

# STATE OF MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



December 3, 2007

Ms. Anna Paige Paige's Supervised Community Living Inc. G 3472 W Pasadena Ave Flint, MI 48504

RE: Application #: AS250293347

Paige Court Street 4069 W Court St Flint, MI 48532

Dear Ms. Paige:

Attached is the Original Licensing Study Report for the above referenced facility. You have submitted an acceptable written corrective action plan covering the violation cited in the report. 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 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 (989) 835-7241.

Sincerely,

Thomas F. Bauer

Tom Bauer, Licensing Consultant Bureau of Children and Adult Licensing 2320 W. Pierson Rd. Flint, MI 48504 (810) 787-7033

**Enclosure** 

### MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

#### I. IDENTIFYING INFORMATION

**License #:** AS250293347

Applicant Name: Paige's Supervised Community Living Inc

**Applicant Address:** G 3472 W Pasadena Ave

Flint, MI 48504

**Applicant Telephone #:** (810) 732-6485

Administrator/Licensee Designee: Anna Paige, Designee

Name of Facility: Paige Court Street

Facility Address: 4069 W Court St

Flint, MI 48532

**Facility Telephone #:** (810) 230-0766

Application Date: 10/24/2007

Capacity: 6

Program Type: MENTALLY ILL

DEVELOPMENTALLY DISABLED

#### II. METHODOLOGY

10/24/2007	Enrollment
10/25/2007	Application Incomplete Letter Sent Fee
11/01/2007	Application Complete/On-site Needed
11/01/2007	Inspection Report Requested - Health
11/15/2007	Inspection Completed On-site Final Inspection
11/15/2007	SC-Application Received - Original
11/15/2007	Corrective Action Plan Received
11/15/2007	Inspection Completed-BFS Sub. Compliance
11/16/2007	Corrective Action Plan Approved
11/14/2007	Inspection Completed- Env. Health: A

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The Paige Court Street Home is a ranch style home located at G-4069 W. Court Street in Flint. The home is a previously licensed facility that is being taken over by Paige Supervised Community Living Inc. Paige Supervised Community Living Inc. is an experienced Adult Foster Care provider, and currently holds 5 licenses for Adult Foster Care homes in Genesee County. The Paige Court Street Home is a former AIS/MR facility. The home sits on a nice size lot, and has a large driveway that can accommodate parking for several cars. Genesee County Community Mental Health Department requested that the applicant file this application to assume responsibilities for care. The previous licensee gave up its contract with Genesee County Community Mental Health Department.

The home is made up of a living room, which one enters from the front entrance, a large combination family room dining area, kitchen, and office area, which is next to the kitchen, and four bedrooms. Laundry facilities are located in a separate room off the kitchen. The home has two full size bathrooms, which are designed to accommodate non-ambulatory individuals. The furnace and hot water heater are located in a fire rated room, which is accessed from the garage.

I measured resident bedrooms at the time of the on-site inspection and recorded the following dimensions.

BEDROOM	DIMENSIONS	SQ. FOOTAGE	OCCUPANCY
Bedroom 1	14' 8" X 11	161	2
Bedroom 2	14' 8" X 11	161	2
Bedroom 3	14' 8" X 11	161	2
Bedroom 4	14' 8" X 11	161	2
		TOTAL	6*

The license capacity of the home will not exceed six.

The living space for the home is listed below:

The home has a living room area that measures 16' X 12. This provides 192 sq feet of living area. The dining/family area measures 22' 6" X 15. The combined square footage available is 529 square feet. The home has enough living area to accommodate 6 residents as proposed on the application.

#### 2. Fire Safety

The home has a fully integrated hard wired smoke detection system with battery backup, which meets the requirements of R 400.14505 as well as Special Certification requirements. The smoke heads are placed as required by the rule. The home has fire extinguishers, which meets the requirements of R 400.14506. The home also has a fully operational sprinkler system. The bedrooms of the home have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.14502, R 400.14503, and R400.14504.

The home has three separate and independent means of egress to the outside as required by R400.14507. The means of egress are all 36 inches wide to accommodate individual who require the use of a wheelchair. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width. The home exits are all at grade.

