



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

November 07, 2012

Salim Simwenyi and Susan Simwenyi
5972 Par View
Ypsilanti, MI 48197

RE: Application #: AF810324878
Sasse Adult Foster Care Home
5972 Par View
Ypsilanti, MI 48197

Dear Salim Simwenyi and Susan Simwenyi:

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 5 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,

Karen Davis, Licensing Consultant
Bureau of Children and Adult Licensing
301 E. Louis Glick Hwy
Jackson, MI 49201
(517) 262-8574

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF810324878

Applicant Name: Salim Simwenyi and Susan Simwenyi

Applicant Address: 5972 Par View
Ypsilanti, MI 48197

Applicant Telephone #: (734) 635-8781

Administrator/Licensee Designee: N/A

Name of Facility: Sasse Adult Foster Care Home

Facility Address: 5972 Par View
Ypsilanti, MI 48197

Facility Telephone #: (734) 340-5062
06/06/2012

Application Date:

Capacity: 5

Program Type: AGED

II. METHODOLOGY

06/06/2012	Enrollment
06/12/2012	PSOR on Address Completed
06/12/2012	Contact - Document Sent Rules & Act booklets
06/12/2012	Application Incomplete Letter Sent Rec cl's & FP's for Salim & Susan; rec cl for Desese, RP
06/27/2012	Application Incomplete Letter Sent
08/09/2012	Inspection Completed On-site
08/09/2012	Application Complete/On-site Needed
09/17/2012	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a large brick ranch home in the city of Ypsilanti Michigan in Washtenaw County. The home is located at 5972 Par View, Ypsilanti, Michigan 48197. There is sufficient parking for staff and visitor parking along the driveway. Attached to the home is a two-car garage.

The home has three bedrooms with two full baths. The resident rooms are located on the main floor which is off the living room and formal dining room area. The kitchen is located off the dining area. The dining room has a large patio door that leads to a wooden deck. The non-resident bedrooms are located in the basement. The basement is not approved for resident use.

The home has utilizes public water and sewage. The gas furnace and water heater is located in the basement. The door that leads to the basement is equipped with a 1-3/4 inch solid core door with automatic self-closing device and positive latching hardware.

The home has battery-powered, single station smoke detectors throughout the facility including sleeping area, living room, and basement. Fire extinguishers are located on both the main level and the basement. All smoke detectors were tested and found in working order at the time of the on-site inspection.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom#	Room Dimensions	Total Square Footage	Total Residents beds
Bedroom 1	14 x 11	154	1
Bedroom 2	14 x 12	168	2
Bedroom 3	15 x 14	210	2

The indoor living and dining areas measure a total of 429 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate **five (5)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicants intend to provide 24-hour supervision, protection and personal care to **five (5)** male and/or female residents who are aged. The program will include *social* interaction; opportunity for involvement in day programs and transportation. The applicants intend to accept referrals from Veterans Administration or residents with private sources for payment.

If required, behavioral management programs will be identified in the assessment plans. These programs shall be implemented only by trained staff and only with the prior approval of the resident, guardian, designated representative or the responsible agency.

In addition to the above program elements, it is the intent of the applicants to utilize local community resources for recreational activities including the library, local museums, shopping centers, and churches. These resources provide an environment to enhance the quality of life of residents.

C. Applicant and Responsible Person Qualifications

Criminal history background checks of Salim and Susan Simwenyi were completed on 05/16/12 and 05/19/12. The responsible person Des Des Desese was completed on 08/15/12. Salim and Susan Simwenyi and responsible person Des Des Desese were determined to be of good moral character to provide licensed adult foster care. The applicants and responsible person submitted statements from a physician documenting their good health and current negative tuberculosis test results.

The applicants have sufficient financial resources to provide for the adequate care if the residents as evidenced by the projected income from caring for AFC residents along with outside employment.

Mr. and Mrs. Simwenyi acknowledged the requirement that the licensees of an adult foster care family home must reside in the home in order to maintain this category of adult foster care licensure.

The supervision of residents in this family home licensed for **five (5)** residents will be the responsibility of the family home applicants, 24 hours a day, seven days a week. A responsible person will be on call in an emergency situation for up to 72 hours.

Mr. and Mrs. Simwenyi acknowledged that the number of responsible persons on duty in the home may need to increase in order to provide level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs.

Mr. and Mrs. Simwenyi acknowledged an understanding of the qualification and suitability requirements for the responsible person providing care to residents in the home.

Mr. and Mrs. Simwenyi acknowledged an understanding of the responsibility to assess the good moral character of employees. Mr. and Mrs. Simwenyi acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

Mr. and Mrs. Simwenyi acknowledged an understanding of the administrative rules regarding medication procedures. In addition, the applicants indicates that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Mr. and Mrs. Simwenyi acknowledge an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Mr. and Mrs. Simwenyi acknowledged the responsibility to obtain the required written assessment, written assessment plan, resident care agreement, and health care appraisal 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 updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Mr. and Mrs. Simwenyi acknowledged the responsibility to maintain a current resident record on file in the home for each resident and retain all of the documents required to be maintained within each resident's file.

