



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

June 14, 2007

Marianne Hoffmann
VCM of Michigan, Inc.
2501 Clinton
St Clair, MI 48079

RE: Application #: AM740288527
Visions of St. Clair
868 N. Carney Dr.
St. Clair, MI 48079

Dear Ms. Hoffmann:

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 12 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,

Michael Swajanen, Licensing Consultant
Office of Children and Adult Licensing
39531 Garfield
Clinton Township, MI 48038
(586) 412-6833

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM740288527
Applicant Name:	VCM of Michigan, Inc.
Applicant Address:	2501 Clinton St Clair, MI 48079
Applicant Telephone #:	(810) 329-9116
Administrator/Licensee Designee:	Marianne Hoffmann, Designee
Name of Facility:	Visions of St. Clair
Facility Address:	868 N. Carney Dr. St. Clair, MI 48079
Facility Telephone #:	(810) 326-1688 02/13/2007
Application Date:	
Capacity:	12
Program Type:	AGED ALZHEIMERS PHYSICALLY HANDICAPPED

II. METHODOLOGY

02/13/2007	Enrollment
02/15/2007	Inspection Report Requested - Fire Change of Ownership
02/15/2007	Inspection Report Requested - Health
02/15/2007	File Transferred To Field Office CT
02/20/2007	Contact - Document Received Licensing file received from Central Office on 2/20/2007.
03/14/2007	Inspection Completed-Env. Health : A
03/29/2007	Inspection Completed On-site
04/03/2007	Application Incomplete Letter Sent
06/12/2007	Inspection Completed On-site
06/12/2007	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Visions of St. Clair is an extremely clean and attractively furnished, one-story, barrier free facility located in a residential area of the City of St. Clair. The facility will utilize the City of St. Clair's public water and sewage systems. The home consists of a spacious dining area, sitting area, and living rooms. These rooms contain a total of 778.60 square feet of indoor living space. The facility will provide foster care services to twelve adults with no live in staff requiring 420 square feet of indoor living space. Compliance to the requirements of Rule 405.1 has been determined.

The bedrooms contain the following dimensions and licensed capacities:

Bedroom	Square Feet	Capacity
#1	131.04	1
#2	157.90	2
#3	124.63	1
#4	124.63	1
#5	142.75	1
#6	142.75	1
#7	149.62	1

#8	218.70	2
#9	194.88	2

Based on the above designations and calculations the facility has the square footage to house twelve ambulatory or non-ambulatory adults as outlined above.

At final inspection all facility and bedroom furnishings were in full compliance with administrative rule requirements.

On March 6, 2007, a letter was received from the City of St. Clair verifying a special use approval had been granted to operate a twelve-bed adult foster care facility at this address.

On May 31, 2007, Cindy Redburn, Region II Fire Marshal Inspector, conducted a fire safety inspection at the facility. A final fire safety approval was granted on this date.

On May 14, 2007, Greg Brown, registered sanitarian, St. Clair County Health Department, conducted an environmental health inspection at the facility. The facility was found to be in compliance with all applicable rules.

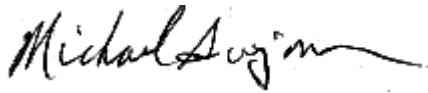
B. Program Description

This facility was originally licensed on May 1, 1998 as an adult foster care small group home, capacity 1-6, License # AS740079245. On February 15, 2001, the corporation filed an application for a change in category to provide foster care services to twelve adults, License # AM740095755. An original license was issued on January 3, 2002, and has been subsequently renewed without incident. On February 14, 2007, VCM of Michigan, Incorporated, filed an application for a change in licensee.

The for profit corporation has submitted documentation verifying it is registered and active with the Michigan Department of Labor and Growth. The home will consider private pay residents for admission. The facilities admission discharge policy, refund agreement, program statement, and personnel policies have been submitted for review and are acceptable as written. In addition the corporation has submitted documentation verifying it will have the funding required to provide the program as stipulated. At final inspection the facility was found to be in compliance with administrative rule requirements relating to facility records. Also the administrator was advised of and administrative rule requirements relating to employee and resident files and indicated their intent to comply with these requirements. Competent staff has been employed to assure the delivery of adult foster care services.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult medium group home (capacity 7-12).



June 14, 2007

Michael Swajanen
Licensing Consultant

Date

Approved By:



June 14, 2007

Barbara Smalley
Area Manager

Date