



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

September 9, 2008

Jeffrey Hunter
720 Hancock
Saginaw, MI 48602

RE: Application #: AF730281796
Hope AFC
720 Hancock
Saginaw, MI 48602

Dear Mr. Hunter:

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 (989) 835-7241.

Sincerely,

Kathryn A. Huber, Licensing Consultant
Office of Children and Adult Licensing
411 Genesee
P.O. Box 5070
Saginaw, MI 48605
(989) 758-1922

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF730281796

Applicant Name: Jeffrey Hunter

Applicant Address: 720 Hancock
Saginaw, MI 48602

Applicant Telephone #: (989) 928-2720

Administrator/Licensee Designee: Jeffrey Hunter

Name of Facility: Hope AFC

Facility Address: 720 Hancock
Saginaw, MI 48602

Facility Telephone #: (989) 790-3056

Application Date: 02/03/2006

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED

II. METHODOLOGY

02/03/2006	Enrollment
02/08/2006	Application Incomplete Letter Sent 1326 for Sherri Hart-(responsible person).
02/08/2006	Lic. Unit file referred for criminal history review NS Jeffrey Hunter
02/16/2006	Lic. Unit received criminal history file from review NS for Jeffrey
02/22/2006	Contact - Telephone call made Sherri Hart sent 1326 on 2-21-06.
02/22/2006	Contact - Document Received 1326 for Sherri Hart
02/23/2006	File Transferred To Field Office Midland
02/27/2006	Comment Application Packet Received from C.O.
05/03/2006	Application Incomplete Letter Sent
01/05/2007	Inspection Completed-BFS Sub. Compliance
02/06/2007	Contact - Telephone call made Phone Contact with Licensee Jeffrey Hunter
05/04/2007	Contact – Document received Received copies of Program Statement and Fee Policy
08/24/07	Contact – Face to face Contact at facility, left copies of AFC Licensing Record Clearances for Licensee and Responsible Person
05/28/2008	DAU completes criminal history review.
08/24/2008	Inspection Completed On-site
09/08/2008	Inspection Completed – BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Hope AFC is located in a residential area in the City of Saginaw. This is a three-story home with a basement. The first floor contains a kitchen, dining room, living room, full bathroom, and a bedroom that will not be licensed. Licensee Jeffrey Hunter occupies another bedroom located on the first floor. The second floor contains a full bathroom, a living room area, three bedrooms and a full bathroom. The residents will occupy the bedrooms on the second floor. The provider's children use the third floor. Hope AFC is air-conditioned.

The heat plant and hot water heater are located in the basement. The basement is separated from the rest of the house with fire rated door that is equipped with a self-closing device. This consultant determined Hope AFC to be in compliance with fire safety rules for family homes.

The home cannot accommodate wheelchairs.

The home has public water and sewer and is in compliance with environmental health rules.

The living room, dining room, and bedrooms were measured during the initial inspection and have the following dimensions:

Living room: 12' 8" X 19' 1" = 241.72 sq. ft.

Dining room: 15' 2" X 14' 7" = 221.18 sq. ft.

Resident bedrooms (Second floor)

NE bedroom: 15' 6" X 11' 4" = 175.6 sq. ft. (2 residents)

NW bedroom: 15' 6" X 11' 4" = 175.6 sq. ft. (2 residents)

SW bedroom: 15' 4" by 19' = 291.3 sq. ft. (2 residents)

The applicant has requested a license for six residents, and based on the above information can accommodate six residents.

B. Administrative/Program/Resident Care/Records

1. Population to be Served & Admission Criteria

The applicant intends to provide 24-hour supervision, protection and personal care to six (6) ambulatory, male and female adults whose diagnosis is mentally ill, aged, or developmentally disabled. The program will include social interaction skills, personal

hygiene, personal adjustment skills, public safety skills and transportation. A personal behavior support plan will be designed and implemented for each resident's individual needs.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, or the responsible person.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources including the public schools and library, local museums, and shopping centers. These resources provide an environment to enhance the quality of life and increase the independence of each resident.

2. Applicant and Household

Jeffrey L. Hunter is the applicant. The applicant also conducts business as Hope AFC. The applicant lives in the home with Christine Jacobs and her two children, Kayla and Alyssa Jacobs. The applicant has a designated person who can be available to supervise the residents in the applicant's absence.

3. Applicant, Licensee Designee, Administrator-Qualifications, Experience, Competency, Financial Capability & Stability and Good Moral Character

A licensing record clearance request was completed with a non-specified conviction recorded for the applicant. A licensing record clearance request was completed with no lien convictions for the responsible person. The applicant and responsible person submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

The applicant submitted financial information, and based on this information meets the requirements for financial stability and capability.

Jeffrey L. Hunter had a criminal conviction on 10/15/07 for Controlled Substance Possession of Marijuana. The criminal conviction was reviewed by the Disciplinary Action Unit and Mr. Hunter was determined to have good moral character. The criminal conviction was set aside by and the case dismissed on 04/29/08 by 53-B Judicial District Court, Livingston County, MI.

4. Staffing Plan, Proposed Ratios, Staff Training & Competencies

The supervision of residents in this family home licensed for (6) residents will be the responsibility of the family home applicant 24 hours a day / 7 days a week with the responsible person on call to provide supervision in relief.

The applicant acknowledges an understanding of the training and qualifications requirements for the responsible person or volunteers and/or staff to provide a specialized program prior to each person working in the home in that capacity or providing care to residents in the home.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those responsible persons or any additional staff or volunteers that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, the applicant has 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 applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee's file.

5. Records & Record Keeping

The applicant acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-day discharge written notice to a resident as well as when a resident can be discharged before the issuance of a 30-day written discharge notice.

Evacuation and emergency plans are posted in the facility and the applicant is aware that fire drills must be conducted and recorded.

The following resident records were reviewed with the applicant:

- Resident Identification Form
- Resident care Agreement
- Health Care Appraisal
- Medication Record
- Monthly Weight Record
- Assessment Plan
- Funds & Valuables Record Part 1 & 2
- Incident/Accident Report

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those

rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges 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 applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The applicant acknowledges 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 applicant acknowledges their 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.

The applicant was provided technical assistance on the statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct service or have direct access to residents. The applicant has indicated that the requirements and procedures outlined in 400.734b (3) will be utilized as the process to identify criminal history when assessing good moral character.

Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident and employee record keeping including the handling and accounting of resident funds.

The applicant is found to be in substantial compliance with the licensing act and applicable administrative rules.

IV. Recommendation

Based on the findings it is recommended that a temporary license be issued. The terms of the license will enable the licensee to operate an adult foster care home for six male residents that have been diagnoses with mental illness, developmentally disabled, or aged. The term of the license will be for a six-month period effective September 9, 2008.

Kathryn Huber

Kathryn A. Huber
Licensing Consultant

Date: 09/08/08

Approved By:

Gregory Rice

09/09/08

Gregory Rice
Area Manager

Date