



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF HEALTH CARE SERVICES

MIKE ZIMMER
DIRECTOR

June 5, 2015

Joslyn Whitty
1271 New Jersey
Maryville, MI 48040

RE: Application #: AF740372374
Joslyn Home
1271 New Jersey
Marysville, MI 48040

Dear Ms. Whitty:

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 contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in black ink that reads "Karen J. LaForest".

Karen LaForest, Licensing Consultant
Bureau of Children and Adult Licensing
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(586) 256-1665

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AF740372374
Licensee Name:	Joslyn Whitty
Licensee Address:	1271 New Jersey Maryville, MI 48040
Licensee Telephone #:	(810) 357-5492
Administrator/Licensee Designee:	N/A
Name of Facility:	Joslyn Home
Facility Address:	1271 New Jersey Marysville, MI 48040
Facility Telephone #:	(810) 357-5492
Application Date:	02/04/2015
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

02/04/2015	On-Line Enrollment
02/10/2015	PSOR on Address Completed
02/10/2015	Application Incomplete Letter Sent Received clearance and fingerprints for Joslyn. Received clearances for Kaden, Ben and Michelle
02/27/2015	Comment FP's for Joslyn
03/02/2015	Contact - Document Received Received clearances for Joslyn, Michele, & Benjamin
03/02/2015	Lic. Unit file referred for criminal history review 1326 for Benjamin Blann
03/02/2015	Comment Unattached household member, Kaden
03/02/2015	Application Complete/On-site Needed
03/06/2015	Contact - Document Received Licensing file received from Central office
03/24/2015	Application Incomplete Letter Sent
05/11/2015	Contact - Document Received Received licensing documents via US mail.
05/11/2015	Contact - Telephone call made Called home to schedule appt. for preliminary inspection.
05/27/2015	Inspection Completed On-site Preliminary and Final Inspection conducted. Conducted physical plant inspection, fire safety inspection and reviewed resident record keeping with applicant.
05/27/2015	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Joslyn Home is located at 1271 New Jersey in Marysville, Michigan. The home is a vinyl sided bi-level home that is in an established neighborhood and is approximately

2758 square feet. The home is currently licensed as a family home identified as Young's Adult Foster Care, #AF740005623, licensee as Mary Young. This is a change of licensee as Mrs. Young is retiring. The home contains a spacious family room on the lower level, a bedroom for three residents, a full bathroom, a bedroom for the new applicant's young son, and an enclosed furnace/water tank/ wash and dryer room. The upper or main level contains the applicant's and her significant other's bedroom, a living room, two more bedrooms with one resident in each bedroom, a full bathroom, the kitchen and the dining area. The backyard contains a built in swimming pool and the applicant stated residents will only be permitted on the deck area or near the pool with direct supervision. A preliminary/final inspection was conducted on May 27, 2015. The home was in full compliance with family home licensing rules pertaining to environmental, physical plant and fire safety rules. During the final inspection, Mrs. Young, the current licensee, Ms. Whitty, the applicant, and Mr. Blann, member of household were present. Mrs. Young stated that all of the furniture, appliances, etc. will remain in the house as well as the current residents. The home has public water and sewage through the City of Marysville.

Ms. Joslyn Whitty is the intended licensee for the facility. Ms. Whitty stated that the following bedrooms will be utilized for residents:

<u>Bedroom location</u>	<u>Measurements</u>	<u>Square feet</u>	<u>No. of Residents</u>
Lower Bedroom	7'11" x 9'3" plus 15'9" x 8'10"	212.33	3
Central North	9' x 8'6" plus 2'3" x 2'11"	83.07	1
Northwest	12'1" x 9'8"	116.69	1

The facility is in compliance with Rule 400.1432 (2) and can accommodate five residents.

The home was nicely furnished, clean, and well maintained. There were no physical plant violations noted at the final inspection. The facility had soap and paper towels at the kitchen sink and in bathrooms for hand washing. Refrigerator and freezers have thermometers to ensure proper temperature against food spoilage. Medications are safeguarded and locked up. External medications are stored separately from internal medications. Poisons and caustics are locked and kept out of food preparation areas. There were no environmental hazards noted at the final inspection.

