



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

May 25, 2021

Gilford Benton, Jr.  
Lou's AFC Inc  
1257 S Jefferson Ave  
Saginaw, MI 48601

RE: Application #: AL730406566  
Lou's AFCH Inc  
1257 S Jefferson Ave  
Saginaw, MI 48601

Dear Mr. Benton, Jr.:

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 20 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 (810) 787-7031.

Sincerely,

A handwritten signature in cursive script that reads "Christopher A. Holvey".

Christopher Holvey, Licensing Consultant  
Bureau of Community and Health Systems  
4809 Clio Road  
Flint, MI 48504  
(517) 899-5659

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL730406566
<b>Applicant Name:</b>	Lou's AFC Inc
<b>Applicant Address:</b>	1257 S Jefferson Ave Saginaw, MI 48601
<b>Applicant Telephone #:</b>	(989) 293-5203
<b>Administrator/Licensee Designee:</b>	Gilford Benton, Jr.
<b>Name of Facility:</b>	Lou's AFCH Inc
<b>Facility Address:</b>	1257 S Jefferson Ave Saginaw, MI 48601
<b>Facility Telephone #:</b>	(989) 752-2803
<b>Application Date:</b>	11/16/2020
<b>Capacity:</b>	20
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODOLOGY

11/16/2020	Enrollment
11/16/2020	Contact - Document Received 1326 for Gilford
11/25/2020	Application Incomplete Letter Sent RI030 & AFC100 for Gilford
11/25/2020	Contact - Document Sent RI030 & AFC100
11/25/2020	Inspection Report Requested - Fire
11/25/2020	Contact - Document Sent Fire Safety String
12/14/2020	Licensing Unit file referred for background check review Gilford Benton, Jr.
01/21/2021	Application Incomplete Letter Sent
02/23/2021	Application Complete/On-site Needed
03/16/2021	Inspection Completed – Fire Safety: A
05/07/2021	Inspection Completed-BCAL Sub. Compliance
05/17/2021	Inspection Completed- Env. Health: A
05/17/2021	Inspection Completed-BCAL Full Compliance
05/18/2021	Recommend License Issuance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

Lou's AFCH Inc. is located at 1257 S. Jefferson Ave., Saginaw, MI. 48601 in Genesee County. The facility is owned by Gilford Benton Jr. It has a large driveway for ample parking space for staff and visitors. The facility is a multi-level structure and is located on a city lot.

The first floor of the facility has one resident bedroom, one full bath, one ½ bath, two separate kitchens, two separate dining rooms, living room, television room, game room, staff office, medication room, and a large storage room. This facility has a total of four

exits, which all have multiple steps for entry/exit. This facility is not wheelchair accessible.

The second level of this facility consists of eight (8) resident bedrooms, five (5) full baths and one (1) staff office.

The basement level of this facility consists of a laundry/furnace room, a large food pantry and ample room for storage. The boiler and hot water heater are separated from the residents with a fire rated door located at the top of the basement stairs, which is equipped with an automatic self-closing device and positive latching hardware. There are multiple fire extinguishers located throughout the facility, with at least one on every level of the facility. The smoke detectors are all hard-wired into the facility's electrical and fire detection system and are located in all sleeping and living areas. The facility's boiler was inspected by a licensed heating professional on 8/24/20 and a certificate of approval was provided, which is valid through 8/24/2022. On 3/16/2021, full fire safety approval was given to this facility by the Bureau of Fire Services.

The facility has a public water and sewer system. On 5/7/2021, this facility was inspected for environmental safety and it was determined to be in full compliance with all applicable licensing rules pertaining to environmental health.

The resident bedrooms were measured as follows:

<b>Bedroom</b>	<b>Square footage</b>	<b># of Residents</b>
Bedroom # 1 - 1 <sup>st</sup> floor	329 square feet	3
Bedroom # 2 - 2nd floor	461 square feet	4
Bedroom # 3 - 2nd floor	210 square feet	2
Bedroom # 4 - 2nd floor	195 square feet	2
Bedroom # 5 - 2nd floor	88 square feet	1
Bedroom # 6 - 2nd floor	97 square feet	1
Bedroom # 7 - 2nd floor	84 square feet	1
Bedroom # 8 - 2nd floor	222 square feet	3
Bedroom # 9 - 2nd floor	336 square feet	3

This license is being provided in continuous effect of the previous license and no disruption of any resident's care has occurred; therefore, the licensing rule (R 400.15409 (5)) allowing 2-4 beds in a room has been approved. The applicant/licensee has obtained written approval from each resident and/or resident's designated representative to reside in a multioccupancy room of three (3) or more, in order to comply with licensing rule 409 (6).

The living space in the home is as follows:

<b>Room</b>	<b>Square footage</b>
Living Room	463 square feet

Dining Room #1	221 square feet
Dining Room #2	254 square feet
Television Room	167 square feet
Game Room	109 square feet
	Total Sq. Footage = 1214

The 1,214 square feet of living space exceeds the minimum of 35 square feet per resident requirement.

## **B. Program Description**

The facility has the capacity to provide 24-hour supervision, protection, and personal care for up to twenty (20) aged male and/or female residents over the age of 19, who suffer from mental illness and/or developmental disabilities. The facility's goal is to maintain the highest quality of life for their residents, while providing a safe and comfortable environment. The program will enhance physical, social, and cognitive abilities, with the emphasis on activities which include activities of daily living. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs. This facility will provide staff that is attentive and well trained and will utilize community services such as educational workshops and senior centers. This facility is not wheelchair accessible.

## **C. Applicant and Administrator Qualifications**

Lou's AFC Inc. has appointed Gilford Benton Jr. as the licensee designee and administrator of the facility. A criminal history background check was completed for Mr. Benton and he has been determined to be of good moral character. He has submitted statements from a physician documenting his good health and current TB-tine negative results.

The applicant has sufficient resources to provide for the adequate care of the residents as evidenced by projected income for AFC residents along with other financial resources.

The supervision of residents in this large group home licensed for (20) residents will be the responsibility of the applicant 24 hours day / 7 days a week. The applicant has indicated that for the original license of this 20-bed large group home, there is adequate supervision with 2 direct care staff on-site for twenty (20) residents. The applicant acknowledges that the number of direct care staff on-site to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents.

The applicant acknowledges an understanding of the training and qualification requirements for the responsible person or volunteers providing care to residents in the home.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, 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)), and the related documents required to be maintained in each employee's 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 establish good moral character and suitability, obtain and maintain documentation of good physical and mental health status, maintain documentation of all required trainings, and obtain all required documentation and signatures that are to be completed prior to direct care staff and volunteers working directly with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, or volunteer staff, and the retention schedule for all of the documents contained within each employee's file.

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 volunteers and the retention schedule for all of the documents contained within the employee's file. The applicant 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.

The applicant acknowledges their responsibility to obtain the required written assessment, written assessment plan, resident care agreement, and health care appraisal 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.

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 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 discharge written notice.

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 an accident involving 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 that a separate Resident Funds Part II (BCAL-2319) form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

Gilford Benton Jr. has 1 1/2-years' experience as home manager/direct care worker providing personal care, supervision, and protection to the mentally ill and developmentally disabled population. Mr. Benton reports that all resident files will be kept on the facility grounds.

#### **D. Rule/Statutory Violations**

Compliance with the physical plant rules has been determined. All items cited for correction have been verified by visual inspection. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via an on-site inspection.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).



05/24/2021

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Christopher Holvey  
Licensing Consultant

Date

Approved By:



05/25/2021

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Mary E Holton  
Area Manager

Date