



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

March 13, 2013

Sheila McCoy
6226 Mayville Road
Clifford, MI 48727

RE: Application #: AF790338669
Sheila's Adult Care
6226 Mayville Road
Clifford, MI 48727

Dear Ms. McCoy:

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 (517) 373-2506.

Sincerely,

Ronald R. Verhelle, Licensing Consultant
Bureau of Children and Adult Licensing
1919 Parkland Drive
Mt. Pleasant, MI 48858-8010
(989) 948-0561

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF790338669
Applicant Name:	Sheila McCoy
Applicant Address:	6226 Mayville Road Clifford, MI 48727
Applicant Telephone #:	(989) 325-1751
Name of Facility:	Sheila's Adult Care
Facility Address:	6226 Mayville Road Clifford, MI 48727
Facility Telephone #:	(989) 325-1751
Application Date:	02/13/2013
Capacity:	6
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED AGED TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

02/13/2013	Enrollment
03/05/2013	Inspection Completed - Environmental Health: A
03/11/2013	Inspection Completed-BCAL Substantial Compliance
03/13/2013	Contact - Documents Received
03/13/2013	Inspection Completed -BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The property known as Sheila's Adult Care is situated at 6226 Mayfield Road, Clifford, MI 48727. The property is owned by Sheila and her husband, David McCoy, and there is no mortgage. The premises are located on substantial acreage in the country between Kingston and Marlette. The home is new construction and a Certificate of Occupancy was issued by South Central Michigan Construction Code Inspections, Tuscola County, on February 5, 2013. The home has ample off road parking.

Sheila's Adult Care features contemporary styling with upscale furnishings and interior décor. The exterior of the home features an elevated driveway and large yard. The home is built upon a full basement. The home has large upper level living and dining rooms, kitchen, bathroom, office, utility room, provider bedroom, and semi-private resident bedroom. The home also has a very large lower level living and dining room, four private resident bedrooms, utility room, three storage rooms, bathroom, and furnace room. Vertical floor separation between each level of the home is achieved by fire rated doors and is further enhanced by a fire rated furnace room door. The home is heated by a geothermal heating device and is serviced private well and septic. The capacity of the home will enable six (6) six residents to utilize one semi-private bedroom on the upper level and four private bedrooms on the lower level of the home. The home is not barrier free and wheelchair users can not be accepted. There is also space in the home for the licensee, her husband, and granddaughter.

Resident bedrooms measurements were confirmed during the initial onsite inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	13' 7" x 15' 7"	(Upper Level) 211.66	2
2	12' 2" x 15' 4"	(Lower Level) 186.54	1

3	12' 2" x 15' 4"	(Lower Level) 186.54	1
4	14'4" x 11'	(Lower Level) 157.63	1
5	12'4" x 12' 8"	(Lower Level) 156.10	1

The upstairs and downstairs living and dining room areas measure a total of 1365 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

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

Sheila's Adult Care furnace room is constructed of material that has a 1-hour fire resistance rating and protected by a fire rated door equipped with non-locking against-egress door hardware. The hot water heaters are located in the furnace room. An interconnected smoke detection system has been installed and is hard wired to the building's electrical supply with battery back-up. Fire extinguishers are located on each level and emergency evacuation plans have been posted throughout the home. The ceiling tiles in various locations throughout the home are rated Class A with a flame spread of 25 and developed smoke at 50.

On March 5, 2013, the Tuscola County Health Department determined Sheila's Adult Care to be in compliance with the *Environmental Health Rules for Adult Foster Care Family Homes*.

On March 11, 2013, I determined the home to be in substantial compliance with the *Maintenance of Premises Rules for Adult Foster Care Family Homes*. Additional handrails and smoke detectors were required.

On March 13, 2013, I reviewed photographs of handrails installed in the upper and lower level bathrooms and home ingress and egress from garage. I also received photographs of smoke detectors installed in upper and lower level utility rooms and furnace room.

On March 13, 2013, I determined Sheila's Adult Care to be in compliance with the *Maintenance of Premises Rules for Adult Foster Care Family Homes*.

On March 13, 2013, I determined the home to be in compliance with the *Fire Safety Rules for Adult Foster Care Family Homes*.

B. Program Description

Sheila McCoy intends to provide 24-hour supervision, protection and personal care to six (6) ambulatory residents, whose diagnosis is aged developmentally disabled, mentally ill, and or traumatic brain injured. The program will include social interaction

skills, personal hygiene, personal adjustment skills, public safety skills and transportation. 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, or the responsible person.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources including the public schools and library, local museums, and shopping centers. These resources provide an environment to enhance the quality of life and increase the independence of each resident.

C. Applicant and Responsible Person Qualifications

A licensing record clearance request was completed with no LEIN convictions recorded for Sheila McCoy, applicant, and Sydni McCoy, unpaid responsible person. Mrs. McCoy and her responsible person also submitted medical clearance requests with statements from their physician documenting their good health and current TB-tine negative results.

Mrs. McCoy has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents along with David McCoy's outside employment.

Sheila McCoy acknowledges the understanding of the requirement of an adult foster care family home is that the licensee resides in the home in order to maintain this category type of adult foster care license.

The supervision of the residents in this family home licensed for (6) residents will be the responsibility of the family home applicant, Sheila McCoy, 24 hours a day / 7 days a week with the responsible person on call to provide supervision in relief.

Sheila McCoy acknowledges an understanding of the qualification requirements for the responsible person or volunteers providing care to residents in the home.

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), and the related documents required to be maintained in each employee's record to demonstrate compliance.

Sheila McCoy acknowledges an understanding of the administrative rules regarding medication procedures. In addition, Mrs. McCoy 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.

Sheila McCoy acknowledges her responsibility to obtain all required documentation and signatures that are to be completed prior to the responsible person and volunteers or staff working directly with residents. In addition, the Mrs. McCoy acknowledges her responsibility to maintain a current employee record on file in the home for the licensee, responsible person, or volunteer or staff, and the retention schedule for all of the documents contained within each employee's file.

Sheila McCoy acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Sheila McCoy acknowledges an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-Day discharge written notice to a resident as well as when a resident can be discharged before the issuance of a 30-Day written discharge notice.

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

Sheila McCoy acknowledges an understanding of the administrative rules regarding the written and verbal reporting of accidents and incidents and the responsibility to conduct an immediate investigation of the cause. Mrs. McCoy has indicated her intention to achieve and maintain compliance with reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

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

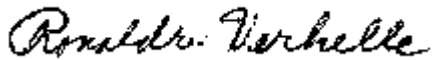
Sheila McCoy acknowledges her responsibility to obtain the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, Mrs. McCoy acknowledges her 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.

D. Rule/Statutory Violations

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

VI. RECOMMENDATION

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

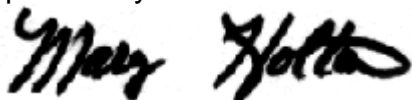


March 13, 2013

Ronald R. Verhelle

Date

Approved By:



March 13, 2013

Mary E. Holton
Area Manager

Date