Measurements were taken of the living room, family room and dining room to determine usable floor space. The family room measured 27' x 14'5" or 389.34 square feet; the living room measured 15'8" x 12'3" or 191.84 square feet; and the dining room measured 14' x 9'5" or 131.88. Total square footage of indoor living space is 713.06.

Required indoor living space for eight occupants is 280.00 square feet (35 square feet times eight occupants). The home is in compliance with Rule 400.1427 (1) regarding living space.

A fire safety inspection was done on May 27, 2015. The alarm system is interconnected and when activated, was audible throughout the home. Fire extinguishers were mounted on the wall. The home submitted written procedures for severe weather, fire and medical emergencies. These were posted for public view. The schematic fire evacuation plan was posted as well as emergency telephone numbers. Fire drills were reviewed with the applicant and it is her intent to conduct twelve drills per year (4 day, 4 afternoons, and 4 sleep) and it is Ms. Whitty's intent to maintain E-scores and to have the smoke detectors checked annually. Ms. Whitty is in the process of securing a contract with St. Clair County Community Mental Health for continuation of special certification. Ms. Whitty submitted an electrical inspection dated April 13, 2015 by Donahue Electric, Inc. license #6111768, that indicated the electrical was checked and in good working order. A heating and cooling inspection was completed on April 23, 2015 by Shirkey Electric Co., Inc. that indicated the furnace is operating at proper CO level and that the flame sensor was replaced. The air conditioner was also noted to be operating properly.

B. Program Description

Ms. Joslyn Whitty submitted an application for an original license for a family home on February 4, 2015. The application states she will accept both males and females, 18 to 70 years old, who are mentally ill and/or developmentally disabled and ambulatory. The applicant has no other licensed adult foster care homes in Michigan. The proposed capacity is six however the applicant can only accept five residents. This application is a change of licensee from Mary Young, AF740005623, who is retiring.

Ms. Whitty submitted all the necessary documents for licensure including the following: credit report on Ms. Whitty, one month of liquid assets; house guidelines; electrical and heating and cooling inspections; floor plan; schematic fire evacuation plan; written emergency procedures for severe weather, fire, and medical emergencies; purchase agreement; fee policy; refund agreement; statement of permission to enter to inspect by Mary Young, current owner; medical clearance dated April 20, 2015 on Ms. Whitty indicating good physical and mental health and TB dated April 23, 2015 which was negative on Ms. Whitty; medical clearance on Benjamin Blann dated April 20, 2015 indicating good physical and mental health and TB testing which is negative on Mr. Blann dated April 6, 2015. Ms. Whitty was fingerprinted and is of good moral character with no criminal history.

Ms. Whitty and Mr. Blann will serve as caregivers for the residents. There is no other staff. The responsible person in the absence of Ms. Whitty and Mr. Blann is Michele Whitty. At the final inspection, Ms. Whitty and Mr. Blann will be informed of resident record keeping and the following documents were reviewed: Resident Information and Identification Record; Resident Care Agreement; Resident Assessment Plan; Resident

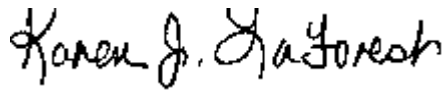
Medication Record; Resident Weight Record; Resident Funds and Valuables Part I and Part II; Resident Incident and Accident Reports; and Resident Health Care Chronological. Ms. Young stated she has been reviewing these documents with Ms. Whitty. I informed Ms. Whitty at the end of the temporary license, I will be reviewing resident records.

C. Rule/Statutory Violations

There was no rule or statutory violations at the final inspection.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult family home (capacity 1-6).

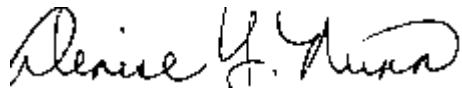


05/28/2015

Karen LaForest
Licensing Consultant

Date

Approved By:



06/05/2015

Denise Y. Nunn
Area Manager

Date