



STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

June 29, 2006

Maryanna Hart, Designee
Hernandez Home LLC
P.O. Box 277
Bloomingtondale, MI 49026

RE: Application #: AS030282002
Hernandez Home
94 - 45th Street
Bloomingtondale, MI 49026

Dear Ms. Hart:

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 (269) 337-5066.

Sincerely,

Donna Konopka, Licensing Consultant
Office of Children and Adult Licensing
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 337-5241

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS030282002

Applicant Name: Hernandez Home LLC

Applicant Address: 44409 Baseline Road
Bloomingtondale, MI 49026

Applicant Telephone #: (269) 317-4433

Administrator/Licensee Designee: Maryanna Hart

Name of Facility: Hernandez Home

Facility Address: 94 - 45th Street
Bloomingtondale, MI 49026

Facility Telephone #: (269) 317-4433

Application Date: 02/23/2006

Capacity: 6

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
PHYSICALLY HANDICAPPED
TRAUMATICALLY BRAIN INJURED

II. METHODOLOGY

02/23/2006	Enrollment
02/28/2006	Inspection Report Requested - Health Invoice #1010043
02/28/2006	File Transferred To Field Office Kalamazoo
03/24/2006	Application Incomplete Letter Sent
05/12/2006	Inspection Completed On-site
06/06/2006	Inspection Completed On-site

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a single story dwelling built over a walkout basement in a rural area of Allegan County. The facility has been licensed as an adult foster care family home, and most recently is licensed as an adult foster care small group home. The facility has 5 resident bedrooms, 4 single occupancy rooms and 1 for 2 residents. Bedroom measurements are on file and the home has adequate living space for the 6 residents. All the bedrooms are located on the first floor of the facility. One bathroom is located in a resident bedroom, and there are 2 other bathrooms in the facility available for resident use. The facility is wheelchair accessible.

A gas forced air furnace is located on the main floor in a 1 hour rated fire enclosure. A statement from a qualified inspection service has been provided which indicates the furnace is in safe condition and properly installed. An electric hot water heater is also located on the main floor. The consultant conducted fire safety inspections on 5-12-06 and 6-6-06, and found the facility to be in substantial compliance with the applicable fire safety rules.

The facility has private water and sewage systems. A report from the Allegan County Environmental Health Department gave the facility an "A" rating on 1-11-06. An "A" rating indicates substantial compliance with the applicable environmental health rules.

Program Description

Hernandez Home will provide specialized services to male and female residents over the age of 18 years, who have developmental disabilities, mental illness, traumatic brain injuries or who are aged. The facility is wheelchair accessible.

Hernandez Home LLC is the applicant. Hernandez LLC filed Articles of Organization in Michigan on 4-14-04, and Tracie Hernandez is the Resident Agent for the LLC. Ms. Hernandez has appointed Maryanna Hart to be the Licensee Designee and Administrator for the facility. John and Tracie Hernandez own the property, which has been previously licensed to them as an adult foster care family home, and more recently as an adult foster care small group home licensed to Ms. Hernandez.

Financial information provided indicated the LLC and facility are in substantial compliance with the applicable rules.

Ms. Hart has submitted a Licensing Medical Clearance form and a Licensing Record Clearance has been completed. These reports indicated she was in substantial compliance with the applicable rules. Ms. Hart was the Administrator for the previous licensee of this facility. Ms. Hart will be responsible for overseeing the hiring, training and supervision of shift staff, who will be providing the residents with direct care services and supervision. The facility will provide a minimum 1:6 staffing ratio, higher if indicated by the needs of the residents. It should be noted that staff and residents are currently in place, as this facility is undergoing a change of licensee.

The requirements for resident records and employee records were reviewed with Ms. Hart at the final inspection. Ms. Hart was also provided Resident Rights forms, as she will be responsible for reviewing them with all admissions. Ms. Hart was also advised that although residents and staff are currently in place at this facility, when the new license is issued to the applicant all paper work for residents and staff will need to be treated as a new placement for the residents and new hires for the employees. Ms. Hart was provided technical assistance on the statutory requirements, Section 400.734b of PA 218, pertaining to the hiring or contracting of persons who provide direct services to residents.

IV. RECOMMENDATION

The applicant was found to be in substantial compliance with the licensing act and applicable administrative rules, therefore the issuance of a temporary license for 6 residents to this adult foster care small group home is recommended.

Donna Konopka

6-29-06

Donna Konopka
Licensing Consultant

Date

Approved By:

Gregory V. Corrigan

06/30/2006

Gregory V. Corrigan
Area Manager

Date