



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS

MIKE ZIMMER  
DIRECTOR

February 17, 2016

Harold Hurt  
Macomb Family Services Inc.  
124 West Gates  
Romeo, MI 48065

RE: Application #: AS500378403  
Junction  
50494 Ruedisale  
New Baltimore, MI 48047

Dear Mr. Hurt:

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 5 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Williams".

Stephanie A. Williams, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(586) 256-2097

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS500378403
<b>Applicant Name:</b>	Macomb Family Services Inc.
<b>Applicant Address:</b>	124 West Gates Romeo, MI 48065
<b>Applicant Telephone #:</b>	(586) 336-0422
<b>Administrator/Licensee Designee:</b>	Harold Hurt, Designee
<b>Name of Facility:</b>	Junction
<b>Facility Address:</b>	50494 Ruedisale New Baltimore, MI 48047
<b>Facility Telephone #:</b>	(586) 779-3680
<b>Application Date:</b>	03/31/2015
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODOLOGY

03/31/2015	Enrollment Online enrollment
07/09/2015	Contact - Document Sent Rules and Act booklets
07/15/2015	License Unit file referred for criminal history review Linda Hill- RS
08/14/2015	Contact - Document Received Licensing file received from Central office
08/24/2015	Contact - Document Received Supportive documents received.
08/25/2015	Application Incomplete Letter Sent
09/27/2015	Contact - Document Received Supportive documents received through email.
10/15/2015	Inspection Completed On-site
10/15/2015	Inspection Completed-BCAL Sub. Compliance
11/19/2015	Inspection Completed On-site
11/19/2015	Inspection Completed-BCAL Sub. Compliance
12/02/2015	Contact - Document Received Supportive documents received.
01/04/2016	Contact - Document Sent Email received from Mr. Hurt.
01/13/2016	Inspection Completed On-site
01/13/2016	Contact - Document Sent Email sent to Mr. Hurt.
01/13/2016	Contact - Document Received Supportive documents received.
01/19/2016	Contact - Document Received Supportive documents received.

01/22/2016	Contact – Telephone call made Spoke with Mr. Hurt.
01/25/2016	Contact - Document Received Supportive documents received.
02/04/2016	Contact - Document Received Supportive documents received.
02/09/2016	Contact – Face to Face Supportive documents received from Mr. Hurt at local area office.
02/17/2016	Inspection Completed-BCAL Full Compliance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

The facility is a brick ranch-style home with an attached, two-car garage. The home has a ramp located at the front egress door however the home is not wheelchair accessible as it does not meet *R400.14509 (1)*. The property is fully landscaped and the rear yard is enclosed with a fence. Macomb Family Services Inc. shall have in place safeguards to ensure the residents' safety as the backyard ends at a water canal. The home is located in a residential neighborhood in New Baltimore, a suburb east of the City of Detroit. The home and surrounding community are serviced by public water and sewage systems. Medical, educational, and social resources are located within close proximity to the home in the surrounding community. Mr. Harold Hunt has been identified as the proposed licensee designee/administrator for the home.

Mr. Hurt is the current licensee designee for Macomb Family Services, Inc. which operates nine adult foster care facilities located within the Macomb County area. Macomb Family Services, Inc. has a licensed group home Junction (AM500008980) in which the residents will be moved into this facility once licensed and the previous Junction home will be closed.

Junction features an interconnected smoke detection system that is audible throughout the home. The smoke detection will need to be inspected and certified as being in good operating condition by a qualified inspection service. Fire extinguishers have been installed and mounted as required in the home and in the garage. The home is heated by gas, forced-air furnace located in the basement; complete with a 1¾-inch solid core door equipped with an automatic self-closing device. A new furnace has been installed in the home (2015). The home also features central air conditioning. The laundry facilities are located in the basement. Mr. Hurt has identified a two door cabinet separate from the kitchen that will have the appropriate secured locked hardware where

residents' medications will be kept. Caustics will be stored away in a locked cabinet and safeguarded in a nonresident area.

The family room is located by the front door entrance. The common room is located off the kitchen and includes the rear door. The resident's dining area is found slightly before entering into the kitchen area. The home features three bathrooms: a full bath, bathroom with shower stall located in bedroom#3 and ½-bathroom located by common area. I measured all community living space and bedrooms within the home to determine occupancy limits. The measurements, square footage, and capacity limits are as follow:

Dining area	12'3" x 10"	122 square feet
Family room	17'11" x 13'1"	234.4 square feet
Common room	12'2" x 20'3"	246.4 square feet

Total square footage of community space: 602.8 square feet.

Bedroom #1	9'11" x 9'9"	97 square feet	total capacity: 1
Bedroom #2	12'11" x 12'11"	167 square feet	total capacity: 2
Bedroom #3	13'3" x 10'11"	145 square feet	total capacity: 2
Office (Non-used bedroom)	13'5" x 10'10"	145.3 square feet	

The square footage of community space is adequate for the facility to accommodate up to five adult foster care residents. Each bedroom meets rule requirement *R400.14409 (2)(3)* which will allow bedroom #2 and bedroom #3 to have the capacity of two residents in each and bedroom #1 will only have one resident. Each bedroom meets *R400.144010*. Mr. Hurt has identified that one of the rooms located by the residents' bedrooms will be used as staff office and not used as a bedroom.

## **B. Program Description**

The applicant, Macomb Family Services, Inc. has applied for licensure of this facility, a previously licensed facility known as Ruedisale (closed 07/16/2015). The home will serve a maximum of five males. The facility provides specialized care to the developmentally disabled population, contract and services will continue uninterrupted from their previous adult foster care home. Macomb Family Services, Inc. was incorporated on October 19, 1965 and is experienced in providing specialized adult foster care services to the developmentally disabled and mentally ill population.

Residents receive services that are designed to provide residents with the opportunity to achieve their maximum levels of independence and social inclusion in an environment that is minimally restrictive and safe. Services include personal care, maintenance of

living environment, transportation to community activities and medical/dental appointments, and support for inclusion into the community activities scheduled and/or available. Staff assists the consumers with personal care or provides supervised personal care.

Mr. Harold Hurt, licensee designee and administrator has demonstrated suitability and experience in the operation of adult foster care facilities and the population served by this facility. He has provided licensing clearance requests, health care documentation, and tuberculosis testing results to demonstrate his suitability. Mr. Hurt also provided financial documentation to demonstrate the financial suitability of Macomb Family Services.

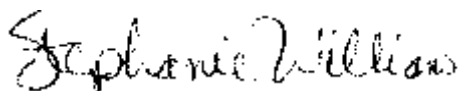
I have reviewed the personnel policies, job descriptions, and house rules submitted by the applicant and found that they meet all requirements. The applicant was provided with technical assistance as to the statutory requirements of Section 400.734b of Public Act 218 pertaining to the hiring or contracting of persons who provide direct service to residents. 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 residents' funds.

**C. Rule/Statutory Violations**

At time of the final inspection no violations were found.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult small group home for five residents.



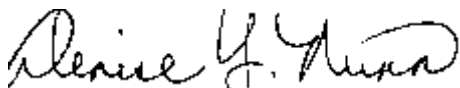
02/17/2016

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Stephanie A. Williams  
Licensing Consultant

Date

Approved By:



02/17/2016

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Denise Y. Nunn  
Area Manager

Date