

STATE OF MICHIGAN FAMILY INDEPENDENCE AGENCY OFFICE OF CHILDREN AND ADULT LICENSING



April 20, 2004

Jennifer Chism 8600 Briar Hill Herron, MI 49744

> RE: Application #: AF040263988 Chism Home 8600 Briar Hill Herron, MI 49744

Dear Mrs. Chism:

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 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 (989) 773-6770.

Sincerely,

Diane L Stier, Licensing Consultant Office of Children and Adult Licensing 310 W. Michigan Mt. Pleasant, MI 48858 (989) 773-6773

enclosure

#### MICHIGAN FAMILY INDEPENDENCE AGENCY OFFICE OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

# I. IDENTIFYING INFORMATION

License #:	AF040263988
Applicant Name:	Jennifer Chism
Applicant Address:	8600 Briar Hill Herron, MI 49744
Applicant Telephone #:	(989) 727-2735
Administrator/Licensee Designee:	N/A
Name of Facility:	Chism Home
Facility Address:	8600 Briar Hill Herron, MI 49744
Facility Telephone #:	(989) 727-2735 01/14/2004
Application Date:	01/14/2004
Capacity:	5
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED

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# II. METHODOLOGY

01/14/2004	Enrollment
01/21/2004	Inspection Report Requested - Health
01/21/2004	Comment Entire LU file sent to area mgr
01/23/2004	Comment Application Packet Received from C.O.
02/18/2004	Inspection Completed-Env. Health : A
03/19/2004	Inspection Completed On-site
04/05/2004	Inspection Completed-BFS Full Compliance

# III. DESCRIPTION OF FINDINGS & CONCLUSIONS

## A. Physical Description of Facility

This is a large family home with a partial basement, with a new ground-level addition. The home is located in a rural area of Alpena County, about 15 miles from Alpena. The consultant inspected the facility, and copies of the final inspection approvals from the local building authorities for the addition are on file. The LP gas furnace and water heater are located in the basement, separated from the home by the required fire door. The Environmental Health Inspection was completed on 2/18/04 by the local sanitarian, and the facility was found to be in full compliance.

The home has three resident bedrooms. One is on the main level of the home near family bedrooms, and measures 11' x 13' (143 sq. ft.), suitable for 2 residents. The other two resident bedrooms are located in the ground-level addition. The first measures 9' x 12.6' (113 sq. ft. – for one resident) and the other measures 25' x 10.75' (268 sq. ft. – for two or three residents). Thus, the facility could have a capacity for 6 residents according to space requirements. However, the applicant's five children (all under the age of 12) also reside in the facility. Thus, to comply with Rule 400.1406(2), **the capacity of this home may not exceed 5**.

The home has one full bath and two half-baths accessible to residents. (An additional full bath is located in the children's play room.) A large living area (14.4' x 15.7 = 226 sq. ft.) is located in the ground-level area. The additional living room (16' x 19' = 304 sq. ft.) and a separate dining area (15.2 x 18.4' = 279 sq. ft.) on the main level provide more than sufficient living space for the residents and other occupants of the home. A locking cabinet is provided for medications.

## **B.** Program Description

Applicant Jennifer Chism has prior experience working in Adult Foster Care and nursing home facilities. Mrs. Chism has also completed DCH-approved training for working with developmentally disabled and mentally ill adults. The applicant is thus familiar with record keeping and other rule requirements. Licensing Record Clearances were conducted on the applicant and on Mr. Chism (a member of the household) without incident. Mrs. Chism has a procedure for determining good moral character of other responsible persons. The financial documents submitted provided evidence of financial stability and capability. Medical clearances for Mr. and Mrs. Chism show that both are in good health and free from communicable TB.

The AFC will provide basic care for Developmentally Disabled and/or Mentally III residents. The AFC home will provide recreational activities in the home, and will provide outings for residents, as well as transportation to medical appointments and other activities as needed.

The applicant has been advised that Rule 400.1406(1) requires that more than one responsible person be present to provide care if more than five residents and 3 children (under the age of 12) are present at any one time.

#### C. Rule/Statutory Violations

The home has been found to be in full compliance with applicable rules.

## IV. RECOMMENDATION

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

Diane L Stier Licensing Consultant Date

Approved By:

Jack R. Failla Area Manager Date