



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



JENNIFER M. GRANHOLM  
GOVERNOR

ISMAEL AHMED  
DIRECTOR

July 28, 2010

Anna Masambaji  
2109 Walmar Estate Drive  
Lansing, MI 48917

RE: Application #: AS230306306  
Sunshine AFC Home II  
4106 Bridgeport  
Lansing, MI 48911

Dear Mrs. Masambaji:

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 (517) 241-2585.

Sincerely,

Roeiah Epps, Licensing Consultant  
Bureau of Children and Adult Licensing  
7109 W. Saginaw  
P.O. Box 30650  
Lansing, MI 48909  
(517) 241-9948

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

**I. IDENTIFYING INFORMATION**

**License #:** AS230306306

**Applicant Name:** Anna Masambaji

**Applicant Address:** 2109 Walmar Estate Drive  
Lansing, MI 48917

**Applicant Telephone #:** (517) 980-1925

**Administrator:** Anna Masambaji

**Name of Facility:** Sunshine AFC Home II

**Facility Address:** 4106 Bridgeport  
Lansing, MI 48911

**Facility Telephone #:** (517) 980-1925

**Application Date:** 01/08/2010

**Capacity:** 4

**Program Type:** MENTALLY ILL  
DEVELOPMENTALLY DISABLED  
AGED

## II. METHODOLOGY

01/08/2010	Enrollment
01/08/2010	Application Incomplete Letter Sent re: record clearance & letter allowing visit
02/23/2010	Application Incomplete Letter Sent
06/21/2010	Contact - Telephone call received
06/25/2010	Inspection Completed-BCAL Substantial Compliance
06/28/2010	Application Incomplete Letter Sent
06/28/2010	Confirming Letter Sent
06/30/2010	Contact-Telephone call received
07/16/2010	Inspection Completed On-site
07/16/2010	Inspection Completed-BCAL Substantial Compliance
07/16/2010	Application Incomplete Letter Sent
07/19/2010	Inspection Completed-BCAL Substantial Compliance
07/22/2010	Inspection Completed-BCAL Substantial Compliance
07/23/2010	Application Incomplete Letter Sent
07/26/2010	Application Complete/Onsite Needed
07/26/2010	Inspection Completed-BCAL Full Compliance
07/26/2010	Recommend License Issuance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

The home is located in a suburban community of Lansing on Bridgeport, north of the I-96 freeway. The facility is a bi-level brick and aluminum-sided home on a residential lot. The home has a paved driveway with a two car attached garage. The living and dining space in the home contains 348 sq. ft. of activity space. This is adequate for the proposed number of occupants. The front door opens to a foyer area and there are two levels to the home. The resident bedrooms are north of the kitchen and live-in staff bedroom. The home is not wheelchair accessible. The bedroom space is as follows:

Location	Dimensions	Square Footage	Capacity
Northeast bedroom	14'3" x 10'4"	147 sq. ft.	2
North bedroom	10'9" x 12'5"	134 sq. ft.	2

#### B. Program Description

The applicant intends to provide 24-hour supervision, protection and personal care to four ambulatory residents who are developmentally disabled, aged and mentally ill. The program will include social interaction, personal hygiene care and transportation.

#### C. Applicant and Responsible Person Qualifications

A criminal history background check was completed and the applicant is of good moral character. The applicant submitted a physician's statement documenting her good health and current TB test with negative results.

The applicant supplied verification of her high school diploma and years of experience working with mentally ill, developmentally disabled, and aged adults. The applicant also supplied verification of the necessary training.

The applicant has sufficient financial resources to provide for the adequate care of the residents as evidenced by the projected income from caring for AFC residents along with projected budget.

The applicant acknowledged it is her responsibility to assess the good moral character of employees and those who will have ongoing, regular and direct contact with the residents. The applicant intends to work in the facility as well as hire a 24 hour live-in staff person once more residents are admitted to the facility. There will also be one relief staff person. The applicant was also instructed about background check requirements.

The applicant was provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)), L-1 Identity Solutions (formerly Identix®), and the related documents required to be maintained in each employees record to demonstrate compliance.

The applicant acknowledged and understands the administrative rules regarding medication procedures. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet. A daily medication log will be maintained.

The applicant understands the administrative rules regarding informing each resident of their rights and providing a copy of those rights to them. The applicant acknowledged awareness of the administrative rules regarding discharge and procedural requirements for issuing written discharge notices.

The applicant also understands the administrative rules regarding discharge and procedural requirements for issuing written discharge notices.

The applicant understands the administrative rules regarding written and verbal reporting of accidents and incidents and the responsibility to conduct timely investigations of the cause. The applicant has indicated that it is her intention to maintain compliance with this requirement.

The applicant acknowledged it is her responsibility to maintain required resident records.

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-4).



7/28/2010

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Roeiah Epps  
Licensing Consultant

Date

Approved By:



7/28/10

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Betsy Montgomery  
Area Manager

Date