



RICK SNYDER  
GOVERNOR

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



MAURA D. CORRIGAN  
DIRECTOR

July 26, 2013

Antly Reddick II and Randeep Reddick  
12245 Allison Road  
Milan, MI 48160

RE: Application #: AF580338269  
A & R Premiere Care  
12245 Allison Road  
Milan, MI 48160

Dear Antly Reddick II and Randeep Reddick:

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 (313) 456-0380.

Sincerely,

Dennis R Kaufman, Licensing Consultant  
Bureau of Children and Adult Licensing  
Suite 3013  
1040 S. Winter  
Adrian, MI 49221  
(517) 260-3583

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AF580338269
<b>Applicant Name:</b>	Antly Reddick II and Randeep Reddick
<b>Applicant Address:</b>	12245 Allison Road Milan, MI 48160
<b>Applicant Telephone #:</b>	(734) 330-1126
<b>Administrator/Licensee Designee:</b>	N/A
<b>Name of Facility:</b>	A & R Premiere Care
<b>Facility Address:</b>	12245 Allison Road Milan, MI 48160
<b>Facility Telephone #:</b>	(734) 330-1126
<b>Application Date:</b>	01/18/2013
<b>Capacity:</b>	5
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED AGED

## II. METHODOLOGY

01/18/2013	Enrollment
01/23/2013	Inspection Report Requested - Health inv. 1021143
01/24/2013	Contact - Document Received app correction to Item 23
01/25/2013	Application Incomplete Letter Sent
02/04/2013	Inspection Completed-Environmental. Health : D Received PH disapproval report on 2/11/13.
02/22/2013	Application Incomplete Letter Sent
03/08/2013	Inspection Completed On-site
03/08/2013	Inspection Completed-BCAL Sub. Compliance
06/11/2013	Inspection Completed-Environmental Health A
06/14/2013	Contact - Face to Face Conducted follow-up inspection at facility.
07/17/2013	Contact - Document Received Received faxed documentation from applicants.
07/23/2013	Contact - Face to Face Conducted final on-site inspection of facility.
07/23/2013	Inspection Completed-BCAL Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

This home was constructed in 2001 and is a two story home with full walk-out basement and is situated on 6 acres in London Township. The home is in a rural area and located on a gravel road. The primary entrance to the home is located up a flight of steps that lead to a large deck. Upon entering the main entry, immediately to the left is a large resident bedroom and to the right is a stairway to the second level and beyond this is a family room that leads to the kitchen. Back at the entry door, upon entering straight ahead is a hallway that leads to the second resident bedroom, a full resident bathroom, a dining area, the doorway to the basement area and then immediately off the dining

area is the secondary exit that leads to a large deck area and to the back yard of the home. The stairway to the upstairs is immediately off the primary entrance; upstairs consists of one large resident bedroom, and one large bedroom with attached bathroom which will be used by the applicants. The basement is a full sized basement with high ceilings with a walkout exit door. This home will not be approved for wheelchair use due to the stairways that lead to both entrances.

This home utilizes a private water and sewage disposal system. The first inspection conducted by the Monroe County Public Health Department on 2/04/13 resulted in a disapproval rating due to the water supply. The Monroe County Health Department outlined the steps the applicants would need to take in order to obtain approval of the water system and the applicants complied. On 6/11/13, the Monroe County Health Department conducted a second environmental health inspection and granted a full approval of both the water and sewage disposal system.

The furnace, hot water heater, and dryer are located in the basement and are all fueled by natural gas. The basement entry door is located immediately off the dining area and the door is an approved steel fire rated door equipped with automatic self-closing device and positive latching hardware.

The home is equipped with an interconnected, hardwired smoke detection system with detectors located throughout the home and on each floor and were found to be in good operating condition when tested. The living room has a fireplace, the applicants' submitted documentation that the fireplace would not be used.

Resident bedroom locations and dimensions are as follows:

Bedroom	Room Dimensions	Total Sq. Footage	Total Resident Beds
N.E. Lower Level	16' 10" x 13'	218 sq. ft.	2
S. E. Lower Level	10' 6" x 13'	136 sq. ft.	1
S. W. Upper Level	20' x 12'	240 sq. ft.	2

The indoor living and dining areas measure a total of 310 sq. feet of living space. The applicants requested the facility to be licensed for 5 residents. This exceeds the minimum of 35 sq. feet per occupant requirement.

## **B. Program Description**

The applicants intend to provide 24-hour supervision, protection and personal care to 5 male and/or female residents who are developmentally disabled or aged. The program will include opportunities for retention and/or development in personal hygiene skills and social interaction in home activities as well as through community resources available in Monroe County. The applicants intend to accept referrals from Department of Human Services, Monroe Community Mental Health, or from 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 and religious activities for residents to participate in if they so choose. These resources provide an environment to enhance the quality of life of residents.

### **C. Applicant and Responsible Person Qualifications**

Criminal background checks on the applicants and responsible person were completed and they 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 of residents as evidenced by the projected income from caring for AFC residents along with their current outside employment.

The applicants 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 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.

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

The applicants acknowledged an understanding of the qualification and suitability requirements for the responsible person providing care to residents in the home.

The applicants acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicants 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](http://www.miltcpartnership.org)) and the related documents required to demonstrate compliance.

The applicants 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.

The applicants 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.

The applicants 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 the completing those forms and obtaining new signatures for each resident on an annual basis.

The applicants 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.

The applicants acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intend to comply. The applicants acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicants.

The applicants acknowledged an understanding of the administrative rules regarding informing residents of their resident rights and providing them with a copy of those rights. The applicants indicated intent to respect and safeguard these resident rights.

The applicant acknowledged 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 issuing a discharge before a 30-day discharge notice.

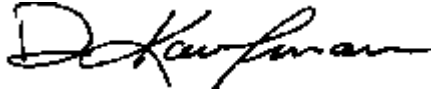
The applicants acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

#### **D. Rules or Statutory Violations**

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult family home with a capacity of 5 residents.



7/23/13

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Dennis R Kaufman  
Licensing Consultant

Date

Approved By:



7/26/13

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Ardra Hunter  
Area Manager

Date