



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

July 16, 2007

John Carter
N11644 Oakwood Rd. K-3
Daggett, MI 49821

RE: Application #: AF550291345
Carter's House
N11644 Oakwood Rd. K-3
Daggett, MI 49821

Dear Mr. Carter:

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 4 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 (906) 228-0781.

Sincerely,

Theresa Norton, Licensing Consultant
Office of Children and Adult Licensing
305 Ludington St
Escanaba, MI 49829
(906) 789-4606

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF550291345

Applicant Name: John Carter

Applicant Address: N11644 Oakwood Rd. K-3
Daggett, MI 49821

Applicant Telephone #: (906) 639-2661

Administrator/Licensee Designee: N/A

Name of Facility: Carter's House

Facility Address: N11644 Oakwood Rd. K-3
Daggett, MI 49821

Facility Telephone #: (906) 639-2661

Application Date: 06/25/2007

Capacity: 4

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
AGED

II. METHODOLOGY

06/25/2007	Enrollment
07/12/2007	Inspection Completed On-site
07/12/2007	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The home is a 1991 Schult Manufactured Home. The property sits in a serene, country setting. Mr. and Mrs. Carter own the home. Proof of ownership was provided and a copy of the mortgage deed is maintained in the file.

The single story home has 3 bedrooms (2 bedrooms are approved for resident use), 2 full bathrooms, a kitchen, and a combined dining area. In addition to the bedrooms, the facility has a large living room. There is a smoke detection system with a battery back. Approved bedrooms are located in the southwest corner of the home and have the following dimensions:

Bedroom #1	154 sq. ft.	Approved Capacity 2
Bedroom #2	168 sq. ft.	Approved Capacity 2

The facility has the square footage necessary to accommodate up to 4 residents as requested on the application. The facility is fully equipped with required furnishings, linens and dishware. It is the licensee's responsibility not to exceed their resident capacity.

The Delta County Public Health Department conducted a final inspection of the facility's private water and septic system on 01/09/2007. The Health Department recommendation determined that the facility is in substantial compliance with applicable environmental rules.

B. Program Description

The facility proposes to serve adults that are Aged, Developmentally Disabled, and Mentally Ill. The licensee has extensive experience working with the above named populations.

The care and services available in the home will be designed to provide assistance to adults and to promote each individual in maintaining an active and enjoyable life. The facility intends to sponsor activities such as shopping trips, gardening, holiday activities, etc. Carter's House will encourage family involvement.

Transportation to local medical appointments will be provided by the home as needed. Transportation to out-of-area appointments will be provided or arranged as necessary.

-Licensee and Administrator Qualifications

A licensing record clearance request was completed with no LEIN convictions recorded for the licensee. The licensee submitted a medical clearance request with a statement from a physician documenting good health and current TB-tine negative results.

The licensee has provided documentation to satisfy the qualifications and training requirements identified in the administrative family home rules.

The licensee acknowledged an understanding of their responsibility to assess the good moral character of each volunteer and employee of the facility. The licensees expressed that FBI fingerprinting and the Michigan State Police LEIN system will be utilized as the process to identify criminal history when assessing good moral character.

The licensee acknowledged an understanding of the administrative rules regarding medication procedures. The licensee have indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The licensee acknowledged an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The licensee has indicated their intention to achieve and maintain compliance with reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The licensees acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intend to comply.

The licensee is aware of and intends to comply with the provision of special diets that may be required for any resident.

The licensee acknowledged their responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, the licensee acknowledges his responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

C. Rule/Statutory Violations

None.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult family home (capacity 4).



07/16/2007

Theresa Norton
Licensing Consultant

Date

Approved By:



07/19/07

Deborah Clark
Area Manager

Date