



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS

MIKE ZIMMER  
DIRECTOR

November 25, 2015

Princess Kennedy  
Asanpee Care  
PO Box 85766  
Westland, MI 48185

RE: Application #: AS820369149  
Stephanny Home  
31529 Warren Road  
Garden City, MI 48135

Dear Ms. Kennedy:

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 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 (313) 456-0380.

Sincerely,

A handwritten signature in cursive script that reads "Karen Davis".

Karen Davis, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 11-350  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 296-5412

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AS820369149

**Applicant Name:** Asanpee Care

**Applicant Address:** 415 Belton Street  
Garden City, MI 48135

**Applicant Telephone #:** (313) 522-9587

**Administrator/Licensee Designee:** Princess Kennedy

**Name of Facility:** Stephanny Home

**Facility Address:** 31529 Warren Road  
Garden City, MI 48135

**Facility Telephone #:** (313) 522-9587

**Application Date:** 11/17/2014

**Capacity:** 6

**Program Type:** MENTALLY ILL  
DEVELOPMENTALLY DISABLED

## II. METHODOLOGY

11/17/2014	Enrollment
11/19/2014	Contact - Document Sent Act and Rule Books
11/19/2014	Contact - Document Sent
11/19/2014	Application Incomplete Letter Sent finger prints for Princess
11/29/2014	Contact - Document Received Finger Prints for Princess Kennedy
04/15/2015	File Transferred To Field Office Detroit
05/06/2015	Application Incomplete Letter Sent
10/06/2015	Inspection Completed On-site
10/06/2015	Inspection Completed-BCAL Sub. Compliance
10/21/2015	Inspection Completed On-site All corrections completed that were noted in the conference letter.
10/21/2015	PSOR on Address Completed No hits for this address.

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

This is a large ranch home located in Garden city on a main thoroughfare. The address of the facility is 31529 Warren Rd., Garden City MI 48135. The ranch has four bedrooms and one full bath and one lavatory. It is wheelchair accessible no stairs in the facility. The two egresses lead out to level concrete surface. The main entrance leads to a large living room area. The dining area seats six people and is connected to small kitchen area. The medication is kept in a locked kitchen cabinet. The home utilizes public water supply and sewage disposal system.

The furnace is gas powered and both the water heater and furnace are located on the main floor. There is a 1-3/4 inch solid core door with an automatic self-closing device and positive latching hardware for the furnace room.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician. I observed that it was fully operational on 10/21/2015.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
Bedroom 1	8' x 12'	96	1
Bedroom 2	9' x 10'	97	1
Bedroom 3	13' x 12'	155	2
Bedroom 4	10'x 15'	150	2

The indoor living and dining areas measure a total of 400 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

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

This facility is wheelchair accessible and can accommodate wheelchairs.

## **B. Program Description**

The applicant(s) intends to provide 24-hour supervision, protection and personal care to six (6) both male and female residents who are mentally ill, physically handicapped, developmentally disabled, and aged. The age of the population to be served will be 18 to 80 years old. The Stephanny Home program statement states the following: "The programs will include necessary basic self-care and habilitation training for the residents. Basic self-care will teach and reinforce skills in dressing, grooming, eating, bathing, toileting and following simple directions. Personal adjustment services will be provided to the residents through counseling and individual therapy. Social education training will be provided including recreational participation such as group programs, community and recreational facilities utilization. Adult activity or day programming will be available to train resident in basic self-care skills, in-house activities of daily living, usage of community resources, hazard training, individual and group programs of therapy and education. Stephanny Home can provide other activities to the residents such as; taking them to movies, picnics, community fairs, and library and bringing some reading materials at home

Goals and objectives will range from maintenance of a participant in the community to the development of prevocational skills".

The applicant intends to accept referrals from County DHS, CMH, Veterans Administration or residents with private sources for payment.

**If needed by residents**, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

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

### **C. Applicant and Administrator Qualifications**

The applicant is Asanpee Care, a Domestic Non Profit Corporation, established in Michigan on 01/05/2005. 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 Board of Directors of Asanpee Care has submitted documentation appointing Princess Kennedy as licensee designee and administrator of the facility.

Criminal history background checks of Princess Kennedy licensee designee and administrator were completed and they were determined to be of good moral character to provide licensed adult foster care. Princess Kennedy licensee designee/administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Princess Kennedy licensee designee/administrator has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Ms. Kennedy has two existing Adult Foster Care Homes (Franny Home/AS820369142 and Redeem Home/AS820293694), she serves as the licensee designee and administrator. The population served at these homes is both male and female residents who are mentally ill, physically handicapped, developmentally disabled, and aged since 2007.

The staffing pattern for the original license of this six (6) bed facility is adequate and includes a minimum of one (1) staff for six (6) residents per shift. Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged that the staff to resident ratio may need to be increased 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. Asanpee Care and Princess Kennedy licensee designee/administrator has indicated that direct care staff will be awake during sleeping hours.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the responsibility to assess the good moral character of employees. Asanpee Care and Princess Kennedy licensee designee/administrator acknowledge(s) 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.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by Princess Kennedy licensee designee/administrator will administer medication to residents. In addition, Princess Kennedy licensee designee/administrator 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.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledge 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.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged the responsibility to maintain a current resident record on file in the home for each resident

and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Asanpee Care and Princess Kennedy licensee designee/administrator 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 residents' personal money transactions that have been agreed to be managed by the applicant.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. Asanpee Care and Princess Kennedy licensee designee/administrator indicated the intent to respect and safeguard these resident rights.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Asanpee Care and Princess Kennedy licensee designee/administrator acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

Princess Kennedy licensee designee/administrator has met the training and experience requirements as outlined in the administrative rules R. 400.14201/R. 400.15201.

#### **D. Rule/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 six-month temporary license to this adult foster care family home with a capacity of (six) 6.



11/12/2015

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Karen Davis  
Licensing Consultant

Date

Approved By:



11/25/2015

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Ardra Hunter  
Area Manager

Date