#### B. Administration/Program/Resident Care/Records

#### 1) Population to be served and Admission criteria:

The Applicant, Paige Supervised Community Living Inc., submitted a copy of a program statement to the Office of Children and Adult Licensing for review and inclusion in the licensing record. The document is acceptable as written. The facility will offer services to men 18 years or older who are mentally ill or developmentally disabled. In addition to 24-hour supervision, personal care, and protection, the program will provide specialized services as identified in the individual plan of service developed in cooperation with the Responsible Agency under special certification guidelines.

#### Applicant and household information/Corporate info or Individual:

The applicant, Central State Community Services Inc., is an experienced Adult Foster Care provider. The corporation is in good standing and currently holds licenses for 5 small and medium Adult Foster Care homes in Genesee County.

# 2) Applicant, Licensee Designee, Administrator – Qualifications, Experience, GMC, Competency:

Paige Supervised Community Living Inc. submitted a written statement naming Mrs. Anna Paige, the Licensee Designee for the corporation. The Licensee Designee's good moral character was assessed as part of the licensing process. Mrs. Paige possesses the educational background, experience, and training required by R 400.14201 and 202 to act as Licensee Designee. Mrs. Paige has been designated as the home administrator. She possesses the background and experience to act as administrator for the Paige Court Street home.

#### 3) Staffing Plan, Proposed Ratios:

The applicant submitted a proposed staffing pattern for inclusion in the home file. The staffing plan meets the requirements of R 400.14206 requiring sufficient staff for the supervision, protection, and personal cared needs of the proposed population. The staff to resident ratio will be 1:3 for all three shifts. Program supervisory individuals will also be available on an as needed basis.

#### 4) Records & Record Keeping:

As part of the application process the applicant submitted a program statement, admissions and discharge policy, refund policy and staffing pattern for review and inclusion in the home file. Personnel policies and procedures were reviewed at the time of the on-site inspection. Based on conversations with the applicant and

technical assistance given, and the experience of the applicant, I conclude that the applicant is aware of the rule requirements that pertain to records and record keeping.

As part of the licensing process, I have determined that Paige Supervised Community Living Inc. is in substantial compliance with rule R400.14103 regarding required information and reporting changes. The applicant has policies and procedures in place to meet the requirements of rules R400.14204 and R400.14205 regarding qualifications, training, good moral character, and health of employees. The applicant has an established procedure for staff training for its current homes. The applicant currently has a contractual agreement with Genesee County Community Mental Health Department to provide specialized services. The applicant is aware of the requirements of rule R400.14315, The Handling of Resident Funds, and has procedures in place to comply with the requirements of the rule.

In conclusion, the applicant and facility, by virtue of observation, interview, and review of program documentation, are found to be in substantial compliance with initial licensing requirements relating to General Provisions, Program Requirements, Environmental Conditions, and Fire Safety. A more complete evaluation of Resident Care, Services, and Records will be made at the time of license renewal.

Based on the information presented above, I conclude that the Applicant, Paige Supervised Community Living Inc., meets the minimum requirements of the licensing administrative rules for small group adult foster care facilities with an approved capacity of 1-12 residents, licensed or proposed to be licensed after 5/24/94.

## C. Rule/Statutory Violations

# R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

The applicant assumed responsibility for this home on an emergency basis, when the previous Corporate licensee relinquished its contract with Genesee County Community Mental Health Department. At the time of the on-site inspection, the carpeting in the family room area, the bedroom hallway, and the southeast bedroom was damaged and in need of replacement. In addition the linoleum in the kitchen and dining room area was worn, damaged, and in need of replacement. The applicant indicated that she is getting bids, and is negotiating with Genesee County Community Mental Health Department concerning the replacement of the carpet and linoleum. The applicant also completed an acceptable plan of correction at the time of the on-site inspection.

#### A VIOLATION IS ESTABLISHED.

# **IV. RECOMMENDATION**

Since the applicant has submitted an acceptable plan of correction, I recommend that a temporary license be issued.

Thomas F. Bauer	12/3/2007
Tom Bauer	Date
Licensing Consultant	
Approved By:	

Barbara Smalley

12/06/2007

Date

Area Manager