

RICK SNYDER GOVERNOR State of Michigan DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN DIRECTOR

June 4, 2012

Brenda White 21180 Gentner Warren, MI 48089

> RE: License #: AF500286756 White-CTH 21180 Gentner Warren, MI 48089

Dear Ms. White:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility. Your license has been modified per your request to decrease your capacity from 4 to 2.

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) 975-5053.

Sincerely,

phanie William

Stephanie A. Williams, Licensing Consultant Bureau of Children and Adult Licensing 39531 Garfield Clinton Township, MI 48038 (586) 256-2097

enclosure

MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING ADDENDUM TO ORIGINAL LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

| License #: | AF500286756 |
|----------------------------------|--------------------------|
| | |
| Licensee Name: | Brenda White |
| | |
| Licensee Address: | 21180 Gentner |
| | Warren, MI 48089 |
| | |
| Licensee Telephone #: | (810) 774-9559 |
| | |
| Administrator/Licensee Designee: | N/A |
| | |
| Name of Facility: | White-CTH |
| | |
| Facility Address: | 21180 Gentner |
| | Warren, MI 48089 |
| | |
| Facility Telephone #: | (586) 774-9559 |
| | |
| Capacity: | 2 |
| | |
| Program Type: | DEVELOPMENTALLY DISABLED |
| | PHYSICALLY HANDICAPPED |

II. Purpose of Addendum

On 03/06/2012, Ms. White submitted a request to modify the terms of the license to reduce capacity from four to two residents.

III. Methodology

| 01/13/2012 | On-site investigation conducted. Mrs. White disclosed that there were three additional household members living in the home and that the reduction of resident capacity had to change. |
|------------|--|
| 03/06/2012 | Contact – Document Received; application received to modify the capacity from four to two. |
| 03/15/2012 | Contact – Telephone call made; spoke with Ms. White in regards to completing onsite at time of renewal inspection. |
| 05/30/2012 | On-site inspection completed at the home; Measurements taken of bedrooms to reaffirm measurements taken during original licensure. |

IV. Description of Findings and Conclusions

White-CTH Adult Foster Care family home was originally licensed 11/28/2007 and approved for a capacity of four (4) residents. During an on-site investigation at the home on 01/13/2012, Ms. White stated that there were three additional family members residing in the home with her at this time.

On 05/30/2012, I completed an on-site inspection of the facility to assess and determine compliance with R400.1432(2)(4), R400.1427(1), and R400.1431(6) per Ms. White's request to decrease the capacity of the home from four to two due to the bedrooms used by residents would be shared by household members. Prior to the on-site inspection of the facility Household Member 1, Household Member 2, and Household Member 3 were fingerprinted or completed a licensing clearance record meeting the requirement of R400.1404 (5) and also completed medical clearances including tuberculosis testing with results meeting compliance with R400.1405 (1)(3).

The bedrooms were re-measured and consistent with the original measurements of 12'10 x10'3 (131.50) and 12'10 x11'7 (148.06) which meets compliance with R400.1432 (2) providing the required 65 square feet of usable floor space per bed. On 05/30/2012, Ms. White moved the second bed in bedroom #2 to meet compliance with R400.432 (4) allowing a 3-foot clearance between the beds. Bedroom #1 and bedroom #2 that was shared was being used by same sex occupants meeting the requirement of R400.1431 (6) of not having the opposite sex occupant share rooms.

The total square footage of community space is 404.22 square feet which includes the living room and dinette area, meeting and exceeding the requirements of R400.1427 (1) of the home for the required 210 square feet of living space needed for a total of six occupants in the home.

V. Recommendation

I recommend the facility's capacity be decreased from four to two.

Scohenie William

06/04/2012

Stephanie A. Williams Licensing Consultant Date

Approved By:

Denice J. Munn

06/04/2012

Denise Y. Nunn Area Manager

Date