



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 24, 2019

Michael Kirby II  
Kirby's Adult Foster Care Service, Inc.  
2285 E. Lily Lake  
Harrison, MI 48625

RE: Application #: AS370400088  
**Kirby's Eagle Point AFC**  
**8114 E. Pickard**  
**Mt. Pleasant, MI 48858**

Dear Mr. Kirby II:

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 (517) 284-9720.

Sincerely,

A handwritten signature in cursive script that reads "Diane L. Stier".

Diane L Stier, Licensing Consultant  
Bureau of Community and Health Systems  
1919 Parkland Drive  
Mt. Pleasant, MI 48858-8010  
(989) 948-0560

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS370400088
<b>Applicant Name:</b>	Kirby's Adult Foster Care Service, Inc.
<b>Applicant Address:</b>	2285 E. Lily Lake Harrison, MI 48625
<b>Applicant Telephone #:</b>	(989) 539-7365
<b>Administrator:</b>	Michael Kirby II
<b>Licensee Designee:</b>	Michael Kirby II
<b>Name of Facility:</b>	Kirby's Eagle Point AFC
<b>Facility Address:</b>	8114 E. Pickard Mt. Pleasant, MI 48858
<b>Facility Telephone #:</b>	(989) 430-8061
<b>Application Date:</b>	06/03/2019
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODOLOGY

06/03/2019	Enrollment
06/10/2019	Application Incomplete Letter Sent AFC 100, 1326, RI-030 form,
06/18/2019	Contact - Document Received Email from applicant reporting progress.
06/19/2019	Application Complete/On-site Needed
06/19/2019	Inspection Completed On-site Physical Plant and Fire Safety, Documents received.
06/19/2019	Inspection Completed: BCAL- Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The property located at 8114 E. Pickard Rd., (M20), Mt. Pleasant, MI 48858, is owned by Community Mental Health for Central Michigan and leased to Kirby's Adult Foster Care Service, Inc. This facility was previously licensed to McBride Quality Care Services, Inc. and to Alternative Community Living, Inc. The property is approximately five miles east of the City of Mt. Pleasant. There is ample parking on the premises.

Eagle Point is a spacious one-story ranch situated on a two-block crawl space. The facility contains a large living room, family room, dining room, kitchen, activity room, six private bedrooms, two full bathrooms, one half-bathroom, office, utility, and furnace rooms. The capacity of this home will enable six developmentally disabled or mentally ill male or female residents to occupy the facility. The facility is heated with natural gas and is air conditioned. The facility is barrier free and wheelchair users can be accepted for admission with assurances of appropriate staffing.

The facility has two different heating devices located in separate rooms each with 1 ¾ solid core wood doors equipped with automatic self-closing devices with positive latching hardware. The furnace and boiler rooms are constructed of material that has a one-hour fire resistance rating. The boiler and furnace were inspected by Gary Haggart Plumbing & Heating on April 2, 2014, and determined to be in good operational condition. The facility is equipped with an interconnected, hardwired smoke detection system with battery backup, which was inspected by Fire Pros, Inc, and is fully operational.

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

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	15' 4" x 10' 7"	162.27	1
2	15' 4" x 10' 7"	162.27	1
3	14' 1" x 12' 2"	171.33	1
4	12' 10" x 10' 7"	135.81	1
5	11' 5" x 11' 3"	128.43	1
6	13' x 10' 11"	141.91	1

The living, dining, and activity rooms measure a total of 691.59 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement. The ceiling tiles on the east end of the facility are two differing types; Armstrong Contractor Series and USG Classic Ceilings. Both brands of ceiling tiles are rated Class A by Underwriters laboratories.

Emergency medical, social, educational, and recreational services are available within the City of Mt. Pleasant. This would include hospitals, mental health clinics, aging services, community education programs, and recreational programs.

Based on the above information, it is concluded that this facility can accommodate **six** residents 18 years of age or older, male or female, with developmental disability or mental illness. It is the licensee's responsibility not to exceed the facility's licensed capacity. The home may accept residents who require the use of a wheelchair.

## **B. Program Description**

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** male or female ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from Community Mental Health Services for Central Michigan. The licensee is also applying for Certification of Specialized Programs.

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.

Kirby's Adult Foster Care Service, Inc. will arrange or provide all transportation for program and medical needs. 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.

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

The applicant is Kirby's Adult Foster Care Service, Inc., which is a "For Profit Corporation" was established in Michigan, on April 7, 2010. 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 Kirby's Adult Foster Care Service, Inc. has submitted documentation appointing Michael J Kirby II as licensee designee and administrator for this facility.

A licensing record clearance request was completed with no criminal history convictions recorded for Mr. Kirby, licensee designee and administrator. Mr. Kirby submitted a medical clearance with a statement from a physician documenting his good health and current TB-tine negative results.

Mr. Kirby has served as licensee designee and administrator for Kirby's AFC [AS180308851] since August 2010 and meets the qualifications and training requirements identified in the administrative group home rules. This license has been in good standing since it was issued.

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

Kirby's Adult Foster Care Service, Inc. 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 to resident ratio.

Kirby's Adult Foster Care Service, Inc. acknowledges 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 offered technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)) and the related documents required to be maintained in each employee's record to demonstrate compliance.

Kirby's Adult Foster Care Service, Inc. 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, this 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.

Kirby's Adult Foster Care Service, Inc. 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, this 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.

Kirby's Adult Foster Care Service, Inc. acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. This applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

Kirby's Adult Foster Care Service, Inc. 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. This 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.

Kirby's Adult Foster Care Service, Inc. acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

Kirby's Adult Foster Care Service, Inc. 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, this 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.

Kirby's Adult Foster Care Service, Inc. 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/Statutory Violations**

Kirby's Adult Foster Care Service, Inc. 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).



Diane L Stier  
Licensing Consultant

June 20, 2019  
Date

Approved By:



06/20/2019

Dawn N. Timm  
Area Manager

Date