



RICK SNYDER
GOVERNOR

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



MAURA D. CORRIGAN
DIRECTOR

August 26, 2013

DeElla Johnson
Andrews & Johnson Inc
P.O. Box 52
Mt. Morris, MI 48458

RE: Application #: AS250345774
Andrews & Johnson #4
7404 N Bray Road
Mt Morris, MI 48458

Dear Ms. Johnson:

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 (517) 373-2506.

Sincerely,

Lisa Gundry, Licensing Consultant
Bureau of Children and Adult Licensing
4809 Clio Road
Flint, MI 48504
(810) 931-1220

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS250345774

Applicant Name: Andrews & Johnson Inc

Applicant Address: P.O. Box 52
Mt. Morris, MI 48458

Applicant Telephone #: (810) 686-2198

Administrator/Licensee Designee: DeElla Johnson, Designee

Name of Facility: Andrews & Johnson #4

Facility Address: 7404 N Bray Road
Mt Morris, MI 48458

Facility Telephone #: (810) 686-2198
08/05/2013

Application Date:

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED
PHYSICALLY HANDICAPPED

II. METHODOLOGY

07/25/2013	Inspection Completed On-site
07/25/2013	SC-Inspection Completed On-Site
08/01/2013	Enrollment
07/25/2013	Inspection Completed-BCAL Full Compliance
08/26/2013	PSOR on Address Completed

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The Andrews and Johnson #4 home is a five bedroom home located at 7404 N. Bray Road, Mt. Morris in Genesee County. The home is located in a well-established neighborhood on a large wooded lot. The physical plant is a two story vinyl-sided structure with a large unfinished basement. The main floor consists of a living room area, a dining room, kitchen, and two resident bedrooms. The home has a full bathroom located on the main floor and second floor. Each bedroom has a closet or wardrobe. The facility has adequate storage areas. There is a driveway with a large area for staff and visitors to park.

The home has a furnace and hot water heater, which are located in the basement. Floor separation is achieved by a 1¾ inch solid core door equipped with an automatic self-closing device and positive latching hardware. The laundry facilities are located in the basement. The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational.

The facility has a private water and municipal sewer system. The facility was inspected by the Genesee County Health Department on February 20, 2013. The facility was determined to be in substantial compliance with all applicable rules.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1 st floor NW	11'5 x 9'8	110	1
1st floor NE	9'1 x 9'10	89	1
2 nd floor SE	12'1 x 9'1	110	1

2 nd floor SW	11'6 x 11	126.5	1
2 nd floor NW	13'6 x 9'7	130	2

The maximum capacity of bedroom square footage for residents in the home is (6) six.

The dining area measures 11'6 x 10'7, which is 121 square feet. This area can comfortably seat six (6) residents. The living room measures 287 square feet of living space. The total living space is 408 square feet, which exceeds the minimum of 35 square feet per resident requirement.

Compliance with Rule 400.14410, bedroom furnishings, was demonstrated at the time of the final inspection. The bedrooms were adequately furnished, clean, and met all applicable rules relating to environmental and fire safety requirements.

The home has two separate and independent means of egress to the outside. The means of egress were measured at the time of the initial inspection and exceed the 30 inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom and bathroom doors have conforming hardware and proper door width.

The home has fire extinguishers, which meets the requirements of R 400.14506. The bedrooms have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.1502, R 400.14503, and R 400.14504.

Based on the above information, it is concluded that this facility can accommodate **six (6)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity. This facility is not wheelchair accessible.

A. Program Description

The applicant, Andrews and Johnson Inc., submitted a copy of the required documentation to the consultant. Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to **six (6)** female ambulatory adults who are ages 18 and over with a diagnosis of developmentally disabled, physically handicapped, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. An assessment plan will be designed and implemented for each resident's social and behavioral developmental 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, and the responsible agency.

Andrews and Johnson, Inc will ensure that the resident's transportation and medical needs are met. Andrews and Johnson, Inc has transportation available for residents to access community-based resources and services. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

B. Rule/Statutory Violations

On 8/05/2013, Andrews and Johnson, Inc submitted an application to provide foster care services to six adults at 7404 N. Bray Road Mt. Morris, Michigan.

The applicant, Andrews and Johnson, Inc, which is a "Domestic Profit Corporation", was established in Michigan, on 04/06/1992. The licensee is an experienced adult foster care provider, currently operating two other licensed adult foster care facilities in Michigan. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility. The applicant has a board of directors that oversee the corporation.

Andrews and Johnson, Inc submitted a written statement naming DeElla Johnson as the licensee designee and as the facility administrator. Ms. Johnson submitted a licensing record clearance request that was completed with no LEIN convictions recorded. She also submitted a medical clearance request with statements from a physician documenting her good health and current TB-tine negative results. Ms. Johnson has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift. All staff shall be awake during sleeping hours.

The applicant acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff 1-to-6 resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (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 acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff 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.

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 an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

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.

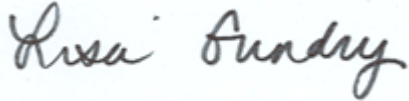
The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

D. Rule and Statutory Violations

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 1-6).

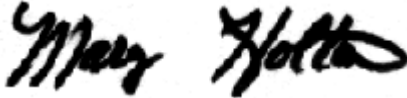


8/26/2013

Lisa Gundry
Licensing Consultant

Date

Approved By:



8/29/2013

Mary E Holton
Area Manager

Date