



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

January 9, 2007

Carol Pitcher
315 Tower
White Lake, MI 48386

RE: Application #: AF630286663
Carol Pitcher Home
315 Tower
White Lake, MI 48386

Dear Ms. Pitcher:

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 and special certification with a maximum capacity of 1 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 (248) 975-5051.

Sincerely,

Ruth McMahon, Licensing Consultant
Office of Children and Adult Licensing
Suite 358
41000 Woodward
Bloomfield Hills, MI 48304
(248) 975-5084

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF630286663
Applicant Name:	Carol Pitcher
Applicant Address:	315 Tower White Lake, MI 48386
Applicant Telephone #:	(248) 698-2935
Administrator/Licensee Designee:	N/A
Name of Facility:	Carol Pitcher Home
Facility Address:	315 Tower White Lake, MI 48386
Facility Telephone #:	(248) 698-2935 10/17/2006
Application Date:	
Capacity:	1
Program Type:	DEVELOPMENTALLY DISABLED PHYSICALLY HANDICAPPED

II. METHODOLOGY

10/17/2006	Enrollment
10/26/2006	Application Incomplete Letter Sent
11/17/2006	Inspection Completed On-site
11/17/2006	Inspection Completed-BFS Sub. Compliance
12/11/2006	Inspection Completed On-site
12/12/2006	Contact - Face to Face
12/12/2006	SC-Application Received - Original
12/18/2006	Inspection Completed-Env. Health : A received 1/4/2007

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Carol Pitcher Home is a small bungalow home located in White Lake, in Oakland County. The home is located off Union Lake Road, between Elizabeth Lake and Cooley Lake Road in White Lake. The home has a fence around the back yard. The surrounding homes are of various sizes and models. The home does not have a garage. Parking is available in the driveway and on the street. The home has a ramp in the front. The home has a large living room, a dining area, a kitchen, two bedrooms, two full baths and a TV room on the first floor.

The home has a basement. The basement contains the washer, dryer, heating plant and hot water tank.

The home has private water and private sewage system. An Environmental Health Inspection was completed on December 18, 2006 and the facility was determined to be in substantial compliance with applicable rules.

1st floor Bedroom 1 is licensee's bedroom and was not measured.

1st floor Bedroom 2 measured 11'5" x 8'5' equals 96 square feet. The capacity is one resident.

The living room measured 14'5" x 11'10" plus 9'10" x 11'4" equals 279 square feet. The dining room measures 12' x 8'3" equals 99 square feet. The TV room measured 13'5" x 10'3" equals 137.5 square feet. The total living space equals 515.5 square feet.

Based upon the above information, it is concluded that the facility has more than the required 35 square feet of indoor living space for one resident and Ms. Pitcher, the licensee.

On October 17, 2006 the department received a license application from Ms. Carol Pitcher, for an Adult Foster Care Family Home at the above referenced address, in White Lake, Michigan. She is seeking to operate a program of care for one non-ambulatory, developmentally disabled adult male. Ms. Pitcher is currently licensed as a children's home through Macomb Oakland Regional Center. The home is equipped to accept residents in wheelchairs.

On December 12, 2006, Ms Pitcher submitted an application to provide a specialized program to one male resident who is physically handicapped and who is developmentally disabled. Ms. Pitcher will continue to contract with Macomb Oakland Regional Center.

The following is a report of the findings of the pre-licensing evaluation for the Carol Pitcher Home. The evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the administrative rules governing operation of the Adult Foster Care Family Homes, with an approved capacity of one to six residents. Licensed or proposed to be licensed after March 27, 1980.

1. Fire Safety evaluation and approval, by the assigned consultant.
2. On-site inspections by the assigned consultant.
3. Review of all application materials submitted.
4. Review of environmental sanitation requirements by the assigned consultant.

At the time of the final inspection the facility was found to be in substantial compliance with departmental requirements relating to physical plant.

At the time of the final inspection, the home was found to be in compliance with all smoke detection units and fire extinguishers.

An evacuation plan and written procedures to be followed in case of fire, medical and severe emergency was posted, as required. Required emergency phone numbers were observed posted by the telephone. Ms. Pitcher indicated it is her intention to conduct a minimum of four fire drills per year, with two of the four required drills conducted during sleeping hours. A record of the drills will be kept in the home.

A steel door is located at the top of the basement steps and is used to separate, the heat producing equipment located in the basement from the rest of the home

Ms. Pitcher will be the primary caregivers for the resident of the adult foster care and the maintenance of the records.

Medical Clearance Forms have been submitted for Ms. Carol Pitcher, and indicate that she is in good physical and mental health, and have no limitations for work with or around adult foster care residents. Negative tuberculin tests have also been submitted

At the time of application, Ms. Pitcher submitted a Licensing Record Clearance Request. The clearance record results did not indicate anything that posed an obstacle to a determination of Good Moral Character for the applicants.

Ms. Andrea Pepper has been identified as the responsible person, in the event Ms. Pitcher will be away from the home for longer than 72 hours. A Medical Clearance has been submitted and indicate Ms. Pepper is in good health and moral character to work with adult foster care residents.

At the final inspection, technical assistance was provided to the licensee in completing required forms and documentation.

At final inspection, the facility was determined to be in compliance with all applicable rules.

All rule violations cited at the initial inspection have been corrected.

IV. RECOMMENDATION

I recommend issuance of a temporary license and special certification to this AFC adult family home (capacity 1).



Ruth McMahon
Licensing Consultant

01/09/2007
Date

Approved By:



Barbara Smalley
Area Manager

01/10/2007
Date