

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



MARIANNE UDOW DIRECTOR

JENNIFER M. GRANHOLM GOVERNOR

July 11, 2006

Kevdaco Human Services P.O. Box 502 Southfield, MI 48037

> RE: Application #: AS820282017 Kevdaco Westland I 1900 Martin St. Westland, MI 48185

Dear Kevdaco Human Services:

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 (734) 665-4740.

Sincerely,

pey Jo: Bozaik

Jeff Bozsik, Licensing Consultant Office of Children and Adult Licensing 2121 W. Stadium Ann Arbor, MI 48103 (734) 665-4741

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

I. IDENTIFYING INFORMATION

License #:	AS820282017
Applicant Name:	Kevdaco Human Services
Applicant Address:	#200 23999 Northwestern Hwy Southfield, MI 48075
Applicant Telephone #:	(248) 569-1040
Administrator/Licensee Designee:	Kevin Uwazurike
Name of Facility:	Kevdaco Westland I
Facility Address:	1900 Martin St. Westland, MI 48185
Facility Telephone #:	(248) 569-1040
Application Date:	02/27/2006
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED MENTALLY ILL DEVELOPMENTALLY DISABLED

II. METHODOLOGY

02/27/2006	Enrollment
03/01/2006	Application Incomplete Letter Sent Sending Itr req. completion of application as it is incomplete.
03/09/2006	Contact - Document Received completed application rec'd
03/10/2006	File Transferred To Field Office Ann Arbor
03/22/2006	Application Incomplete Letter Sent
03/28/2006	Inspection Completed On-site
07/06/2006	Inspection Completed On-site
07/11/2006	Inspection Completed-BFS Full Compliance
07/11/2006	SC-Application Received - Original
07/11/2006	SC-ORR Response Received-Approval
07/11/2006	SC-Recommend MI and DD
07/11/2006	SC-Certification issued MI and DD

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a former ranch style day care center. There is both public water and public sewer. The facility is wheelchair accessible. There is 543 s.f. of living space. The bedrooms measure: 1) NW: 192 s.f.; 2residents NE: 118 s.f.- 1 resident; the other 4 bedrooms all measure 154 s.f.

The home will be licensed for 6 residents.

The home has hard wired interconnected smoke detectors and is in compliance with fire safety rules.

Kevin Uwazurike owns the home.

B. Program Description

1. Administrative structure and capability

Kevdaco Human Services LLC is the applicant for the home. The corporation has designated Kevin Uwazurike as the licensee designee and administrator. Dr. Uwazurike will employ direct care staff in the home.

2. Qualifications and competencies

The department has received acceptable licensing record clearances, medical certifications and TB test results on the Dr. Uwazurike.

Dr. Uwazurike meets the requirements of licensee designee and administrator.

3. Program Information

The home will provide room and board, personal care and supervision for adults.

The home is certified to provide specialized residential services to both the mentally ill and developmentally disabled populations. Additionally, the facility is licensed to serve individual with traumatic brain injury and can accommodate physically handicapped and wheelchair residents. See program statement for details.

C. Rule/Statutory Violations

There are no rule/statutory violations.

IV. RECOMMENDATION

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

ffrey Jr. Bozaik

Jeff Bozsik Licensing Consultant

Date: 7/11/06

Approved By:

Gregory Rice

7/18/06

Date

Gregory Rice Area Manager