



JENNIFER M. GRANHOLM
GOVERNOR

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



MARIANNE UDOW
DIRECTOR

December 16, 2004

Thomas, Robert and Susan
1331 20th Street
Port Huron, MI 48060

RE: Application #: AF740271686
RST AFC
2915 Linda Ct.
Port Huron, MI 48060

Dear Mr. And Mrs. Thomas:

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 (586) 412-6802.

Sincerely,

Maureen J. Fisher, Licensing Consultant
Office of Children and Adult Licensing
Suite 301
16000 Hall Road
Clinton Township, MI 48038
(586) 412-6832

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF740271686

Applicant Name: Thomas, Robert and Susan

Applicant Address: 1331 20th Street
Port Huron, MI 48060

Applicant Telephone #: (810) 982-2798

Administrator/Licensee Designee: N/A

Name of Facility: RST AFC

Facility Address: 2915 Linda Ct.
Port Huron, MI 48060

Facility Telephone #: (810) 982-2798
11/16/2004

Application Date:

Capacity: 6

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
AGED
PHYSICALLY HANDICAPPED

II. METHODOLOGY

11/16/2004	Enrollment
11/18/2004	Application Incomplete Letter Sent Record Clearance for Janice Linebach, relative living in home
12/01/2004	Contact - Telephone call made Advised applicant of documentation needed; follow up by letter.
12/02/2004	Application Incomplete Letter Sent
12/4/2004	Contact – document received. Letter from applicants confirming that Janice Linebach will not be living in the home.
12/06/2004	Inspection Completed On-site
12/16/2004	Contact – documents received: Verification of transfer of ownership to applicants, verification of marriage for name change of Susan Thomas with request to amend application for name change, and verification of completion of repairs.
12/16/2004	Application Complete

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This facility is a two-story, brick with aluminum trim home with an attached, 2-car garage. The home is on a lot measuring 159 X 162 feet in a residential neighborhood in Port Huron, Michigan. The home features a family room, dining room, kitchen, laundry room, full bathroom, and one resident bedroom on the first floor of the home and three bedrooms, a room that will be used as an office, and a full bathroom on the second floor. The gas, forced-air furnace and gas water heater are located on the first floor of the home. The home does not have a basement. The family and dining rooms contain 471 square feet of multipurpose space and will accommodate six residents. The first floor of the home is wheelchair accessible. The bedrooms measure as follows:

- Bedroom #1 is on the first floor of the home, measures 266 square feet, and will accommodate two residents as currently arranged.
- Bedroom #2 is located on the east side of the second floor of the home, measures 146 square feet, and will accommodate two residents.
- Bedroom #3 is located on the north side of the second floor of the home, measures 243 square feet, and will accommodate two residents.

A master bedroom occupied by the facility owners is located on the second floor of the facility; this room was not measured, as residents will not use it.

The facility is serviced by public water and sewer systems. This consultant conducted a fire safety inspection on 12/6/2004 and found the facility to be in full compliance with all applicable fire safety rules and regulations. The home has an electrically-powered, interconnected, hard-wired smoke detection system with battery back up, installed and maintained by a licensed, electrical contractor. The plumbing, electrical, and heating systems were all in good working condition at the time of the 12/6/2004 inspection. The home was previously licensed as an adult foster care facility providing specialized care and was purchased by the applicants, Robert and Susan (Smalstig) Thomas.

Zoning approval is not required for this facility as it meets the requirements of the Federal Fair Housing Amendments.

B. Program Description

1. Administrative Structure and Health:

On 11/16/2004, the Department received an application from Robert Thomas and Susan Smalstig Thomas for a program for up to six aged, mentally ill, developmentally disabled, and/or physically handicapped adult females. Mr. And Mrs. Thomas will both be providing care to the residents of the facility. Mrs. Thomas has previously owned and operated an adult foster care facility in St. Clair County. Mr. And Mrs. Thomas are pursuing a contract to provide specialized care and have completed training from St. Clair County Community Mental Health to provide such care.

Good moral character requirements were explained to the applicants and they indicated they intend to comply with these requirements. Licensing record clearances were completed as to Robert and Susan (Smalstig) Thomas. A current medical clearance request and release form has been received certifying that Robert Thomas and Susan Smalstig Thomas are in good physical health and free from communicable tuberculosis.

All program materials were reviewed either on site or in the office. This consultant has determined the applicant was in full compliance with all applicable rules and regulations. The applicants indicated that they might wish to change the allocation of resident bedroom space to have three of the maximum allowable six residents for the facility located in the first floor bedroom. The applicants were advised that they would need to submit a new floor plan for approval if changes are made in the current allocation of bedroom space in resident rooms.

2. Facility and Resident Records:

Facility and resident records have been discussed with the applicants. Mrs. Thomas reported that she also worked with the former licensee on preparation of new resident records due to the transition of the facility from one licensee to the Mr. And Mrs. Thomas. Resident records are in place. Rule requirements have been reviewed with

the applicants. All required records will be reviewed thoroughly prior to the expiration of the six-month temporary license.

C. Rule/Statutory Violations:

None.

IV. RECOMMENDATION

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

Maureen J. Fisher
Licensing Consultant

Date

Approved By:

Candyce Crompton
Area Manager

Date