

B. Program Description

Florence Baroi is the licensee and her husband, Paul Roy will assist with care and supervision of residents and will serve as the responsible person in the absence of Florence Baroi. Ms. Baroi is a certified nursing assistant and has experience working in other adult foster care facilities. Mr. Roy has been trained in CPR and First Aid and worked as a phlebotomist. Both the applicant and responsible person express the capacity to meet the needs of residents. The facility intends to provide care to adults with mental illness and developmental disabilities who are 18 years of age and older. They will also accept people who are elderly, physically handicapped or with traumatic brain injury. The home is not wheelchair accessible.

Record clearance requests have been processed and, based upon the results, Florence Baroi and Paul Roy are in compliance with the Good Moral Character provisions of the act and therefore are able to run an adult foster care facility. Medical Clearance requests have been submitted as well as current information that they are free from communicable tuberculosis. The applicant has indicated they have the financial capability to meet the needs of residents.

The applicant has indicated there will be one person on duty at all times to meet the needs of up to six residents.

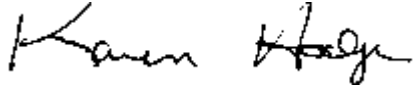
The consultant has reviewed the paperwork requirements with Ms. Baroi and Mr. Roy. Technical Assistance was provided to the applicant on Act and administrative rule requirements related to home, resident and employee record keeping including handling and accounting of the resident funds.

C. Rule/Statutory Violations

The facility is in compliance with applicable licensing statutes and administrative rules.

IV. RECOMMENDATION

I recommend that a six-month temporary license be issued for this Adult Foster Care Family Home. (capacity 6)

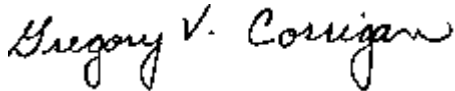


06/06/2012

Karen Hodge
Licensing Consultant

Date

Approved By:



06/06/2012

Gregory V. Corrigan
Area Manager

Date